



SCOTTISH
FIRE AND RESCUE SERVICE

Working together for a safer Scotland

PUBLIC MEETING – SERVICE DELIVERY COMMITTEE
TUESDAY 24 FEBRUARY 2026 @ 1000 HRS
CONFERENCE ROOM, ARDROSSAN FIRE STATION,
MONTGOMERIE STREET, ARDROSSAN, KA22 8HW / VIRTUAL (MS TEAMS)

AGENDA

1 WELCOME

2 APOLOGIES FOR ABSENCE

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

4 DECLARATION OF INTERESTS

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

5 MINUTES OF PREVIOUS MEETING: TUESDAY 25 NOVEMBER 2025

(attached)

T Wright

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

6 ACTION LOG

Board Support

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

7 SERVICE DELIVERY

7.1 Service Delivery Update *(attached)*

A Watt

7.2 Local Senior Officer Performance Overview *(verbal)*

K Murphy

The Committee is asked to scrutinise these reports.

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

OFFICIAL

8 INSPECTIONS/AUDITS

- 8.1 Update from HM Fire Service Inspectorate (*attached*)
- 8.2 HMFSI Inspection Action Plan Update (*attached*)

*HMFSI
R Whetton*

The Committee is asked to scrutinise these reports.

9 SERVICE DELIVERY PERFORMANCE REPORTING

- 9.1 Quarterly Performance Report for Q3 2025/26 (*attached*)

A Watt

The Committee is asked to scrutinise the attached report.

10 COLLABORATION FOR HEALTH EQUITY IN SCOTLAND (*attached*)

*J Henderson/
K Murphy*

This report is for information only.

11 OPERATIONAL LEARNING: WILDFIRES 2025 SEASON (*attached*)

*C McGoldrick/
A Cameron*

This report is for information only.

12 SERVICE DELIVERY RISK REGISTER

- 12.1 Risk Update Report (*attached*)

*A Watt/
D Johnston*

The Committee is asked to scrutinise the attached report.

13 FORWARD PLANNING

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

T Wright

T Wright

14 REVIEW OF ACTIONS

Board Support

15 DATE OF NEXT MEETING

Thursday 4 June 2026

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.



SCOTTISH
FIRE AND RESCUE SERVICE

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PUBLIC MEETING – SERVICE DELIVERY COMMITTEE

TUESDAY 25 NOVEMBER 2025 @ 1000 HRS

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

PRESENT:

Tim Wright, Chair (TW)
Angiolina Foster (AF)
Madeline Smith (MS)

Paul Stollard, Deputy Chair (PS)
Andrew Smith (AS)

IN ATTENDANCE:

Andy Watt (AW)	Deputy Chief Officer
Jonathan Henderson (JH)	Assistant Chief Officer, Director of Prevention
Craig McGoldrick (CMcG)	Assistant Chief Officer, Director of Training, Safety and Assurance
Garry Mackay (GMack)	Deputy Assistant Chief officer, Head of Operations
Robert Scott (RS)	HMFSI
Bobby Lennox (BL)	Area Commander, Local Senior Officer Western Isles, Orkney and Shetland
Stuart Chalmers (SC)	Business Manager (Item 9 only)
Chris Fitzpatrick (CF)	Business Intelligence and Data Services Manager (Item 10 only)
Kirsty Darwent (KD)	Chair of the Board
Chris Casey (CC)	Group Commander, Board Support Manager
Heather Greig (HG)	Board Support Executive Officer
Debbie Haddow	Board Support Executive Assistant / Minutes

OBSERVERS

None

1 WELCOME

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

2 APOLOGIES

- 2.1 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 agreed there were no items to be taken in private.

4 DECLARATION OF INTERESTS

- 4.1 No declaration of interests were made.

5 MINUTES OF PREVIOUS MEETING: 21 AUGUST 2025

Public Meeting: 21 August 2025

- 5.1.1 The minutes were agreed as an accurate record of the public meeting subject to the undernoted amendments.

- 5.1.2 In relation to the HMFSI Organisational Culture Vol 1 report, it was noted that following discussion at the Integrated Governance Forum, it was agreed that this remains under the scrutiny of the People Committee. However, should any service delivery issues emerge, these would be brought forward to this Committee.

Matters Arising

- 5.2.1 There were no matters arising.

- 5.3 **The minutes of the meeting held on 21 August 2025 were approved as a true record of the meeting.**

6 ACTION LOG

- 6.1 There were no outstanding actions on the action log.

7 SERVICE DELIVERY UPDATE

- 7.1 AW introduced the update report which details relevant matters from a Scottish Fire and Rescue Service (SFRS) Service Delivery perspective, which comprises of Operational Delivery, Prevention, and Training, Safety and Assurance (TSA) Directorates. The report covered the period for the period August to November 2025, albeit some issues may precede and extend beyond this period. The report was taken as read.

- 7.2 In regard to migrant housing, JH outlined the fire safety approach being undertaken. This included ensuring fire safety of buildings, engaging with residents and property owners directly with fire safety advice and preparing operational responses. JH further outlined the multi-agency approach being undertaken at both local and national levels and the support being given which goes beyond fire safety activities. JH noted that the Service would continue to build on relationships and undertake early and ongoing engagement.

- 7.3 In regard to facilities in Shetland, CMcG informed the Committee that the HSE had issued an improvement notice in February 2025. However, necessary actions had been taken, and the notice had subsequently been lifted. CMcG noted that innovative solutions had been implemented and the plans to replicate these measures across other remote/rural stations.

- 7.4 In regard to the On Call Improvement Group, the Committee queried whether there was evidence of any positive impact due to recent contract changes. GMack noted the potential to evaluate the impact locally but the Service could not identify any long term impact or wider benefits at this time. AW noted that the performance report indicated improvements, however, these were not translating into higher appliance availability and further investigation was needed.

- 7.5 In regard to large animal rescue (LAR), GMack outlined the challenges in tracking and predicting activity levels which vary greatly by geography. GMack highlighted that the Service's priority was crew safety, and noted the importance of local context in operational planning and appropriate resource allocation.

- 7.6 In regard to the New and Emerging Risks Group (NERG), the Committee sought clarification on how the Service defined new and emerging risks. JH advised that the NERG had expanded beyond the electrical infrastructure working group to consider wider

risk such as wildfire and flooding. JH noted that although wildfire and flooding were not considered new risks, they were evolving. The NERG collaborated with key stakeholders such as National Fire Chiefs Council (NFCC) and Scottish Government.

7.7 In regard to the Youth Volunteer Scheme, JH confirmed the desire to continue the roll out into other Local Senior Officer areas and for learning to be shared. However, the Service remained conscious of financial constraints and awaited the budget announcement. The Committee commented on the potential for sourcing resource or financial support from external partners who share the same objectives.

7.8 In regard to the New Mobilising System (NMS), JH advised that Dundee Operations Control (OC) was going live today. JH noted that, so far, progress remained on track and all teams would continue to work hard to ensure a smooth transition.

7.9 The Committee commented on the recent positive Women in the Fire Service event and noted the need for clearer communications relating to attendance at future events.

7.10 The Committee commented on the good progress being made in relation to the Breathing Apparatus Recovery Plan and complimented all those involved.

7.11 **The Committee scrutinised the report.**

7.2 **Local Senior Officer Performance Overview**

7.2.1 BL provided an overview of Western Isles, Orkney and Shetlands (WIOS) LSO area including management structure, staff deployment patterns and the unique challenges of covering remote islands. The following key points were highlighted:

- Positive and active relationships with local authorities, community councils and partner agencies.
- Improvements to training facilities, particularly welfare and decontamination, were ongoing.
- Delivery of training was delivered through a combination of local and national instructors.
- Operational level remains low and were a testament to prevention activities.
- Shared Prevention team with Highlands.
- Overview of property assets across the islands. Recent HSE improvement notice received and improvements had been made.
- Successful recruitment levels within recent years.
- Creation of the Talk, Involve, Notice and Act (TINA) Project in memory of Erin Quinn.

7.2.2 BL stated that travelling to the islands could be difficult and often depended on the weather conditions and availability.

7.2.3 In regard to the TINA project, BL reminded the Committee that this was still in the early stages but in time could be rolled out wider.

7.2.4 The Committee noted the small number of fulltime staff within each group who were required to undertake several roles and asked what additional support could be given. BL noted the positive attitudes and community spirit from all staff. BL indicated that a Local Authority Liaison Officer role and additional full time staff based on the islands would be beneficial.

7.2.5 Brief discussion took place on the diversity within communities across Scotland and the ability and autonomy to respond to individual communities' needs within the current national arrangements. BL commented on the prevention agenda and the potential to support health outcomes, as well as traditional fire service outcomes, however staffing numbers were limited.

7.2.6 Brief discussion took place on the partnership working, training and resilience arrangements in place on the islands which are frequently tested and refined.

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

(B Lennox left the meeting at 1110 hrs)

8 INSPECTIONS/AUDITS

8.1 UPDATE FROM HM FIRE SERVICE INSPECTORATE

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

- All Service Delivery Area inspections were now completed.
- Postponement of the Service Delivery Corporate Service inspection.
- Future changes and recruitment within the HMFSI team.
- Operational Assurance inspection published and laid before Parliament on 10 September. Positive report and recommendations accepted by the Service.
- Operational Training and Development thematic inspection report was currently being drafted and would be finalised in the new year.
- Early stages of the focused review on the Commonwealth Games 2026 preparation.
- Due to Scottish Government's increased focus on wildfires, HMFSI would be attending various forums and advising Ministers.
- Preparatory work underway for the Organisational Culture Volume 2 inspection and the terms of reference have been shared with the Service.

8.1.2 With regard to the Operational Assurance report, it was noted that the Strategic Leadership Team had approved the action plan, which would be submitted to the Integrated Governance Forum (January 2026) for allocation to the appropriate Committee for oversight.

8.1.3 **The Committee noted the report.**

8.2 HMFSI Inspection Action Plan Update

8.2.1 RW presented the Committee with an update report on HMFSI inspection action plans for scrutiny. The following key areas were highlighted:

- West Service Delivery Area: Three actions completed during this reporting period and 8 actions continued to be progressed.
- Actions 9 and 11 were still progressing however the revised completion date may be exceeded.
- Action 19.1: Interim reporting process developed as the Service investigate a replacement for CSET. Anticipated that the deadline of December 2025 would be met.
- East Service Delivery Area: Closing statement provided.

8.2.2 In regard to Action 3, the Committee asked whether this would be completed on time and whether the process would be Scotland-wide and aligned to NFCC guidelines. AW advised that through the oversight of AC Chris Getty, full consideration would be given to all high rise recommendations arising from Grenfell, HMFSI, etc. JH noted that this would be in place by April 2026 and would become a business-as-usual process which would be subject to continual review.

8.2.3 In regard to GETAC tablets, the Committee were advised that the tablets were reliable, however there were issues with bandwidth availability and essential security protocols. SC noted that changes had been made to the security policy to try to alleviate any issues. It was noted that information on the number of incidents/activity levels reported to the service desk were contained within the report.

8.2.4 **The Committee scrutinised the report.**

*(Meeting broke at 1134 hrs and reconvened 1140 hrs)
(R Scott left the meeting at 1134 hrs)*

9 HOME FIRE SAFETY VISITS APPLICATION (APP)

9.1 JH presented a report to the Committee providing an update on the Home Fire Safety Visit (HFSV) project. The following key points were highlighted:

- HFSV App comprised 3 modules – Admin, Partner and Main.
- Both the Admin and Main modules were live and in use.
- The Partner module has completed security testing with no issues reported. The next phase will involve launching this module.

9.2 The Committee commented on the HFSV App being approved and launched before full testing of the individual modules had been undertaken. The Committee further commented on similar previous situations with other systems such as hydrants, stock, etc. The Committee questioned what learning could be gained and applied to other areas.

9.3 SO'D noted that this was a legacy situation which would not be repeated as the Service's approach going forward was to purchase off the shelf systems. SO'D also stated that, given the impact on DaTS resources, it was decided to proceed and deliver the product rather than restarting the process.

9.4 The Committee sought assurance on data sharing with partners on future developments. SC advised that security protocols and processes had been developed for this project and would be applied to any future partnership data sharing. Assurances were provided on the rigorous testing carried out and that no issues remained outstanding.

9.5 **This report was provided for information only.**

*(S Chalmers left the meeting at 1158 hrs)
(C Fitzpatrick joined the meeting at 1158 hrs)*

10 SERVICE DELIVERY PERFORMANCE REPORTING

10.1 Quarterly Performance Report for Q2 2025-26

10.1.1 The Chair advised that the report would be taken as read by the Committee members and subsequently moved straight to questions.

10.1.2 It was noted that the full Board had recently received detailed evidence of response times, call handling and mobilisation trends over the last 10-year period and awaited the outcome of the research commissioned by Northumbria University.

10.1.3 In regard to KPI13 (Non-Refuse Secondary Fires), the Committee observed that, unlike in previous years, there was no increase in incident levels during Q1 and asked whether the reasons for this were known. JH noted that this may be attributable to the increase in wildfires which are reported separately, rather than any preventative based activities. CF reminded the Committee that incident levels were affected by weather patterns and noted that Q1 reported an above average rainfall.

10.1.4 In regard to KPI30 (Assist Other Agencies), the Committee queried the lack of statistical significance recorded and whether this indicator should be rebased. CF advised that there had been no change to the guidance used by the Service, which was the same as NHS England. CF noted that the Service should not redraw the mean unless there was a fundamental change to the system itself. Although there is no direction of travel assigned to this indicator, the Service would continue to consistently record incident levels.

- 10.1.5 Brief discussion took place on the potential implications for the Service should incident levels for assisting other agencies continue to increase. It was noted that the Service needed more understanding on the level of demand and impact on the prevention agenda.
- 10.1.6 In regard to KPI14 (Median Response Time to Life Risk Incidents), the Committee commented on their desire for greater understanding on response times and availability and the definition of life risk incidents.
- 10.1.7 In regard to KPI15 (Median Call Handling Time for Life Risk Incidents), the Committee commented on the increased times which could be attributed to UFAS incidents. As such, the Service need to explore and evidence this as it is a positive position.

(K Darwent left the meeting at 1215 hrs)

- 10.1.8 In regard to KPI16 (On Call 1st Appliance Availability), the Committee commented on the recent contract changes and noted that there was still a decline in availability levels. AW advised that the Service required time to understand the impact of these changes. AW noted that the challenges were similar to other national and international services.

- 10.1.9 **The Committee scrutinised the report.**

(C Fitzpatrick left the meeting at 1219 hrs.)

11 SERVICE DELIVERY RISK REGISTER

11.1 Committee Aligned Directorate Risks

- 11.1.1 AW presented a report to the Committee containing the identified Directorate risks and controls aligned to the business of the Committee. The following key points were highlighted:
- Some information within the report was outdated. This was due to the sequencing of internal updating processes and Committee reporting. Commitment was given to improve future reporting and alignment to Committee needs.
- 11.1.2 The Committee highlighted concerns about their ability to review and scrutinise the information provided in the risk report and requested assurance that this issue would be addressed before the next meeting.
- 11.1.3 With regard to the 3 new risks, the Committee expressed surprise that these issues had not been addressed previously. AW reminded the Committee that the business continuity risk specifically related to an electronic system rather than the plans themselves.
- 11.1.4 The Committee commented on the need to fully articulate control actions to help understand and assess risk mitigations.
- 11.1.5 The Committee commented on risk scoring and the need for clearer differentiation between risks of varying impact. The Committee agreed to revisit the risk register format and consider deep dives into selected risks at future meetings.
- 11.1.6 It was agreed that the Committee Chair, AW and SO'D would discuss risk reporting further outwith the meeting.
- ACTION: AW/SO'D/TW**
- 11.1.7 **The Committee scrutinised the report.**

12 FORWARD PLANNING

12.1 Committee Forward Plan

12.1.1 The Committee noted the forward plan. It was noted that the SFRS Compliments and Complaints report would be submitted to the next meeting and consideration would be given to future risk spotlights.

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

12.2.1 No items were identified:

13 REVIEW OF ACTIONS

13.1 CC confirmed that there was one formal action arising during the meeting.

14 DATE OF NEXT MEETING

14.1 The next meeting is scheduled to take place on Tuesday 24 February 2026.

14.2 There being no further matters to discuss, the public meeting closed at 1237 hours.

SERVICE DELIVERY COMMITTEE – ROLLING ACTION LOG



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Background and Purpose

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

The status of actions are categorised as follows:

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

Actions/recommendations

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

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

OFFICIAL

Service Delivery Committee: 25 November 2025						
Minute Ref	Action	Lead	Due Date	Status	Completion Date	Position Statement
11.6	Risk Report Update: Discuss risk reporting further outwith the meeting.	AW/SO'D/ TW	February 2026		January 2026	Complete (24/02/2025): Meeting held with SO'D, AW, DS and DJ looking at development plans for the risk dashboard. Recent work with Data Services has provided a route to automate risk information with a new direct input dashboard to be tested Q4/Q1, allowing risk data to be more up to date.

SCOTTISH FIRE AND RESCUE SERVICE

Service Delivery Committee



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Report No: C/SDC/01-26

Agenda Item: 7.1

Report to:	SERVICE DELIVERY COMMITTEE						
Meeting Date:	24 FEBRUARY 2026						
Report Title:	SERVICE DELIVERY UPDATE REPORT						
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this report is to provide the Service Delivery Committee (SDC) with an update on relevant matters from a Scottish Fire and Rescue Service (SFRS) service delivery perspective.						
2	Background						
2.1	The overall purpose of SDC is to scrutinise and challenge the safety, quality and performance of service delivery across Scotland, providing assurance to the SFRS Board.						
2.2	To support SDC in this role, this Service Delivery Update Report is presented by the Deputy Chief Officer at each meeting of the committee. This highlights key issues from an SFRS service delivery perspective.						
2.3	For the purposes of the committee's role, and this update report, service delivery comprises SFRS' Service Delivery, and Training, Safety and Assurance Directorates.						
3	Main Report/Detail						
3.1	Each Service Delivery Update Report provides details to SDC of key issues across SFRS' service delivery. Although these updates are provided at each quarterly meeting of the committee, some issues are longer-term and will span beyond the immediate timescale being reported upon.						
3.2	This report covers the period from November 2025 – February 2026 albeit as outlined in 3.1 above, some issues highlighted in Appendix A may precede this time period and/or extend beyond it.						
4	Recommendation						
4.1	SDC is invited to scrutinise the detail provided in Appendix A of this report.						
5	Key Strategic Implications						
5.1	Risk Appetite and Alignment to Risk Registers						
5.1.1	A specific Service Delivery Risk Register is also provided to each meeting of SDC, which complements this update report.						

5.2 5.2.1	Financial Any financial implications associated with this report will be considered by the Strategic Leadership Team and SFRS Board where this is out with the normal budgetary arrangements for the Service Delivery, and Training, Safety and Assurance Directorates. Where appropriate, this will be done through the Service's Business Case process.
5.3 5.3.1	Environmental & Sustainability Although there are no direct environmental or sustainability implications associated with this report, SFRS is committed to protecting the environment from a service delivery perspective.
5.4 5.4.1	Workforce Any workforce issues arising from matters outlined within Appendix A are managed in accordance with normal SFRS protocols in this regard.
5.5 5.5.1	Health & Safety Any health and safety issues arising from matters outlined within Appendix A are managed in accordance with normal SFRS protocols in this regard.
5.6 5.6.1	Health & Wellbeing Any health and safety issues arising from matters outlined within Appendix A are managed in accordance with normal SFRS protocols in this regard.
5.7 5.7.1	Training Specific details in relation to operational training are contained within Appendix A.
5.8 5.8.1	Timing This report covers the period November 2025 – February 2026, where appropriate, the period prior to and following this.
5.9 5.9.1	Performance A specific Service Delivery Quarterly Performance Report is also provided to each meeting of SDC, which complements this update report.
5.10 5.10.1	Communications & Engagement Where appropriate, issues highlighted within Appendix A are communicated internally and externally.
5.11 5.11.1	Legal Any legal issues arising from matters outlined within Appendix A are managed in accordance with normal SFRS protocols in this regard.
5.12 5.12.1	Information Governance DPIA completed Yes/No. If not applicable state reasons. A Data Protection Impact Assessment is not required as no personal information has been used in the creation of this report.
5.13 5.13.1	Equalities EHRIA completed Yes/No. If not applicable state reasons. A specific Equality Impact Assessment is not required for this report, albeit these will have been undertaken where appropriate for relevant issues highlighted within Appendix A.
5.14 5.14.1	Service Delivery This report provides an update to SDC on service delivery related matters.

6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Andrew Watt, Deputy Chief Officer
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.3	Rationale:	Due to the breadth and depth of activity being undertake across the Service the Deputy Chief Officer (DC) can offer the Committee reasonable level of assurance that SFRS is fulfilling its statutory duties and meeting the commitments as set out within the Strategic Plan.
8	Appendices/Further Reading	
8.1	Appendix A – Service Delivery Update.	
Prepared by:		Operational Delivery, Prevention, Protection and Preparedness and Training, Safety and Assurance Directorates
Sponsored by:		Andrew Watt: Deputy Chief Officer
Presented by:		Andrew Watt: Deputy Chief Officer
Links to Strategy and Corporate Values		
This report supports the SFRS Objectives of <i>Prevention, Response and People</i> , and all four Values of <i>Safety, Teamwork, Respect and Innovation</i> .		
Governance Route for Report		Meeting Date
<i>Service Delivery Committee</i>		<i>24 February 2026</i>
		Report Classification/ Comments
		<i>For Scrutiny</i>

SAFETY AND RISK REDUCTION	
OPERATIONAL DELIVERY DIRECTORATE	
OPERATIONS	
Item	Commentary
Policy & Procedure: Document Conversion Project (DCP) – Phase 4 and Phase 5	Continued progression of DCP Phase 4 (HazMat / contaminants integration) and Phase 5 (Specialist Rescue elements), maintaining stakeholder engagement and development activity to support delivery planning and implementation.
Policy and Procedure: Welfare Strategy Development	Welfare workshop 29/01/2026) confirmed to capture operational welfare requirements across short-duration to protracted incidents (including BA welfare, inclement weather shelter, crew relief triggers, on-call and Flexi Duty Officer (FDO) considerations, and Operational Control (OC) requirements), with outputs to be converted into a prioritised action plan and proposal papers.
Policy and Procedure: Large Animal Rescue (LAR)	LAR training and equipment progressing through the Heavy Rescue SNUG with policy alignment through DCP advancing in parallel. Preparatory activity continued to support an April delivery position, ensuring operational guidance, equipment and training are aligned.
Policy and Procedure: Fire Contaminants SOP	Ongoing participation in the Fire Contaminants groups, capturing operational feedback and identifying improvement actions. Continued integration to align contaminants-related decontamination requirements with DCP Phase 4 (HazMat) to ensure consistency across operational policies.
On Call Improvement Team: On Call Minimum Safe Crewing Levels Gin	Following a lengthy period of consultation with rep bodies and feedback from LSO areas, a number of issues were addressed within the GIN. The updated document was presented at Ops DMT. Some additional points of clarity were raised to be addressed, these are currently in their final stages before publishing.
On Call Improvement Team: OCAARS (Bank Working Replacement)	Document is complete with final consultations being carried out with People partners and Rep Bodies. Some points of conversation regarding the workings of the document still being debated with FBU. Conversations continuing with aim of progressing through next OCSCG meeting.
Operations Frontline Support – EIC & VIC's	Frontline Support continue to support all Service Functions with the development and production of Vehicle and Equipment Information Cards. Frontline Support are also developing a strategy to ensure that all cards are reviewed on a three yearly cycle or before should there be any changes to technical documentation or Periodic and Inspection processes.

Operations Frontline Support – Standardisation of Trauma Kits	The Frontline Support Team are leading with the support of the Clinical Working Group, to develop a strategy to support the standardisation of SFRS Trauma Kits. Whilst storage of this equipment is now standardised within the Trauma bags, the kit in use is in some cases still requires standardisation.
Operations Frontline Support- Enhanced Trauma Kit	The frontline Support Team have supported the introduction of the new stop the bleed kits, which consists of Tourniquets', blast bandages and chest seals. This has been undertaken with the support of the Clinical Working Group, Asset Management, Training and representative Bodies. Full completion of the project is expected to be around March 2026.
Operations Frontline Support- Smoke Hoods	The Frontline Support Team have been involved with reviewing the policy on the use of Smoke Hoods following feedback received from LSO Area and Operational Assurance. The team have reviewed the stowage and deployment processes working with the BA Practitioners Group, Asset Management and Training.
Organised Crime and Counter Terrorism Unity (OCCTU): MTA Specialist Responder Course	Planning for 2026 MTA Specialist Responder Course, scheduled for May 2026. Course will increase the cadre numbers to Target Operating Model, in line with future succession planning. Engaging with several external partners to partake in final exercises in line with JESIP principles.
OCCTU: BBME Implementation	Ongoing implementation of BlackBerry Message Enterprise within the NILO cadre. This secure communications platform will replace the existing Signal App and ensure all emergency service NILOs have a single point of secure communications.
OCCTU: Development of joint training programme with Police Scotland	To address the risks associated with Fire as a Weapon incidents and further improve our response to incidents which involve a Police Firearms response, OCCTU have developed a joint training programme to establish a joint understanding of risk and capabilities. This training will be facilitated via a presentation and practical demonstration to Police Firearms officers and NILOs. This will strengthen working relationships with partner agencies, develop partner agency understanding of SFRS's role and capability and promote firefighter safety.
Central Staffing - Roster Project	Central Staffing are continuing to provide significant support to the RPT in the development of the new Gartan system to manage 5WDS and FDO availability. Two fulltime members of staff have already been seconded fulltime, with up to three additional members of staff provided to conduct user acceptance testing on the 5WDS solution when demand and capacity allows. Regular meetings are taking place with CS management and RPT. The project timeline has been extended now to the end of September 2026.

SERVICE DELIVERY AREAS	National
<p><u>Item</u></p> <p>Partnership Working</p>	<p><u>Commentary</u></p> <p>ACAM continue to prioritise road safety through a coordinated, partnership-led approach with Community Planning and Community Safety Partnerships, ensuring sustained reduction in RTCs, fatalities, and casualties. Our joint Young Drivers Intervention Programme with Police Scotland remains central to early intervention in secondary schools. Alongside young driver initiatives, our focus extends to commuter and elderly drivers through targeted delivery of the Fatal Five Programme and Virtual Reality engagement sessions with major employers and established community groups. This ensures a proportionate and evidenced approach across all high-risk demographics.</p> <p>Dundee has established a Deliberate Fires Senior Partnership Meeting between Dundee's management team and local Senior Leads in Police Scotland for Anti-Social Behavior and Criminal Investigations Department, to review incident activity and intelligence to enable direction and support to be given to tactical and operational teams.</p> <p>Work continues with Criminal Justice partners in East Renfrewshire and Inverclyde on the 'Throughcare Process', supporting individuals leaving custody or care, with coordinated interventions. The Service's contribution focuses on home fire safety, aligning directly with broader partnership aims to reduce vulnerability and improve community outcomes.</p>
<p>Health & Safety</p>	<p>The CFS LSO area introduced a structured Health & Safety improvement approach that has now been actively shared and adopted across all ESDA LSO areas. This included establishing a dedicated H&S SharePoint section with direct access to TASS resources, templates, and guidance, enabling a consistent and standardised system for safety management. CFS developed TASS Reporting Flowchart and supporting documents have improved the accuracy and timeliness of submissions and were distributed throughout the ESDA to encourage alignment. Supervisory Officer development sessions focused on roles, RIDDOR responsibilities, and effective TASS use was also delivered locally in CFS and then offered as a model for delivery across neighbouring LSO areas. Incident checklists were introduced on all CFS appliances, with the approach promoted ESDA wide to support consistent, high quality initial reporting. Collectively, the CFS initiative has strengthened reporting standards, enhanced compliance, and contributed directly to improved Safety & Risk Reduction across the broader ESDA area.</p>

QUALITY ASSURANCE, BENCHMARKING, AND STANDARDS	
OPERATIONAL DELIVERY DIRECTORATE	
OPERATIONS	
Item OCCTU: NFCC Quality Assurance Visit	Commentary NFCC observed and quality assured an MTA CPD exercise within previous quarter. Due to devolvement and SFRS not aligned to NFCC, in respect to MTA, work is ongoing between NFRS and NFCC to create a specific Scottish QA process for MTA
OCCTU: CPD for NILO/NCLO/MTA Specialist Responders	Provision of 4 CPD events throughout Scotland resulted in the continuous improvement and training of MTA Specialist Responders. These exercises included partners from Police Scotland and Scottish Ambulance Service, further building on a Tri-Service response to MTA/MCIs. Representation from NFCC and Greater Manchester Fire and Rescue Service also attended which provided valuable learning and dialogue surrounding benchmarking and standards.
On Call Improvement Team: Migration	The review of the 2025 migration is now taking place. All involved parties will be sent a Microsoft form with results being collated by the OCIT team. The results will then form the basis for conversation as part of a structured debrief of the migration process to allow migration to form part of 2026 recruitment plan.
SERVICE DELIVERY AREAS	National
Item Testing & Exercising	Commentary <p>Tarbert Coastguard Multi-Agency Shared Learning and Collaboration - This training focused on strengthening inter-agency communication and operational coordination. The session included joint exercises designed to enhance understanding of each agency's roles and responsibilities. Emphasis was placed on shared learning to improve response efficiency during coastal emergencies.</p> <p>Multi-Agency Training on the Isle of Mull - The training involved the volunteer station at Salen and local ambulance personnel. Prior to practical exercises, the teams shared procedures and discussed capabilities to ensure alignment. The practical component featured multiple island-based scenarios, testing real-world response and improving resilience in remote environments.</p> <p>Risk based, realistic training exercises were a key theme during Quarter 3 with a broad range of events being delivered in collaboration with key partners in WIOS. These included a tabletop exercise at MOD Hebrides Range which simulated an incident on St Kilda involving RTC and Wildfire. This event was the first of its kind and tested the complex logistics required to respond to this geographically challenging location which has significant defence and heritage factors.</p> <p>Air and sea travel were a focus with a full emergency exercise being simulated at Tingwall Airport where crews from Lerwick, Scalloway & Bixter participated in a multi-agency response to a simulated helicopter accident.</p>

	<p>High Rise Exercising - Q3 saw the last of the 4-Pump High Rise Exercises for City of Glasgow held at NTC focusing on MSF procedures and IC. These were run by watch-based personnel allowing additional development opportunities, with FDOs providing Operational Assurance. The OA7 documentation was uploaded through OARRS, all now being collated to identify any trends which will help determine this year's follow-up local area training.</p>
<p>Station Audits</p>	<p>Station Audit Programme 2025/26 is now complete. Work is now underway to collate the outcomes to inform future practice, identify learning and share good practice.</p> <p>City of Glasgow conducted as unannounced visits during an identified period, providing a true picture of Station performance, compliance and personnel competence. Each station was provided an action plan for any improvements required at the time, and a report is being produced which will identify any points we need to improve as an Area. Feedback on this approach has been mixed, but management team are confident this has resulted in a truer understanding of where improvements should be focused and where best practice should be shared.</p>
<p>Staff Development</p>	<p>A Station Commander input and development session has been delivered in EWDAB to refocus teams on area priorities and to embed lessons learned from the previous year. This session was organised in response to the significant turnover of personnel within the area, which has created a need to ensure consistent understanding of expectations, performance standards, and operational/managerial responsibilities. The session aimed to strengthen leadership coherence, reinforce strategic objectives, and provide clarity on key deliverables for the forthcoming period. Further follow up activity will be scheduled to monitor progress and support continued development across the Station Commander cohort.</p> <p>Leadership development programme in ENSA was established for all supervisory officers, with further voluntary sessions arranged for those identified as ready for career progression.</p> <p>An engagement strategy centered on Safety, Standards and Performance has been developed and is currently being delivered to all Watch Commanders across ERRI. This programme provides a clear strategic narrative outlining current safety performance baselines, identified gaps, and future expectations. It reinforces the Service's commitment to safety, leadership standards, operational discipline, and a unified performance culture, ensuring that frontline supervisory officers are aligned with organisational direction.</p>

PERFORMANCE AND OUTCOMES	
OPERATIONAL DELIVERY DIRECTORATE	
OPERATIONS	
<u>Item</u>	<u>Commentary</u>
National Fire Resilience Scotland (Detection, Identification and Monitoring (DIM) Vehicles)	<p>Working in close collaboration with key stakeholders, including NRAT, SFRS Procurement, Fleet, Assets, and the DIM Capability Lead, the procurement of 4 x Vehicle Builds and equipment from the national framework has secured full sign-off. Delivery of the completed vehicles and associated equipment remains on schedule for March/April.</p> <p>The project now enters its implementation phase. To ensure momentum and operational readiness, NFRS has secured additional support through volunteer Flexi-Duty Officers who will assist in driving this phase forward. This represents significant and positive progress toward the acquisition and successful rollout of the New DIM Project.</p>
National Fire Resilience Scotland (High Reach Strategy and FRS Sector Evaluation)	<p>NFRS has worked closely with Fleet and key internal stakeholders to progress the High Reach Strategy, carrying out a comprehensive review of current high-reach assets, their condition, mobilisation demands, training implications, and long-term sustainability. This has informed recommendations for the placement of two new ALPs and a cascade model that removes assets based on condition, aligns with the Service Delivery Review, and strengthens resilience across all SDAs.</p> <p>In parallel, NFRS has evaluated wider UK sector developments, including the Scorpion combined appliance, to understand potential future enhancements to SFRS operational capability. Engagement with other UK Services has provided valuable insight into what would be a new specialist capability for SFRS, summarising that further investigation is recommended before any procurement decision. This combined work ensures SFRS is modernising height capability while exploring innovative solutions that may complement future response models</p>
National Fire Resilience Scotland (Trial Clyde response model)	<p>NFRS and the City of Glasgow LSO Area, with advice and support from the Water Capability Lead, have jointly developed a 12-month pilot which will go live in February 2026, to introduce alternative crewing arrangements for Polmadie Water Rescue. This model aligns Polmadie with the approach already used at Knightswood, improves flexibility, and maintains full response standards. A key enhancement is the deployment of a new Inflatable Rescue Boat (IRB) permanently berthed on the Clyde. This modern vessel replaces the previous end-of-life vessel and provides a significantly more reliable asset for Clyde-based operations, directly improving resilience.</p> <p>Due to the consistency of the new IRB with other SFRS resources, the pilot also strengthens Glasgow's overall water rescue capability by enabling other SFRS Water Rescue crews beyond Polmadie and Knightswood, to respond on the affected section of the Clyde, offering enhanced mobilising and relief options. The 12-month trial will focus on gathering data from Clyde water rescue activity to inform future planning and long-term arrangements for water rescue across Glasgow.</p>

National Fire Resilience (Water Rescue – Flexible response model)	<p>NFRS has now introduced updated Water Rescue Capability Business Rules, including the formal addition of an Amber (Minimum) crewing level. These changes were developed collaboratively with capability leads as part of NFRS' ongoing review of specialist capabilities and are designed to safely increase the availability of Water Rescue assets where the full Target Operating Model cannot be met. The Amber model provides a controlled and clearly defined mechanism that maintains recognised safe systems of work while enabling stations to continue delivering a Level 3 water rescue response, provided surrounding stations remain at full green status.</p> <p>Through this work, NFRS has played a key role in designing flexible and resilience-focused arrangements that improve national coverage. By enabling specified stations to mobilise safely under Amber conditions, and by strengthening associated requirements such as clear communication with Operations Control, these Business Rules provide a pragmatic approach that enhances operational resilience and supports consistent service delivery to communities.</p>
National Fire Resilience Scotland (National Resilience Response Modelling)	<p>Significant progress has been achieved through NFRS-led Response Model Reviews for both Urban Search and Rescue (USAR) and the Command Support Unit (CSU) capability portfolios. The USAR review represents a comprehensive, root and branch assessment of the current model, and has resulted in a set of proposals that modernise how the Service responds to complex USAR incidents. The revised model is designed to be more agile, scalable, and aligned to contemporary risk, while also creating opportunities for enhanced training pathways and targeted future investment. This proposal has progressed through FMT and is scheduled for consideration by Service Deliver Board, marking a major milestone in reshaping one of the Service's capabilities.</p> <p>Similarly, the CSU Response Model Review has used an evidence-based approach to develop a more flexible and scalable national model, informed by an assessment of operational demand—including potential future requirements such as evacuation support. The review has already contributed to practical improvements, including relocating CSU assets to better meet local needs, such as moving the CoE CSU from Liberton to Dalkeith and transferring the North CSU from Blackness Road to Forfar On-Call. These changes reflect NFRS' commitment to delivering proportionate, efficient, and resilient specialist support, while ensuring capability placement and deployment remain aligned to risk and operational benefit.</p>
National Fire Resilience Scotland (Mass Decontamination)	<p>NFRS has now completed a full national review of MD equipment. This involved a boots-on-the-ground approach which incorporated visiting stations, fleet workshops and training sites to physically locate, assess and categorise all MD assets. As a result, MD appliance availability has improved substantially, rising from 57% to 100% in a short period, strengthening operational readiness and significantly improving short-term resilience. This work also provides a reliable evidence base to support future investment planning, categories and helping shape a future business cases once updated Home Office Planning Assumptions are issued later this year.</p>

Operations Control	All 3 Operations Control are now live with New Mobilising System Guardian Integrated Command and Communication System (ICCS). Legacy Computer Aided Systems (CAD) Mobilising systems remain in place, with New Mobilising System CAD due to become operational late 2026.
Innovation and Performance Management: OGPM	Following work and sign-off by the function, Health and Safety have agreed to close 22 Operations Actions from the Organisational Learning Tracker this month. However, 11 new actions have been added and these will be assigned to responsible managers at the next meeting of the Operations Safety and Assurance Improvement Group. Operations continue to manage and address OLG Actions on monthly basis primarily through our Safety and Assurance Improvement Group but also in our monthly Performance Management Meeting.

HORIZON SCANNING	
OPERATIONAL DELIVERY DIRECTORATE	
OPERATIONS	
Item National Fire Resilience Scotland (SDR Project)	Commentary Continued work in support the SDR Programme, with a focus on Capabilities which may be impacted by SDR options. This has involved continued subject matter expert and LSO Area liaison, reviews of SDR documents being prepared for Board review, and the linking to previous Review of Specialist Equipment (ROSE) projects and a broader ongoing capability reviews.
OCCTU: Implementation of Airbox	Ongoing work continues around the potential implementation of Airbox. Airbox provides a secure digital platform that enables the effective sharing of information while enhancing responder safety through its integrated Tracking App, which allows real-time monitoring of responder locations. The introduction of Airbox would also deliver significant improvements in interoperability with Tri-Service partners across Scotland, strengthening joint operational awareness and coordination. This will enhance the Service's ability to fully meet JESIP principles and improve overall multi-agency effectiveness.
OCCTU: Development of a dedicated multi-agency OSC/WZC Course	Development of a dedicated multi-agency On-Scene Commander (OSC) and Warm-Zone Coordinator (WZC) course is ongoing. The development of this course will provide the relevant personnel with the required knowledge and skills to safely perform the role. By establishing this as a multi-agency course, we will further consolidate the specifics of the response required, supporting a shared situational awareness and joint understanding of risk, further improving interoperability.
Innovation and Performance Management: Remote Operated Vehicles - Aerial Drones	The team continue to progress the Concept of Operations which will underpin our new demand case and the accompanying paper which is being prepared in parallel. Simultaneously we are finalising the design of the Aerial Reconnaissance Drone Trial for which we hope to secure funding in the coming financial year.
Innovation and Performance Management: BA Set Procurement:	The team continue to assist in the progression of this workstream as active members of the User Intelligence Group (UIG) and have completed the Set, Telemetry and Cylinder POWER Assessments, which are now being shared with colleagues in Health & Safety and Assets. We are working with the wider Operations Function to ensure their guidance informs the Set Specification, including considerations on cylinder size, weight and capacity, along with the assessment of extended duration BA capability.
SERVICE DELIVERY AREAS	National
Item On Call availability	Commentary On Call availability continues to be a challenge. Station Commanders reinforcing the importance of Station Management Teams managing appliance availability. Management of Annual leave plays a significant part in appliance availability, and this will be closely monitored through 2026.

SERVICE DELIVERY COMMITTEE HIGHLIGHT REPORT – PREVENTION

SAFETY AND RISK REDUCTION	
COMMUNITY SAFETY ENGAGEMENT	
Item	Commentary
CSE CPD Event	On 25 November a CSE CPD event was held relating to Ageing Safely and Dementia. Guest speakers included Age Scotland, Dementia Scotland and Playlist for Life, along with inputs from local Area personnel to share effective practice.
Seasonal Campaigns	<p>Over the reporting period the Directorate and local Areas delivered both the Autumn and Winter Thematic Action Plans. As well as local CSE activities, SFRS worked with Scot Gov on a Bonfire / Fireworks campaign and delivered advertising campaigns covering smoking and alcohol, cooking and alcohol, and Lithium-Ion batteries. Advertising campaigns were digital – social media (over 360,000 views) and YouTube (over 900,000 views).</p> <p>Our @SFRSYourSafety Facebook posts were seen 3.5 million times, reaching 1.1 million people. X (Twitter) posts were seen 52,000 times. Campaigns were also shared on SFRS Service and LSO Area social channels</p> <p>Other campaign activity included the promulgation of Older Drivers campaign promotional kits to LSO Areas, and publication of “Prevention News”, issue 7.</p>
Heritage and Museum	<p>The museum delivered two free, 1-hour British Sign Language (BSL) guided tours led by a specialist practitioner exploring the history of the Scottish Fire Service. These were part of the Deaf Festival. Attendees were mainly from Scotland, but there were some attendees who travelled from England.</p> <p>In 2025 we welcomed groups who work specifically with vulnerable young people and adults. This has guided us to develop more meaningful ways to engage with these groups. Through heritage, we have begun to use objects and stories from the past to share safety messages and a sense of community today. A pilot project expanding on this work is planned for 2026.</p> <p>Our most popular social media post in 2025 featured FF Tommy from the 1960s demonstrating use of the pole drop. It reached nearly 20,000 people on Facebook. Facebook estimates show 172,200 engagements on the platform during 2025.</p> <p>The Education and outreach Officer piloted and launched the Museum of Scottish Fire Heritage School Workshops program. Since the launch in August 2025 over 700 young people have taken part. Two new volunteers were recruited to support delivery. They are developing their skills in engaging with the public and helping delivering knowledge and understanding of fire safety messaging to young people.</p>

Biker Down (motorcycle safety)	D&G LSO Area are in the process of recruiting Biker Down volunteers to support the launch of a new scheme. This Area records a high number of motorcycle users, including those entering from the Stranraer Ferry Port.
PROTECTION	
Item High Rise Leaflets	<p><u>Commentary</u></p> <p>The protection function has worked with colleagues in Corporate Communications and the Scottish Government's Cladding Remediation Directorate to develop fire safety guidance for occupiers of high-rise residential buildings, in response to post-Grenfell recommendations. The leaflet provides clear, practical advice on fire safety and sets out the appropriate actions to take in the event of a fire, covering both buildings where urgent interim measures are in place and those where no such no cladding issues exist.</p> <p>The content has been finalised, with funding provided by the Scottish Government, and 32,000 leaflets were produced and distributed during December.</p>
PREPAREDNESS	
Item Scottish & Southern Energy Networks (SSEN) Asbestos Database/Map	<p><u>Commentary</u></p> <p>Initial meeting held regarding the provision of site-specific information for SSEN's 125 high-voltage substation sites. SSEN have provided a set of data to potentially be used in GIS/OI system. Preparedness Team have also been invited to a Steering Group meeting on 3/2/26 which is a result of the Heathrow airport power outage incident.</p> <p>Further discussions held with Edinburgh City Council and Fife council regarding the sharing of their respective asbestos registers for both domestic and non-domestic premises. A Data Sharing Agreement has been drafted and GIS team looking at options for providing information to frontline crews. CCO's engaging with local authorities throughout Scotland to provide their asbestos registers.</p>

QUALITY ASSURANCE, BENCHMARKING, AND STANDARDS	
COMMUNITY SAFETY ENGAGEMENT	
Item Safeguarding	Commentary All staff are now enrolled via WorkForce Pro and LCMS to complete mandatory online training modules. Enhanced face-face safeguarding was delivered to staff who have direct contact with vulnerable groups. All CSE managers have also been instructed to complete dedicated safeguarding for managers' course.
Deliberate Fire-setting Guidance	A review and update of Reducing Deliberate Fire-Setting and Fire-Related ASB Guidance Note is underway. All previous review notes have been collated and assessed. Wording, statistical content, and procedural elements have been clarified and updated in consultation with internal and external partners, as well as relevant supporting literature. All hyperlinks have been checked, refreshed, or replaced as required. The first draft has now been issued for wider review.
Road Safety	Road Safety data has been analysed to identify patterns and emerging trends that will inform the targeted delivery of road safety engagement / activities. Findings were disaggregated by SDA and LSO areas to reflect the distinct issues and priorities within each locality. The completed analysis has been shared with all LSO areas.
Heritage	<p>In 2025 we focused on developing our visitor experience offer for children and families. Although not successful in receiving the Kids in Museums Award, the organisation made contact to host a session for other museums on how we have developed our child-friendly offer. This included our explorer bags, which encourage hands-on learning by providing visitors with tools and activities that help them investigate exhibits more closely. These bags are also neurodivergent-friendly.</p> <p>Talks were delivered at the Museums Association Volunteering on Volunteers and Programmes in Transition and staff were on the Panel at an event hosted by Edinburgh Printmakers on Storytelling Culture within organisations where cultural heritage is not the primary business.</p> <p>The Heritage Volunteer Handbook was reviewed and updated to support clear and effective volunteer management. Our volunteers have reported via 1:1s, that they gain a sense of fulfilment through volunteering. They have highlighted the importance of having routine within their week, particularly retired volunteers. Others have said they enjoy developing confidence in communication, engaging with members of the public from diverse backgrounds, and feeling that they are contributing.</p>
PROTECTION	
Item SG Fire Safety Guidance	Commentary As part of a review of the Practical Fire Safety Guidance documents by Scottish Government, the Protection Function coordinated a structured internal consultation exercise using a targeted questionnaire to capture practitioner experience of applying the guidance in practice. The exercise informed the prioritisation of issues and establishment of a focused

Internal Document Review	<p>working group, including representation from the Scottish Government. Responses were received across a broad range of operational and professional experience, providing a robust evidence base to support meaningful and proportionate improvements to the guidance as part of ongoing post-Grenfell reform.</p> <p>A review of all Protection documentation was undertaken, with several priority documents identified for revision. The review was focused on ensuring accuracy, consistency, and alignment with current legislation, national policy, and organisational priorities. It will also consider opportunities to streamline content, remove duplication, and improve accessibility to support effective delivery across all areas of the Protection function.</p>
PREPAREDNESS	
<p><u>Item</u> HMFSI</p> <p>Operational Intelligence - Service Delivery Alert</p> <p>Wildfire Development</p>	<p><u>Commentary</u></p> <p>Initial meetings held with HMFSI regarding assurance process for Commonwealth Games Planning. Interviews scheduled with HMFSI and internal teams and partners during February and March.</p> <p>Successful conclusion of OI Web Management System faults (SDA 21/10/2025). Further SDA was issued 23/12/2025 providing personnel an update on access being restored to the OIMS. OI team and DaTS continue to collaboratively to improve end user experience.</p> <p>The Wildfire Steering Group has been formed as part of an internal restructure to progress the immediate and long term priorities derived from several key publications. Four subgroups have been created which will initially focus on the recommendations from both the SMARTEU and Operational Assurance Debriefs from the Dava/Carrbridge incident whilst supporting the action plan of the Scottish Government Wildfire Strategic Oversight Group.</p>

PERFORMANCE AND OUTCOMES	
PREVENTION	
Item Training	<p><u>Commentary</u></p> <p>Pilot training programme delivered to the trainees of WBAP041 2/25 including direction on how to deliver Community Safety Engagement messaging to community groups via presentation skills. We also provided heritage input to highlight the history and origins of the fire service in Scotland. These half day input sessions took place on 22/10/25 and 27/10/25 to 36 trainees in total. The feedback was positive and as such they have been included in the next WTFFFP delivery.</p> <p>Youth engagement training covering FireSkills, Fire Safety Support and Education and Youth Volunteer Scheme continue to be delivered to operational staff, community safety advocates and volunteers.</p>
PROTECTION	
Item Recognised Prior Learning (RPL) Course	<p><u>Commentary</u></p> <p>A further Protection RPL course has taken place during November, delivered by external provider C.S. Todd & Associates at the National Training Centre. The course was attended by 24 delegates who hold the SVQ Level 7 Fire Safety qualification to achieve an SVQ Level 8 qualification accredited by FireQual. This aligns with UK recognised standards and supports the progression of Auditing Officers to the Grade 5 pay award following their job evaluation.</p> <p>The Protection Framework for Scotland has now been finalised and awaiting its final graphic design. This followed structured internal consultation, with all substantive comments reviewed and, where appropriate, incorporated.</p>
Protection Framework	<p>The Framework provides a clear direction for the Protection function, aligning delivery priorities with the Prevention Strategy while explicitly recognising and reinforcing the tripartite model of enforcement, fire engineering and fire investigation.</p> <p>Its implementation will support a more integrated, consistent and outcome-focused approach to regulation, strengthening building safety and providing increased assurance and confidence to the public, partners and stakeholders in the effectiveness of fire safety regulation.</p>
Fire Engineering CPD	<p>Three members of the Fire Engineering team attended a four-day, formally recognised and accredited CPD event in Liverpool, focused on performance-based fire engineering within the context of BS PD 7974-1. The programme strengthened technical understanding and confidence in reviewing complex fire engineering solutions through practical and interactive sessions. This accredited CPD supports the maintenance of professional competence and technical assurance within the Service, aligning with the Grenfell Tower Inquiry Phase 2 findings and the increased emphasis on fire engineering capability.</p>

PREPAREDNESS	
<p><u>Item</u> CBCI</p> <p>Water Planning</p>	<p><u>Commentary</u></p> <p>Five of the Resilience team have started the CBCI course (Business Continuity). This will provide personnel with the knowledge for supporting with Business Continuity Plans and will also assist with the development of a Business Continuity Management System.</p> <p>The team is exploring data-driven solutions to improve visibility and prioritisation of hydrant inspections through the use of RAG protocols, ensuring consistent and accurate information is available to all LSO areas. This work includes opportunities to integrate data with Scottish Water, enhance information sharing, support joint planning, and develop more cost-effective maintenance programmes.</p>

HORIZON SCANNING	
PREVENTION	
Item HFSV Application	Commentary The Partner module of the HFSV Application is due to go live in Q4. This will record referrals into the Service for HFSVs from partners, as well as any onward referrals from SFRS to organisations who can provide wider support.
Scottish Social Services Council (SSSC) Partnership	A collaboration has been formed between SSSC and SFRS to increase awareness of fire safety in the home with all care workers in Scotland. The collaboration will use SSSCs digital learning team to create learning content for staff which can be accessed from mobile devices via an App and via SSSCs e-learning platform. The development (phase 1) is at an advanced stage with a completion date scheduled for summer 2026. The reach is wide with around 172,000 staff registered as care workers. Phase 2 will be the development of e-learning modules for care managers. The development of both phases will support SFRS referral pathways.
Youth Volunteer Scheme (YVS) Games	A working group has convened to scope out the requirements and actions to host the first SFRS YVS Games, August 2026. The event is envisioned to bring together all Youth Volunteer Schemes (YVS) in Scotland for a day of learning and competition, fostering collaboration and skills development.
Staywise	Staywise is a National Fire Chiefs Council (NFCC) supported educational site bringing together Blue light Services to host educational resources for communities, educators and Blue light personnel. Resources are currently under development to sit on "Staywise Scotland", an off shoot of the founding website.
PROTECTION	
Item Unsafe Cladding	Commentary A Memorandum of Understanding and Data Protection Impact Assessment with the Scottish Government's Cladding Remediation Directorate are nearing completion and have now been shared with Scottish Government Information Governance colleagues for comment. Once finalised, they will establish a clear and lawful framework for information sharing and joint working and organisational limitations whilst maintaining SFRS's independence, enabling timely awareness of cladding-related risks and supporting proportionate fire safety activity.
PREPAREDNESS	
Item Tour de France 2027	Commentary Initial meeting held with Matt Hodgson (Operations Director) of organising company regarding initial planning and the route of the event.
Commonwealth Games 2026	Resilience Team along with OI, Glasgow LSO and Prevention team conducted site visits at the 3 Glasgow Life venues, Scotstoun, Tollcross and Emirates arena.

Water Planning	The Water Planning Team is exploring opportunities to improve efficiency and reduce long-term hydrant maintenance and replacement costs by identifying and removing non-essential hydrants currently maintained by the Scottish Fire and Rescue Service (SFRS).
Water Planning	Review is underway to determine the requirements for enabling operational personnel to carry out hydrant inspections and maintenance on carriageways in compliance with the New Roads and Street Works Act 1991. If achievable, this approach would increase capacity and enhance inspection schedules across the water network, contributing to improved firefighter readiness and greater community safety.
New Mobilising Systems	<ul style="list-style-type: none"> • The project has successfully delivered the new ICCS across all three OCs by the end of December 2025 deadline. • Edinburgh OC went live on Tuesday, 11 November; Dundee OC went live on Tuesday, 25 November; and Johnstone OC went live on Tuesday, 2 December. • The initial feedback from OC staff regarding the new ICCS has been positive. A more formal collection of feedback from end users is scheduled for early 2026. • The project has officially handed over the ICCS component of the system to business-as-usual operations, which is now managed by the SFRS Management team and the Motorola In-Life team. • The CAD delivery is scheduled for the end of November 2026 and represents the larger and more complex component of the system. The same delivery approach used for the ICCS will be applied to CAD, ensuring that a stable project team and subject matter experts remain in place throughout the process.

SAFETY AND RISK REDUCTION

TRAINING, SAFETY AND ASSURANCE DIRECTORATE

OPERATIONAL
ASSURANCE (OA)

Item	Commentary																						
Significant Incident	Scott Street, Perth Level 4 Incident – The Organisational Learning Review report has since received scrutiny at Safety & Assurance Functional Management Team, and the recommendations to improve firefighter safety and strengthen organisational learning will be presented at February's Directorate Management Team alongside the structured debrief report for further progression through governance.																						
Significant Incident	Calder Court, Lanarkshire Level 4 Incident - A Level 4 incident occurred at Calder Court, Coatbridge involving a high-rise dwelling fire where a stay-put policy was in effect. A formal debrief has been scheduled for 4 March '26, with all relevant OA13 returns received. Planning is now underway to review the submissions and identify the key themes and discussion points for the structured debrief.																						
National Wildfire Debrief	Sponsored by the Fire Brigades Union and supported by the Fire & Rescue Services Association, OA facilitated a debrief into the 2025 Wildfire season. This involved Wildfire Tac Ads and key personnel from across the Service. A debrief report has been progressed through the Safety & Assurance Functional Management Team, and the associated findings and recommendations have been shared with the Wildfire Forum and are now with the Organisational Learning Group to support improvements in firefighter safety and organisational preparedness.																						
NFCC Action / Information Notes	Operational Assurance continue to review all NFCC Action and Information notes and consider any action needed, where deemed necessary, they are presented to the Organisational Learning Group through governance to capture the recommendations and actions required.																						
	<table> <tr> <th>Learning through 25/26 to date:-</th><th>Progress</th></tr> <tr> <td>Hollow Block Concrete - Info</td><td>Review Complete 3 Recommendations</td></tr> <tr> <td>Rescue from Water - Action</td><td>Review Complete 2 Recommendations</td></tr> <tr> <td>Fires in buildings – Hangar doors - Action</td><td>Review Complete 5 Recommendations</td></tr> <tr> <td>Utilities and Fuels – Electric Mains Supplies to Domestic Properties - Info</td><td>Review Complete 3 Recommendations</td></tr> <tr> <td>Smart numbers Service Outage - Action</td><td>Review Complete 3 Recommendations</td></tr> <tr> <td>Utilities & Fuel - Domestic (EV) Charging Unit Isolation - Info</td><td>In Progress</td></tr> <tr> <td>Decontaminating Products of Combustion from PPE - Action</td><td>In Progress</td></tr> <tr> <td>Removal of Chief Officers Letter regarding BA Face Fit testing - Action</td><td>In Progress</td></tr> <tr> <td>Incidents on Railways - JOL</td><td>In Progress</td></tr> <tr> <td>Washing Machine Backflow – Info</td><td>In Progress</td></tr> </table>	Learning through 25/26 to date:-	Progress	Hollow Block Concrete - Info	Review Complete 3 Recommendations	Rescue from Water - Action	Review Complete 2 Recommendations	Fires in buildings – Hangar doors - Action	Review Complete 5 Recommendations	Utilities and Fuels – Electric Mains Supplies to Domestic Properties - Info	Review Complete 3 Recommendations	Smart numbers Service Outage - Action	Review Complete 3 Recommendations	Utilities & Fuel - Domestic (EV) Charging Unit Isolation - Info	In Progress	Decontaminating Products of Combustion from PPE - Action	In Progress	Removal of Chief Officers Letter regarding BA Face Fit testing - Action	In Progress	Incidents on Railways - JOL	In Progress	Washing Machine Backflow – Info	In Progress
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Utilities and Fuels – Electric Mains Supplies to Domestic Properties - Info	Review Complete 3 Recommendations																						
Smart numbers Service Outage - Action	Review Complete 3 Recommendations																						
Utilities & Fuel - Domestic (EV) Charging Unit Isolation - Info	In Progress																						
Decontaminating Products of Combustion from PPE - Action	In Progress																						
Removal of Chief Officers Letter regarding BA Face Fit testing - Action	In Progress																						
Incidents on Railways - JOL	In Progress																						
Washing Machine Backflow – Info	In Progress																						

TRAINING FUNCTION	
<u>Item</u> FF Safety	<u>Commentary</u> <p>Following the recent review conducted by the Contaminants Group at the National Training Centre (NTC), several enhancements to local management arrangements have been identified to strengthen implementation of the Contaminants Policy.</p> <p>Current site limitations, including physical layout and infrastructure, present challenges to full adherence with contamination control practices. A sheltered area adjacent to the CFBT unit to facilitate decontamination during periods of inclement weather has now been implemented.</p>

QUALITY ASSURANCE, BENCHMARKING, AND STANDARDS	
TRAINING, SAFETY AND ASSURANCE DIRECTORATE	
OPERATIONAL ASSURANCE (OA)	
<u>Item</u>	<u>Commentary</u>
OA Documents	OA General Information Notes (GINs) are in process of being transferred to Management Arrangements along with any associated documents being reviewed as required.
Training Assurance	<p>The Training Assurance team has recently completed engagement sessions which allowed data and information gathering relating to current assurance processes across our training sites.</p> <p>Following engagement with relevant stakeholders a current state analysis report has been compiled, and this will be presented to DMT February 26. Supporting documents including training centre audits, training subject audits and station-based training audits are almost complete including accompanying flowcharts/ user guide.</p> <p>A supporting framework and ToR to underpin this work is currently in development.</p>
NFCC Organisational Learning & Assurance Workshop	<p>The Assurance Team hosted colleagues from the National Fire Chiefs Council (NFCC) at the Newbridge Training Centre on 15 January 2026 to share insights and explore best practice that may further enhance SFRS approaches to Organisational Learning and Assurance. NFCC is preparing to publish an Organisational Learning Good Practice Guide, intended to support fire and rescue services in capturing, categorising, evaluating and allocating learning from all activities and events. The guide will outline approaches to:</p> <ul style="list-style-type: none"> • Identifying new or emerging risks and opportunities • Monitoring trends across the sector • Recommending actions to drive improvement • Promoting good practice • Sharing learning across UK fire and rescue services • Sharing learning with other services and sectors • Monitoring the application of NFCC products and guidance <p>During the visit, the Assurance Team provided a demonstration of the current SFRS Organisational Learning processes through the Organisational Learning Group, which was well received, with very positive feedback from NFCC colleagues. SFRS looks forward to strengthening collaboration with NFCC to support ongoing improvement in this area.</p>
TRAINING FUNCTION	
<u>Item</u>	<u>Commentary</u>
Quality Management System – Continuing Assessment Visit	Perth Training Centre successfully hosted a BSI audit in November 2025. Positive feedback was provided by the auditor with no non-conformities identified, demonstrating strong compliance and robust quality management practices. The report highlighted the commitment to maintaining high standards and continuous improvement.

PERFORMANCE AND OUTCOMES			
TRAINING, SAFETY AND ASSURANCE DIRECTORATE			
OPERATIONAL ASSURANCE			
<u>Item</u> Thematic Audit ESCU – Evac OP	<u>Commentary</u> A Thematic Audit is currently underway to evaluate the Evacuation Command Support Unit and Operational Procedure, focusing on knowledge and understanding of its purpose, associated roles and responsibilities, and the equipment and vehicles available. Information-gathering is now complete, and the final report with recommendations will be presented at the February '26 Functional Management Team.		
Thematic Audit – Operational Assurance	A Thematic Audit into OA processes and staff knowledge is underway. A survey, developed in collaboration with the Service Improvement Team, is ready for circulation and will assess staff knowledge of OA, including its purpose, processes and core responsibilities. Face-to-face engagement sessions have been arranged and will be completed within Q4 2025/26.		
Organisational Learning Actions	<p>At the Organisational Learning Group meeting held on 21 January 2026, two additional action plans were accepted for closure, relating to the West George Street attack in Glasgow (2020) and the Gorse Park gas explosion in Ayr (2022). In both cases, closure was approved following the submission of sufficient supporting evidence.</p> <p>A further 29 actions were added at the meeting, arising from five new action plans linked to NFCC Action/Information Notes, debrief outcomes, and safety event findings.</p> <p>Overall, 156 actions remain in progress, with 475 now formally accepted as closed or complete.</p>		
TRAINING FUNCTION			
<u>Item</u> Performance Reporting	<u>Commentary</u> Q3 2025-26 Performance Reports generated and disseminated. Performance data to be presented at February’s FMT.		
BA Recovery Plan	LED team has created an online feedback mechanism linked to learning modules. This has resulted in 680 returns in Q3 which is helping shape future module development.		
	New NILO recording process now live.		
	The BA Recovery Plan is continuing to progress, with BA, CFBT and Tactical Ventilation currencies showing improvement between Q3 2024-25 and Q3 2025-26:		
		Q3 24-25 Currency	Q3 25-26 Currency
	BA	89%	96%
	CFBT	84%	93%
TV	68%	90%	

Training Function Content	<p>Q4 Content launched consisting of Core Skills, Railway and Marine, H&S event reporting and introduction to Neurodiversity.</p> <p>On Call recruitment schedule for 2026-27 has been published in collaboration with People Directorate.</p> <p>Scenario video now available on LCMS to support candidates prior to their attendance on ICL2 courses.</p> <p>JESIP awareness package included in all Q4 TfOC.</p>
Training Function Courses	<p>The Wholetime Firefighter Foundation Programme (WTFFP T3/25) successfully graduated in November 2025 with positive feedback received from members of SLT and LSO Areas.</p> <p>3-week Tactical Firefighter Instructor pilot course was delivered at Portlethen which will be fully reviewed prior to full implementation.</p> <p>2 pilot courses for external ERD Cat B successfully complete.</p> <p>7 On-Call to Wholetime Migration courses complete across Newbridge, Portlethen and Dumfries.</p>

HORIZON SCANNING	
TRAINING, SAFETY AND ASSURANCE DIRECTORATE	
OPERATIONAL ASSURANCE	
Item Technology	Commentary The Operational Assurance team is exploring opportunities to collaborate with colleagues in the Training Function to maximise the use of XVR virtual reality software in developing learning solutions. This initiative aims to support the embedding of organisational learning and assurance across frontline roles. The initial focus is on integrating XVR into Training for Operational Competence modules to enhance engagement and bring key learning points to life.
HMFSI OA Report	A comprehensive action plan has been developed, approved by the Strategic Leadership Team, and presented to the Integrated Governance Forum for awareness. The nine recommendations set out within the HMFSI Operational Assurance report will now be progressed in line with this plan, with updates provided through the agreed governance and reporting processes. The report is considered constructive and forward-looking, offering clear and actionable recommendations that will strengthen Operational Assurance and organisational learning. This is welcomed by the Training, Safety and Assurance Directorate as part of its ongoing commitment to continuous improvement.
Station Audit Review	The annual review of the station audit pro forma is underway to determine content for the 2026/27 audit year. All Area Commanders, Deputy Assistant Chief Officers and Heads of Function have been requested to provide feedback to inform the key lines of enquiry and elements to be considered relating to their function. The Station audit management arrangement is also underway and additions will be consulted upon before being published at the start of the fiscal year.
TRAINING FUNCTION	
Item Partnership Working	Commentary Portlethen hosted a multi-agency large scale MTA exercise which received positive feedback from all attendees. Specialist Rescue ran a large-scale multi-agency exercise at the National Training Centre Cambuslang which strengthened operational readiness and demonstrated effective working with partners.



HM Fire Service Inspectorate

Report to:	SCOTTISH FIRE AND RESCUE SERVICE, SERVICE DELIVERY COMMITTEE
Date:	24 February 2026
Report By:	HM Fire Service Inspectorate

Subject:	Routine report on HMFSI business
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1. PURPOSE

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

2. RECOMMENDATIONS

- 2.1 That the Committee notes the update from HMFSI.

3. ACTIVITY AND PROGRESS

3.1 Service Delivery Area Inspection

Following the completion of inspections of local service delivery in all three Service Delivery Areas (SDAs) the Chief Inspector had hoped to commence an inspection that would consider various elements of Service Delivery from the perspective of those engaged across a range of Corporate services. Unfortunately, due to a range of unforeseen issues it has been necessary to postpone this inspection. The Chief Inspector will give further consideration to this in the new financial year.

3.2 Thematic Inspection Work

Operational Training and Development

The Operational Training and Development (OTD) inspection fieldwork has been concluded with data analysis, and report development ongoing. The report is due to be sent to the Service for consultation in the spring of 2026 with engagement sessions also organised. The final report is due to be published in the early summer of 2026.

Organisational Culture – Volume 2

HMFSI is currently preparing to carry out an inspection of organisational culture within the SFRS with the Inspection Outline consulted upon and agreed. HMFSI has engaged with SFRS managers to further discuss data collection and proposed fieldwork timetable. It is currently expected that the inspection data collection and documentation review process will commence during February 2026, with fieldwork taking place between March and April.

3.3 Focussed Report

In preparation for the forthcoming Commonwealth Games 2026, we will carry out a focussed review of the steps taken, and arrangements in place with the Service, to ensure the safe delivery of this high profile international event. We anticipate that the SFRS will consider the impact of the Games on its day-to-day business, the additional demands that the Games will make on its service delivery capability, and contingency planning for events affecting Games venues. Discussions with relevant SFRS staff and key external partner organisations have been initiated. A schedule of interviews and follow on engagement with key service personnel is currently in full and collaborative development, the associated fieldwork for which has also begun. The report will be published in spring of 2026.

3.4 Appointments into the HMFSI

We are currently undergoing a recruitment process for the post of an Assistant Inspector. Once the recruitment has concluded we will update the Committee further.

HM Chief Inspector Robert Scott QFSM

Date: 24 February 2026

SCOTTISH FIRE AND RESCUE SERVICE

Service Delivery Committee



Report No: C/SDC/03-26

Agenda Item: 8.2

Report to:		SERVICE DELIVERY COMMITTEE						
Meeting Date:		24 FEBRUARY 2026						
Report Title:		HMFSI INSPECTION ACTION PLANS UPDATE						
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>						
		A	B	C	D	E	F	G
1	Purpose							
1.1	The purpose of this report is to provide the Service Delivery Committee (SDC) with an update on HMFSI inspection action plans.							
1.2	At this meeting, the SDC are asked to review the progress of both established and developing action plans relating to His Majesty's Fire Service Inspectorate (HMFSI) reports on: <ul style="list-style-type: none"> • West Service Delivery Area • Operational Assurance • North Service Delivery Area 							
2	Background							
2.1	HMFSI inspects and reports on the Scottish Fire and Rescue Service (SFRS) with the purpose of assuring the public and Scottish Ministers that we are working in an efficient and effective way, and to promote improvement in the Service.							
2.2	Each year, HMFSI sets out its intended programme of thematic and local area inspections. Additional reviews may also be carried out at any time at the request of Scottish Ministers.							
2.3	Following the publication of reports, an action plan is prepared to address the issues or recommendations that are highlighted within the report.							
2.4	Once approved, action plans will be presented to SDC on a quarterly basis to scrutinise progress.							
3	Main Report/Detail							
3.1	The SDC is presented with the current overview dashboard, attached as Appendix A for noting. This provides high level details of all action plans.							
3.2	West Service Delivery Area							
3.2.1	The HMFSI report on West Service Delivery Area was published in June 2024. The action plan contains a total of 30 actions and is attached as Appendix B .							
3.2.3	During the reporting period one action has been determined as complete (see action 19.1). Of the remaining seven live actions: <ul style="list-style-type: none"> - 4 are being green (see actions 19.2, 20, 21 and 29) and - 3 are amber (see actions 3, 9 and 11). 							

3.2.4	SDC members are asked to note the following updates on those seven live actions:
3.2.5	<ul style="list-style-type: none"> Action 3: Undertake a review of High-Rise Operational Assurance processes and establish a sustainable (including risk based) model for the delivery of high-rise risk profiling and inspections. Work on development of the risk weighted checklist remains the primary dependency for progressing to the next phase of the pilot. The methodology has been assigned to Operational Intelligence (OI) due to their experience and expertise in this area, and internal workstreams were realigned to prioritise this. Engagement with Operational Intelligence is ongoing, and additional support has been offered to help accelerate completion. Across the Working Group, several areas have continued to carry out Operational Assurance Visits (OAVs) for all High-Rise Domestic Buildings (HRDBs), reporting that this approach does not adversely impact their Business-as-Usual activity. In contrast, Areas with a higher number of High-Rise Domestic Buildings continue to highlight the value a risk-based model would bring in managing workload and prioritisation. All Areas continuing with the Supplementary Procedures are scheduled to report back in the coming month. The Group remains engaged and continues to engage regularly to address challenges, maintain momentum, and ensure alignment with the overall project. Progress towards the next phase has been affected by delays in completing the risk weighting methodology for the checklist, which remains the key dependency for moving the pilot forward. Although this work was prioritised within the Operational Intelligence team, competing organisational demands have limited the pace at which this element can be advanced. This has resulted in a delay of the development of the final risk-based model required to inform future Operational Assurance Visits frequency amendments. The immediate priority is to secure an updated timeline for completion of the risk weighting methodology from Operational Intelligence and identify where additional support or resource can be provided to expedite this work. Once complete, the model will be incorporated into the checklist and applied through the Quality Assurance (QA) process to enable consistent and evidence-based frequency decisions. This action has moved from green to amber due to the slip in timescales because of conflicting priorities however work is continuing towards the current due date. [Amber, 85% complete]
3.2.6	<ul style="list-style-type: none"> Action 9: Review existing practices and processes within the West Service delivery Area (WSDA) for vehicle management with the Central Fleet Partner. The Fleet Systems Manager is now in post and recruitment is underway for the Fleet Systems Support Coordinator post with interviews taking place from mid-January 2026. Once in post, this will complete the team and enable the provision of vehicle usage data ensuring more efficient vehicle management. This action remains amber due to the time required for the recruitment process to be concluded and the posts to be filled. [Amber, 85% complete]
3.2.7	<ul style="list-style-type: none"> Action 11: Standardise the recording of equipment testing with a national electronic system. The Fleet Systems Manager is now in post and recruitment is underway for the Fleet Systems Support Coordinator with interviews taking place from mid-January 2026. The Tranman User Group is now in place with scheduled meetings and a review of Tranman/Transend, as well as other available systems, is currently ongoing against the restrictions of the remaining Tranman contract, costs involved in upgrade to Transend and procurement issues in going to market. The existing Tranman contract has a limited lifespan against the potential investment required to migrate to Transend. Other systems are currently being reviewed in conjunction with Data and Technology Services

	<p>colleagues to determine if a single solution application can meet the needs of Fleet, Equipment and Data and Technology Services.</p> <p>This action remains amber due to the time required for the recruitment process to be concluded and the posts to be filled. [Amber, 85% complete]</p>
3.2.8	<ul style="list-style-type: none"> Action 19.2: Apply the principle-based guidance documents and reporting process to review current partnership commitments within the West Service Delivery Area. This action is co-dependent on 19.1, and therefore work will commence pending the completion of the development of a principle-based guidance document that enables the Service to manage and record partnership relationships effectively. This action remains green and work will commence at the end of February when the guidance document above has been published. [Green, 0% complete]
3.2.9	<ul style="list-style-type: none"> Action 20: Review SFRS Leadership and Management development processes to provide a national standard and syllabus for delivery at all levels. The Leadership and Management taskforce workstreams have been progressing the initial priority supervisory manager work packages and will present to the initial Organisational Culture and Leadership Programme Board in early 2026. The intention is to have approval of the initial programme content for supervisory managers by the end of Quarter 4 2025/26, with roll out commencing in Quarter 1 2026/27. This action remains green with work ongoing towards the previously agreed revised due date of 30 September 2026. [Green, 50% complete]
3.2.10	<ul style="list-style-type: none"> Action 21: Review the national recruitment standards and Terms and Conditions (T&Cs) with a view to exploring, developing, and implementing pragmatic and alternative solutions for local recruitment. The planned review of the amended Retained Duty System (RDS) Terms and Conditions (T&Cs) commenced in January 2026. The recruitment standards for On Call remain the same as Wholetime staff with all information for candidates contained within the recruitment information pack. There is also an On Call Practical Selection Test (PST) process flow chart which is available for hiring managers and this details some differences in the recruitment process for the benefit of local On Call recruitment. Although the same standards as Wholetime applicants must be achieved for progression, there are certain elements of the process where On Call candidates can obtain a second attempt, such as the calculation test, fitness test, and specific elements of the Practical Selection Tests. This action remains green with work ongoing towards the previously agreed revised due date of 30 April 2026. [Green, 80% completed]
3.2.11	<ul style="list-style-type: none"> Action 29: Operational Assurance will consider conducting a thematic review of the implementation of Operational Assurance Policies and practice in the West Service Delivery Area (WSDA). Operational Assurance are currently in the process of conducting a thematic audit of the implementation of Operational Policies and practice within the West Service Delivery. This Thematic audit commenced in January 2026 and will be reported through established governance routes in April 2026. The outcomes within the Thematic Audit will be informed through in person engagement with personnel across the West Service

	<p>Delivery Area in addition to the use of data obtained from surveys Service wide and through interrogation of existing systems. It is anticipated that the outcomes will be reported through established governance routes and this will begin at Safety and Assurance Function Management Team Meeting in April 2026 and conclude at the subsequent Training Safety and Assurance Board of which dates have still to be finalised for 2026/27.</p> <p>This action remains green with work ongoing towards the previously agreed revised due date of 30 June 2026. [Green, 10% complete]</p>
3.2.12	The overall BRAG rating for the West SDA action plan is green and is estimated at 90% complete. <i>(Percentage completions for individual actions are an estimate provided by the action owner leading to the overall average percentage).</i>
3.3	Action Plans in Development
3.3.1	Following the publication of the HMFSI Report on the North Service Delivery Area , a draft Action Plan is currently in development, and this will be presented to the Strategic Leadership Team in February 2026 for approval. Thereafter, the formal reporting process will commence.
3.3.2	An Operational Assurance Action Plan has been developed and has since been approved by the Strategic Leadership Team and shared with HMFSI. The formal reporting process will now commence, and the first progress update of the Action Plan will be available for the next reporting period.
4	Recommendation
4.1	<p>The SDC is invited to:</p> <ul style="list-style-type: none"> Note the progress of all action plans as presented in the HMFSI inspection dashboard, attached as Appendix A. Review the West Service Delivery Area Action Plan, attached as Appendix B.
5	Key Strategic Implications
5.1	<p>Risk Appetite and Alignment to Risk Registers</p> <p>There are no strategic risk implications arising from this progress update or the recommendations of this report.</p>
5.2	<p>Financial</p> <p>There are no financial implications associated with the recommendations of this report.</p>
5.3	<p>Environmental & Sustainability</p> <p>There are no environmental implications associated with the recommendations of this report.</p>
5.4	<p>Workforce</p> <p>There are no workforce implications associated with the recommendations of this report.</p>
5.5	<p>Health & Safety</p> <p>There are no health and safety implications associated with the recommendations of this report.</p>
5.6	<p>Health & Wellbeing</p> <p>There are no health and wellbeing implications associated with the recommendations of this report.</p>

5.7	Training There are no training implications associated with the recommendations of this report.	
5.8	Timing Each HMFSI Action Plan will be reported to the SDC on a quarterly cycle until completion.	
5.9	Performance This process supports robust challenge and scrutiny of our performance against HMSFI recommended improvements.	
5.10	Communications & Engagement There is no implication associated with the recommendations of this report.	
5.11	Legal The arrangements for independent inquiries into the state and efficiency of the SFRS are a statutory requirement as laid out in Section 43 of the Fire Scotland Act 2005.	
5.12	Information Governance A Data Protection Impact Assessment (DPIA) is not required for this report as there is no sensitive information to consider.	
5.13	Equalities An Equality and Human Rights Impact Assessment (EHRIA) is not required for this this report. Directorate and LSO EHRIAs will capture these.	
5.14	Service Delivery There are no service delivery implications associated with the recommendations of this report.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Mark McAteer, Director of Strategic Planning, Performance and Communications
7.2	Level of Assurance: (Mark as appropriate)	Substantial/Reasonable/Limited/Insufficient
7.2	Rationale:	Following receipt of Audit Reports, Action Plans are developed in conjunction with Directorates and approved via the Strategic Leadership Team and the nominated Executive Committee of the Board. Quarterly reporting is made to the Senior Management Board and nominated Executive Board until full completion of the Action Plan.
8	Appendices/Further Reading	
8.1	Appendix A: HMFSI Inspection Overview Dashboard	
8.2	Appendix B: West Service Delivery Area (WSDA) Action Plan Update	
Prepared by:		Kirsty Jamieson, Planning and Performance Officer
Sponsored by:		Richard Whetton, Head of Governance, Strategy and Planning
Presented by:		Richard Whetton, Head of Governance, Strategy and Planning

Links to Strategy and Corporate Values		
<p>Our inspection process contributes to:</p> <ul style="list-style-type: none"> Strategic Outcome 4 of the SFRS Strategy 2025-28: Our organisational performance, productivity and resilience continually improves. 		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>Corporate Board</i>	<i>09 February 2026</i>	<i>For recommendation</i>
<i>Service Delivery Committee</i>	<i>24 February 2026</i>	<i>For scrutiny (West SDA)</i>
<i>People Committee</i>	<i>05 March 2026</i>	<i>For scrutiny (Mental Health & Wellbeing)</i>
<i>Audit and Risk Committee</i>	<i>09 April 2026</i>	<i>For information</i>

HMFSI INSPECTION OVERVIEW DASHBOARD

APPENDIX A

HMFSI Thematic & SDA Reports Progress Dashboard

Published	T title	Relevant Committee	Due Date	Revised Due Date	Total Actions	Last Updated	Next Update	Committee Update	Not Started	In Progress	Deferred	Complete	On Hold	Transferred	Cancelled	Moved to BAU	Void	% Complete	RAG
Dec-23	Mental Health and Wellbeing Support in SFRS	PC	Dec-25	TBC	30	Feb-26	Apr-26	Mar-26	0	17	0	8	0	0	5	0	0	60%	
Jun-24	West Service Delivery Area (ESDA)	SDC	Dec-25	Apr-26	30	Feb-26	Apr-26	Feb-26	0	7	0	23	0	0	0	0	0	90%	
Jun-25	Organisational Culture in SFRS - Volume 1	TBD																	
Jun-25	North Service Delivery Area (NSDA)	TBD																	
Sep-25	Operational Assurance	TBD																	

HMFSI Focused Reports Progress Dashboard

Published	T title	Relevant Committee	Due Date	Revised Due Date	Total Actions	Last Updated	Next Update	Committee Update	Not Started	In Progress	Deferred	Complete	On Hold	Transferred	Cancelled	Moved to BAU	Void	% Complete	RAG

Closed Inspection Action Plans

Published	T title	Relevant Committee	Due Date	Revised Due Date	Total Actions	Last Updated	Next Update	Committee Update	Not Started	In Progress	Deferred	Complete	On Hold	Transferred	Cancelled	Moved to BAU	Void	% Complete	RAG	Closed Date	Evaluation Due Date
Apr-15	HMFSI - Performance Management Systems	SDC	Jul-20	May-20	32	May-20	N/A		0	0	0	26	0	2	4	0	0	100%	Closed		
Jul-17	HMFSI - Operations Control Dundee and Highlands and Islands Support	SDC	Dec-20	May-20	24	May-20	N/A		0	0	0	24	0	0	0	0	0	100%	Closed		
Jan-18	HMFSI - Fire Safety Enforcement	SDC	Mar-20	Mar-23	20	Mar-23	N/A		0	0	0	19	0	0	0	0	1	100%	Closed	May-23	
May-18	Audit Scotland - Scottish Fire and Rescue Service Update	ARAC	Dec-21	Feb-23	36	Feb-23	N/A		0	0	0	33	0	0	0	1	2	100%	Closed	Mar-23	
Feb-19	HMFSI - Provision of Operational Risk Information	SDC	Mar-22	Dec-22	25	Feb-23	N/A		0	0	0	20	0	0	0	5	0	100%	Closed	Feb-23	
May-19	HMFSI - Management of Fleet and Equipment	SDC	Mar-22	May-22	38	May-22	N/A		0	0	0	32	0	0	6	0	0	100%	Closed	May-22	
Feb-20	LAI - Dumfries and Galloway	N/A	Jun-21	N/A	12	Dec-22	N/A		0	4	0	7	0	1	0	0	0	100%	Closed		
Jun-20	LAI - Edinburgh City	N/A	Apr-21	N/A	11	Dec-22	N/A		0	5	0	0	0	6	0	0	0	100%	Closed		
Aug-20	HMFSI - Command and Control: Aspects of Incident Command	SDC	Mar-22	Dec-23	25	Nov-22	N/A		0	0	0	25	0	0	0	0	0	100%	Closed	Nov-22	
Dec-20	Planning and Preparedness for COVID Review	SDC	May-26	Aug-23	15	Aug-23	N/A		0	0	0	12	0	0	0	3	0	100%	Closed	Aug-23	
Mar-21	HMFSI - Assessing the Effectiveness of Inspection Activity	ARAC	-	-	-	-	-		-	-	-	-	-	-	-	-	-	-	Closed		
May-21	LAI - Midlothian	N/A	Mar-22	Mar-23	7	Dec-22	N/A		0	0	0	7	0	0	0	0	0	100%	Closed		
Dec-21	LAI - Argyll & Bute and East & West Dunbartonshire	N/A	Apr-23	N/A	6	Dec-22	N/A		0	5	0	1	0	0	0	0	0	100%	Closed		
Apr-22	Health and Safety: An Operational Focus	PC	Oct-24	Mar-25	18	Jun-25	Aug-25		0	0	0	17	0	0	1	0	0	100%	Closed	Sep-25	Sep-26
May-22	SMARTEU Covid 19 Structured Debrief Summary	SDC	Mar-23	May-23	7	Mar-23	N/A		0	0	0	7	0	0	0	0	0	100%	Closed	May-23	
Sep-22	Firefighting in Highrise Buildings	SDC	Jun-24	Jun-25	8	Jun-25	N/A		0	0	0	8	0	0	0	0	0	100%	Closed	Jun-25	Jun-26
Mar-23	Training of RDS Personnel	PC	Mar-23	Aug-23	31	Aug-23	N/A		0	0	0	27	0	0	0	4	0	100%	Closed	Sep-23	
Apr-23	Command and Control Mobilising System (CCMS)	CC	Jul-24	Jul-24	6	Jun-25	N/A		0	0	0	6	0	0	0	0	0	100%	Closed	Oct-24	Oct-25
May-23	Review of contingency planning arrangements in relation to potential industrial action	SDC	Dec-24	Jun-25	7	Jun-25	N/A		0	0	0	7	0	0	0	0	0	100%	Closed	Jun-25	Jun-26
Sep-23	Climate Change – Impact on Operational Activity	SDC	Apr-25	Mar-25	12	Jun-25	N/A		0	0	0	12	0	0	0	0	0	100%	Closed	Jun-25	Jun-26
Oct-23	East Service Delivery Area (ESDA)	SDC	Mar-25	TBC	9	Jun-25	Aug-25		0	0	0	9	0	0	0	0	0	100%	Closing	Aug-25	Aug-26

Expected	T title	Type
2025-26	Operational Training and Development (expected to commence June 2025)	Thematic
2025-26	Corporate Function Delivery (expected to commence September 2025)	Thematic
2025-26	Commonwealth Games (expected to commence October 2025)	Thematic
2025-26	Organisational Culture - Volume 2 (expected to commence December 2025)	Thematic

Expected	T title	Type
TBC	Approach to determining changes in Service Delivery and response modelling	Focused
TBC	Specialist resource provision and capability (including national resilience assets)	Focused
TBC	Planning and preparedness for a response to a marauding terrorist act	Focused
TBC	Operations Control	Focused
TBC	Provision and sustainability of the On Call Duty System	Focused
TBC	Effectiveness of governance arrangements	Focused
TBC	Suitability of SFRS property estate	Focused
TBC	Fire contaminants and associated issues	Focused
TBC	Evaluation of SFRS contribution to partnership working	Focused
		Focused

HMFSI Recommendation	Action Ref	Action Description	Action Owner	Due Date	Revised Due Date	Status	Progress Update Commentary	% Complete	Completion Date	RAG	Evidence
We recommend that the Service reassess the impact of High Rise Operational Assurance Visits on capacity and explore the concept of a risk based inspection approach that embraces safety and assurance whilst not being overly burdensome.	3	Undertake a review of High Rise Operational Assurance processes and establish a sustainable (including risk based) model for the delivery of high-rise risk profiling and inspections.	Head of Prevention, Protection and Preparedness, Kenny Barbour	Mar-25	Mar-26	In Progress	<p>15 December 2025:</p> <p>The Working Group continues to meet to discuss any challenges and to progress with Phase 2 of the revised pilot program. Areas were tasked with implementing the frequency changes in the last phase (July-Sept) and to analyse the feedback from crews. The next phase will be to work on the risk weighting. The group have been tasked with ensuring a standardised process is available for lift keys which will work in tandem with the Grenfell Action Plan.</p> <p>The expectation for results of the pilot may take some time due to the process changing from a quarterly inspection to a less frequent inspection and the effects of this identifying issues. Following the review of the new process, further revisions may be required, though will be monitored by the Operational Assurance Visit Working Group (OAVWG).</p> <p>The group will maintain regular meetings to ensure progress and will report to the Functional Management Team who will retain oversight. This action remains green and work is continuing towards the previously agreed revised due date of 31 March 2026.</p> <p>09 February 2026:</p> <p>Work on development of the risk weighted checklist remains the primary dependency for progressing to the next phase of the pilot. The methodology has been assigned to Operational Intelligence (OI) due to their experience and expertise in this area, and internal workstreams were realigned to prioritise this. Engagement with Operations Intelligence is ongoing, and additional support has been offered to help accelerate completion.</p> <p>Across the Working Group, several areas have continued to carry out Operational Assurance Visits (OAVs) for all High Rise Domestic Buildings (HRDBs), reporting that this approach does not adversely impact their Business as Usual activity. In contrast, Areas with a higher number of High Rise Domestic Buildings continue to highlight the value a risk based model would bring in managing workload and prioritisation. All Areas continuing with the Supplementary Procedures are scheduled to report back in the coming month.</p> <p>The Group remains engaged and continues to engage regularly to address challenges, maintain momentum, and ensure alignment with the overall project.</p> <p>Progress towards the next phase has been affected by delays in completing the risk weighting methodology for the checklist, which remains the key dependency for moving the pilot forward. Although this work was prioritised within the Operational Intelligence team, competing organisational demands have limited the pace at which this element can be advanced. This has resulted in a delay to the development of the final risk-based model required to inform future Operational Assurance Visits frequency amendments.</p> <p>The immediate priority is to secure an updated timeline for completion of the risk weighting methodology from Operational Intelligence and identify where additional support or resource can be provided to expedite this work. Once complete, the model will be incorporated into the checklist and applied through the Quality Assurance (QA) process to enable consistent and evidence based frequency decisions.</p> <p>This action has moved from green to amber due to the slip in timescales as a result of conflicting priorities however work is continuing towards the current due date.</p>	85%	N/A	Amber	
We recommend that the Service review the existing practices and processes within the West Service Delivery Area for vehicle management with the Central Fleet partner in order that increased local administration and responsibility of vehicles be explored.	9	Review existing practices and processes within the West Service delivery Area (WSDA) for vehicle management with the Central Fleet Partner.	Head of Asset Management, Ijaz Bashir	Apr-25	Dec-25 Mar-26	In Progress	<p>15 December 2025:</p> <p>The Fleet Manager and Deputy Fleet Manager posts have been successfully filled following a recent recruitment exercise. Recruitment is currently underway for Fleet Systems Manager and Fleet Systems Support Coordinator roles. These two posts are vital to enable interrogation of vehicle user data and to provide more efficient vehicle management.</p> <p>Once in post the Fleet Systems Manager and Fleet Systems Support Coordinator will be able to provide the Fleet Management Team with data to make informed decisions and close this action however a revised due date is required to allow time for the recruitment process to be concluded. A revised due date of 31 March 2026 is proposed.</p> <p>This action remains amber due to the time required for the recruitment process to be concluded and the posts to be filled.</p> <p>[Proposed revised due date from 31 December 2025 to 31 March 2026]</p> <p>09 February 2026:</p> <p>The Fleet Systems Manager is now in post and recruitment is underway for the Fleet Systems Support Coordinator post with interviews taking place from mid-January 2026. Once in post, this will complete the team and enable the provision of vehicle usage data ensuring more efficient vehicle management.</p> <p>This action remains amber due to the time required for the recruitment process to be concluded and the posts to be filled.</p>	85%		Amber	
We recommend that the Service standardise the recording of equipment testing with a national electronic system as soon as possible.	11	Standardise the recording of equipment testing with a national electronic system.	Head of Asset Management, Ijaz Bashir	Sep-25	Dec-25 Mar-26	In Progress	<p>15 December 2025:</p> <p>Recruitment is underway for a Fleet Systems Manager and a Fleet Systems Support Coordinator. These roles are critical to progress any development of the Tranman system and possible migration to the Transend system. As such, progress will depend upon the successful recruitment of these posts whereupon the successful candidates will then be able to progress with system review. A revised due date is required to allow time for the recruitment process to be concluded. A revised due date of 31 March 2026 is proposed.</p> <p>This action remains amber due to the time required for the recruitment process to be concluded and the posts to be filled.</p> <p>[Proposed revised due date from 31 December 2025 to 31 March 2026]</p> <p>09 February 2026:</p> <p>The Fleet Systems Manager is now in post and recruitment is underway for the Fleet Systems Support Coordinator with interviews taking place from mid-January 2026. The Tranman User Group is now in place with scheduled meetings and a review of Tranman/Transend, as well as other available systems, is currently ongoing against the restrictions of the remaining Tranman contract, costs involved in upgrade to Transend and procurement issues in going to market.</p> <p>The existing Tranman contract has a limited lifespan against the potential investment required to migrate to Transend.</p> <p>Other systems are currently being reviewed in conjunction with Data and Technology Services (DaTS) colleagues to determine if a single solution application can meet the needs of Fleet, Equipment and Data and Technology Services (DaTS).</p> <p>This action remains amber due to the time required for the recruitment process to be concluded and the posts to be filled.</p>	85%		Amber	
We recommend that the Service should review its current partnership commitment within the West Service Delivery Area to gauge its investment in capacity and resources versus the added value to outcomes realised by the Service and the communities it serves.	19.1	Develop a principle based guidance document that enables the Service to manage and record partnership relationships effectively.	Head of Corporate Governance, Richard Whelton	Mar-25	Sep-25 Dec-25	Complete	<p>15 December 2025:</p> <p>The Partnerships Guidance document is now in draft and ready for sharing for internal consultation prior to publication. There is an interdependency relating to the capture of partnership working information/initiatives across the Service with the community safety initiatives application and this will be discussed with Prevention prior to publication.</p> <p>Consultation on the Guidance document will be followed by Strategic Leadership Team (SLT) approval.</p> <p>This action remains amber due to the slip in original timescales and the requirement for further discussions/work regarding information and data capture. Work is continuing towards the previously agreed revised due date of 31 December 2025.</p> <p>09 February 2026:</p> <p>The Partnerships Guidance document has now been shared internally for feedback and will be presented to the Strategic Leadership Team on 17 February. Following approval, it will be published by the end of February.</p> <p>Given that this document will be published by the end of February, it is proposed that this action is regarded as completed within this reporting period.</p>	100%		Blue	
	19.2	Apply the principle based guidance documents and reporting process to review current partnership commitments within the West Service Delivery Area.	Deputy Assistant Chief Officer (West), Ian McMeekin	Mar-26		In Progress	<p>15 December 2025:</p> <p>As per the previous quarterly update, this action is co-dependent, and therefore work will commence, on the completion on the development of a principle-based guidance document that enables the Service to manage and record partnership relationships effectively (Action 19.1).</p> <p>This action remains green and work will commence pending the completion of the development of a principle-based guidance document that enables the Service to manage and record partnership relationships effectively.</p> <p>09 February 2026:</p> <p>As per the previous quarterly update, this action is co-dependent, and therefore work will commence, on the completion on the development of a principle-based guidance document that enables the Service to manage and record partnership relationships effectively (Action 19.1).</p> <p>This action remains green and work will commence at the end of February when the guidance document above has been published.</p>	0%		Green	

We recommend that the Service should conduct a review of its leadership and management development processes to provide a national standard and syllabus for delivery at all levels.	20	Review SFRS Leadership and Management development processes to provide a national standard and syllabus for delivery at all levels.	Head of People, Lyndsey Gaja	May-25	Sep-26	In Progress	<p>15 December 2025: The Leadership and Management Development taskforce was established in September 2025, as a workstream of the Organisational Culture and Leadership Programme. The taskforce ran a full day workshop on 30 October 2025 to agree the initial priority work packages, which are now progressing.</p> <p>The workstreams will provide progress updates in December 2025 and present to the initial Organisational Culture and Leadership Programme Board in January 2026. The intention is to have approval of the initial programme content for supervisory managers by the end of Quarter 4 2025/26, with roll out commencing in Quarter 1 2026/27.</p> <p>This action remains green with work ongoing towards the previously agreed revised due date of 30 September 2026.</p> <p>09 February 2026: The Leadership and Management taskforce workstreams have been progressing the initial priority supervisory manager work packages and will present to the initial Organisational Culture and Leadership Programme Board in early 2026. The intention is to have approval of the initial programme content for supervisory managers by the end of Quarter 4 2025/26, with roll out commencing in Quarter 1 2026/27.</p> <p>This action remains green with work ongoing towards the previously agreed revised due date of 30 September 2026.</p>	50%		Green	
We recommend that the Service should review the national recruitment standards and T&Cs with a view to exploring, developing and implementing pragmatic and alternative solutions for local recruitment.	21	Review the national recruitment standards and Terms and Conditions (T&Cs) with a view to exploring, developing and implementing pragmatic and alternative solutions for local recruitment.	Head of People, Lyndsey Gaja	May-25	Apr-26	In Progress	<p>15 December 2025: Enhancements were made to the August 2026 Wholetime Firefighter (WT FF) recruitment process, including improved engagement materials, positive action events, the use of the ALICE AI tool for application analysis, and improvements to the Practical Selection Tests (PSTs) such as the introduction of pacers.</p> <p>A full review will take place following conclusion of the process, with further improvements planned for the next recruitment process in 2026. This action remains green with work ongoing towards the previously agreed revised due date of 30 April 2026.</p> <p>09 February 2026: The planned review of the amended Retained Duty System (RDS) Terms and Conditions (T&Cs) commenced in January 2026.</p> <p>The recruitment standards for On Call remain the same as Wholetime staff with all information for candidates contained within the recruitment information pack. There is also an On Call Practical Selection Test (PST) process flow chart which is available for hiring managers and this details some differences in the recruitment process for the benefit of local On Call recruitment. Although the same standards as Wholetime applicants must be achieved for progression, there are certain elements of the process where On Call candidates can obtain a second attempt, such as the calculation test, fitness test and specific elements of the Practical Selection Tests.</p> <p>This action remains green with work ongoing towards the previously agreed revised due date of 30 April 2026.</p>	80%		Green	
We recommend that the Service review the implementation of Operational Assurance Policy and practice within the West Service Delivery Area in order that improvement and development of local and organisation learning be realised.	29	Operational Assurance will consider conducting a thematic review of the implementation of Operational Assurance Policies and practice in the West Service Delivery Area (WSDA), (this will be determined on completion of the ongoing HMFSI Operational Assurance Inspection)	Alasdair Cameron / Laura McIntyre	Mar-26	Jun-26	In Progress	<p>15 December 2025: Following the publication of the HMFSI Operational Assurance Inspection Report (September 2025) and subsequent cross-referencing, this recommendation will be progressed as outlined within the West SDA Action Plan.</p> <p>To support this, a thematic review has been scheduled to commence in Q4 2025–26 reporting year, focusing on the implementation of Operational Assurance policies and practices.</p> <p>Given the sequencing of the Operational Assurance Report publication, with the need for confirmation on the most appropriate course of action for this West SDA recommendation, and a need for the work to progress through formal governance reporting following the outcomes from the thematic review, a formal request is made at this time to extend to the end of Q1 of the 2026–27 (30 June 2026) to enable this to take place accordingly.</p> <p>[Proposed revised due date from 31 March 2026 to 30 June 2026]</p> <p>09 February 2026: Operational Assurance are currently in the process of conducting a thematic audit of the implementation of Operational Policies and practice within the West Service Delivery. This Thematic audit commenced in January 2026 and will be reported through established governance routes in April 2026.</p> <p>The outcomes within the Thematic Audit will be informed through in person engagement with personnel across the West Service Delivery Area in addition to the use of data obtained from surveys service wide and through interrogation of existing systems.</p> <p>It is anticipated that the outcomes will be reported through established governance routes and this will begin at Safety and Assurance Function Management Team Meeting in April 2026 and conclude at the subsequent Training Safety and Assurance Board of which dates have still to be finalised for 2026/27.</p> <p>This action remains green with work ongoing towards the previously agreed revised due date of 30 June 2026.</p>	10%		Green	
We recommend that the Service provides clarity on the expected business planning processes to be adopted in the coming years, and how they should align to the Good Governance Framework. All agreed processes should then be reinvigorated and clearly communicated across all Service Delivery Areas.	1	Contact Deputy Assistant Chief Officers and Local Senior Officers to provide clarity on the forthcoming business planning arrangements, including the development timeline for the revision and publication of Local Fire and Rescue Plans that align with the Strategic Plan 2025-28.	Head of Corporate Governance, Richard Whetton	Dec-24		Complete	<p>17 February 2025: Local Senior Officers and Deputy Assistant Chief Officers were emailed in November 2024 and provided with an update on the development of the SFRS Strategy and, in turn, Local Fire and Rescue Plans. This was followed up by a more detailed email in January which provided links to a range of material including information on the business planning process and a detailed timeline for the development of our business planning documents, including the SFRS Strategy and Local Fire and Rescue Plans.</p> <p>This action is complete and has been marked blue.</p>	100%	N/A	Complete	Email to Local Senior Officers and Deputy Assistance Chief Officers dated November 2024. Email to Local Senior Officers and Deputy Assistance Chief Officers dated January 2025 with link to iHub page with detailed timeline and the business planning process information contained within the draft SFRS
We recommend that the Service review the impact of the Chief Officer's fund being removed within the West Service Delivery Area and that guidance is provided to all staff as to how this resourcing should be replaced.	2	Review the impact of the Chief Officer's fund being removed within the West Service Delivery Area and determine how this resource may be replaced. Ensure full guidance is provided to all staff on completion of review.	Head of Finance and Procurement, Lynne McGeough	Mar-25		Complete	<p>23 June 2025: A review through engagement with Local Senior Officer areas was undertaken and resulted in limited impact being noted, with areas focusing on how to support local areas through use of premises / buildings. Areas have also refocused attention on securing external funding to assist in being able to fund projects that have previously been funded through the Chief Officer's fund. In other cases bottom line budgeting has been used and costs have been offset with savings elsewhere within the Area.</p> <p>Current financial challenges impact the availability of this fund, however, since the removal of the fund other options have been explored and exercised and there has been no impact to service provision. It is suggested that current options be continued and external funding explored where available.</p> <p>This action is now complete and has been marked blue.</p>	100%	Jun-25	Complete	
We recommend that the West Service Delivery Area review the hazards within their area and confirm that specific operational procedures have been developed, if it is deemed that they are not covered entirely by generic standard operational procedures. (Local Action)	4	Review the current/future strategy for Standard Operating Procedures (SOPs) and the requirements for individual site specific procedures to identify specific risks within the Service Delivery Area which could require a site specific Standard Operating Procedure (SOP).	Deputy Assistant Chief Officer (West), Stephen Wright	Jan-25		Complete	<p>17 February 2025: As part of the Document Conversion project being carried out by the Operations Directorate, a review of all Standard Operating Procedures (SOPs) is being carried out to streamline the guidance to operational personnel at an operational incident. It is envisaged that there will not be a requirement for site specific Standard Operating Procedures (SOPs) for individual specific risks as the current process for gathering information on these risks is deemed to be appropriate for operational personnel. This information is gathered via existing operational intelligence, civil contingency partnership arrangements e.g. Multi-Agency Incident Response Guides (MAIRGs) and ongoing information update practices to operational crews from the premises responsible persons.</p> <p>This action is now complete and has been marked blue.</p>	100%	Jan-25	Complete	
We recommend that the Service review its Fire Appliance Driver and Specialist capacity in the West Service Delivery Area to understand the areas of most pressure and apply mitigation, which allows firefighters to practice variety in the role on a more regular basis.	5	Review the Fire Appliance Driver and Specialist capacity to understand the areas of most pressure and apply mitigation to allow firefighters to practice more variety and on a more regular basis.	Head of Training, Craig McGoldrick / Deputy Assistant Chief Officer (West), Stephen Wright / Operational Availability Group (OAG)	Nov-24		Complete	<p>17 February 2025: There is a current review (OAG Action) of drivers within each Watch and Station to understand any gaps and identify specific priorities. A criterion of one driver per appliance plus an additional driver per Watch for resilience is considered as the benchmark.</p> <p>Once the gap analysis is completed, engagement with the Training Function will take place to agree Training Needs Analysis (TNA) and priority for Watches and Stations accordingly.</p> <p>Mitigation is also considered for specific stations where there is the opportunity to use (i) CC drivers and (ii) Firefighters (FFs) in development who are also competent On Call FF drivers.</p> <p>It is proposed that this action should be closed as work is already being fully addressed via the Operational Availability Group (OAG).</p>	100%	Nov-24	Complete	
We recommend that the Service reviews the West Service Delivery Area Fire Station condition surveys to understand the areas of most pressure regarding dignified facilities and contaminants to explore any possible interim mitigation measures.	6	Review West Service Delivery Area (WSDA) fire station condition surveys to understand the areas of most pressure regarding dignified facilities and contaminants to explore any possible interim mitigation measures.	Head of Asset Management, Ijaz Bashir	Jun-25	Dec-25	Complete	<p>26 August 2025: Safety and Assurance have issued the Fire Contaminants Management Arrangement incorporating Premises Specific Risk Assessment and Premises Zoning Guidance which is being implemented by Premises Responsible Persons at all premises and any ad hoc Property Adaptations required to facilitate are being collated by the Contaminants group for assessment and to inform any funding business case required. All Stations have been reviewed in terms of Dignified Facilities and whilst not to the services adopted standards for new build of single occupancy gender neutral facilities, all Wholetime stations in the West Service Delivery Area have dedicated Male/Female Toilet and Shower provision. All On-Call properties in the West, bar 4 non-fire station establishments (sheds), have either dedicated Male/Female or single occupancy gender neutral toilets and all bar the above mentioned 4 sheds and the two garage style Volunteer properties at Buenssan and Port Ellen have either dedicated Male/Female or single occupancy gender neutral showers.</p> <p>The Dignified Facilities/Contaminant Control reconfiguration at Calton Fire Station is currently in progress and a Planning Application for the reconfiguration of Kilmarnock Fire Station has been submitted with a view to commencing project this year.</p> <p>Recent Modernisation projects to reconfigure existing stations for Contaminant Control/Dignified Facilities are averaging circa £3M for a Wholetime station and £1M-£1.5M for an On-Call station. Progress is limited by available funding and other priorities within the Service. There are no low cost measures that are not already implemented to increase/improve/upgrade facilities and even temporary accommodation style solutions can cost up to mid-six figures to implement</p> <p>We await the outcome of the Premises Risk Assessment and Zoning exercise to identify any works required at individual stations to facilitate the implementation of the contaminant management arrangements and continue to progress program of reconfiguration across the estate as funding permits.</p> <p>This action has been marked blue and is now complete with any further works being undertaken as business as usual (BAU).</p>	100%		Complete	

We recommend that the Service resolves the RAAC roofing problems at the affected stations as a matter of urgency (West SDA).	7	Identify solutions for permanent resolutions to those stations in the West SDA that have Reinforced Autoclaved Aerated Concrete (RAAC) roofing.	Head of Asset Management, Ijaz Bashir	Jun-25	Dec-25	Complete	23 June 2025: Stewarton – A site search has identified a number of possible new build sites and these have been reviewed by service delivery for operational suitability. On approval of preferred site, property services will commence due diligence and negotiations with the land owner to secure the site for future construction. The remaining three sites - Cumbernauld, Helensburgh and Milngavie - continue to be regularly inspected to monitor their condition, and we have options to resolve, through either new build or remediation, which will be progressed dependent upon the outcomes of the Strategic Service Review Programme. CORPORATE BOARD UPDATE: There is clear evidence that the recommendation has been given due regard and that the work to identify solutions for permanent resolutions to those stations in the West SDA that have Reinforced Autoclaved Aerated Concrete (RAAC) roofing was fully scoped and is underway. The work is well established and being monitored. As such, this action is determined as closed, and future work will be undertaken as 'business as usual' and will be monitored accordingly.	100%		Complete	
We recommend that the Service review the existing practices and processes within the West Service Delivery Area for property maintenance with the Central Property partner in order that increased local administration and responsibility of property be explored.	8	Review existing practices and processes within the West Service delivery Area (WSDA) for property maintenance with the Central Property Partner.	Head of Asset Management, Ijaz Bashir	Jun-25		Complete	23 June 2025: The Regional Property Manager provides scheduled updates on minor works and repairs and maintenance orders as part communication to Local Senior Officers (LSOs). The Regional Property Manager meets with the Central Property Partner every week, alternating between Repairs and Maintenance and Minor Works agendas. All Stations have access to the Property Portal on Civica Asset Management System to raise issues directly to the Central Property Partner. This action is now complete and has been marked blue.	100%		Complete	
We recommend that the Service reviews the existing practices and processes for equipment provision and maintenance within the West Service Delivery Area with the Central Equipment partner in order that increased local administration and responsibility of equipment can be realised.	10	Review existing practices and processes within the West Service Delivery Area (WSDA) for equipment provision and maintenance with the Central Equipment Partner.	Head of Asset Management, Ijaz Bashir	Apr-25		Complete	17 February 2025: Asset Management (Equipment Section) ensures that equipment is inspected through a national contract together with maintenance in line with operational appliance schedules. Processes are in place and performance of the contract is monitored together with review to ensure equipment is kept within certification. Feedback from quarterly Deputy Assistant Chief Officer (DACO) meetings is taken onboard. It is proposed that this action is closed. This action is now complete and has been marked blue.	100%	Jan-25	Complete	
We recommend that the Service reviews the existing Breathing Apparatus provision within Volunteer Stations to satisfy itself that training, testing and maintenance is being conducted to an acceptable standard and that the capability can be deployed safely within existing policy and operational guidance.	12	Review existing Breathing Apparatus provision in On-call (volunteer) stations and confirm appropriate action to address inconsistencies to provide a standard approach that meets acceptable standards.	Head of Operations, Garry Mackay	Feb-25		Complete	17 February 25: There are processes in place for the review and monitoring the competence of Breathing Apparatus (BA) wearers, this is managed locally at Local Senior Officer (LSO) level and where wearers are not considered competent then the capability is removed from the rostering system. This will remove the appliance from the mobilising system should the deficiency result in unsafe crewing levels. There are also local arrangements to support the testing and cleaning of Breathing Apparatus (BA) sets and associated equipment. This is further supported by the Training Function with Breathing Apparatus (BA) refresher program and Instructors able to provide support to the more remote areas in conjunction with the Local Senior Officer (LSO). Operations are working with Assets in the procurement of replacement Breathing Apparatus (BA) sets. This review will include the distribution of Breathing Apparatus sets and their operation, and will align with the Strategic Service Review Programme (SSRP). This action is now complete and has been marked blue.	100%	Jan-25	Complete	
We recommend that the West Service Delivery Area reviews the existing Safe Working at Height provision within Dumfries & Galloway and develop an improvement plan for consistent maintenance of skills and service delivery.	13	Review existing Safe Working at Height provision and confirm appropriate action to address inconsistencies to provide a standard approach to type and use of the equipment.	Head of Operations, Garry Mackay / Deputy Assistant Chief Officer (West), Stephen Wright	Jan-25		Complete	17 February 25: A national review of Safe Working At Heights (SWAH) provision has been undertaken across the SFRS, specifically in the West Service Delivery Area (SDA) where there have been realignments scheduled for the stations within Dumfries. This will realign the current provision to new Tier 1 and Tier 2 capabilities which will be standardised across Scotland. Safe Working At Heights (SWAH) Tier 2 training - All wholetime watches at Dumfries will have their training completed by late April/early May. Dumfries On call, alongside Moffat and Newton Stewart personnel will work to Tier 2 within training year 2025/26. Tier 1 identified stations will be skilled locally, by Training. Asset Management have new Safe Working At Heights (SWAH) equipment for Tier 1 and 2 will be provided and this will go live on completion of the respective training. This action is now complete and has been marked blue.	100%	Jan-25	Complete	
We recommend that the Service investigate the application of the national laundry contract processes and look to explore improvements within the West Service Delivery Area.	14	Undertake a review of the application of the national laundry contract processes and make recommendations for improvement where necessary.	Head of Asset Management, Ijaz Bashir	Apr-25		Complete	17 February 2025: The standardised laundry contract currently in place has been reviewed and operates to the contract terms of 7 days from point of receipt at laundry facility to return to SFRS hubs. The provision of additional reserve Personal Protective Equipment (PPE) assists in ensuring availability. The performance of the contract continues to be monitored. It is proposed that this action is closed as appropriate monitoring is in place. This action is now complete and has been marked blue.	100%	Jan-25	Complete	
We recommend that the Service completes its review of the Functional Management structure within Johnstone Operations Control to ensure staff are being supported and operational preparedness is being delivered in the most efficient and effective way.	15	Review of National Operations Control Structure to ensure sufficient fire control employees to provide a resilient Fire Control.	Head of Operations, Garry Mackay	Jan-25		Complete	17 February 25: A review of the Operations Control (OC) Structure has taken place over the past year incorporating full consultation with Operations Control (OC) personnel and Representative Bodies. This work has been supported by the People Directorate. A business case was submitted to the Strategic Leadership Team Meeting on 17th December 2024. Further information was requested and this was re-submitted to the January 2025 Strategic Leadership team Meeting for approval. This action is complete in terms of the review of the national Operations Control Structure and has been marked blue.	100%	Jan-25	Complete	
We recommend that the West Service Delivery Area should seek to strengthen and improve the operational and managerial links to Johnstone Operations Control to improve operational preparedness and delivery. (Local)	16	Consider how to improve existing relationships between Local Senior Officer management teams and station personnel to improve operational and management links.	Deputy Assistant Chief Officer (West), Stephen Wright	Jan-25		Complete	17 February 2025: Engagement has taken place with West Service Delivery Area (SDA) Local Senior Officers (LSOs) and senior Johnstone Operations Control (JOC) staff to consider how best to strengthen these links. The main challenge is capacity to release Operations Control (OC) staff to participate in any other engagement out with Johnstone Operations Control. Johnstone Operations Control (JOC) staff were invited and participated in the recent multi agency exercise at Faslane which was very successful and invites will continue for future internal and external exercises. Senior Johnstone Operations Control (JOC) staff will be invited to future Service Delivery Area (SDA) and Local Senior Officer (LSO) management team meetings to enable national and local engagement and updates to take place. In addition station visits to Johnstone Operations Control (JOC) are being arranged for 2025 and West Flexi Duty Manager (FDM) visits to Incident Support Room (ISR) familiarisation sessions. It is proposed that this action is closed and progressed as Business As Usual (BAU). A schedule of visitations from Operational Station Personnel have been on-going over the past year co-ordinated by Johnstone Operations Control (JOC). These visitations will continue as required. At present a schedule is being arranged for Incident Support Room visits for Operational Flexi-Duty Officer Groups to improve operational preparedness and enhance management links. This action has been completed and has been marked blue with further work being undertaken as Business As Usual.	100%	Jan-25	Complete	
We recommend that the Service should review its consultation and liaison process to ensure that the staff at Johnstone Operations Control are provided with enough 'lead' time to prepare and train for policy and procedural changes.	17	Review existing procedure within Operations Control for the creation, consultation and implementation of new or revised policy and procedures.	Head of Operations, Garry Mackay	Sep-24	Aug-25	Complete	26 August 2025: Operations Control (OC) have a Subject Matter Expert (SME) embedded with the Operations Policy and Procedure Team affording early insight to changes in Policy and Procedure. The OC SME highlights where policy and procedural changes impacts Operations Control directly ensuring that an appropriate timeframe for informing of change, training needs and any systems changes are met. Whilst this allows a suitable lead timeframe for the creation, consultation and implementation of new or revised policy and procedures, it must be noted that there are changes that require to be implemented at short notice, namely critical safety changes or new resources. These short notice changes are supported with the use of Service Delivery Alerts, Awareness Briefings and input at Watch level to ensure both understanding of short notice change and maintaining welfare of personnel. This action has been marked blue and is now complete.	100%	Aug-25	Complete	
We recommend that the Service should review its consultation, communication and liaison process to ensure the staff and partners are fully engaged in future substantial change processes.	18	Implement Consultation Policy that aligns with the Communications Strategy to guide communications and engagement planning for significant change plans, including a debrief process.	Head of Communications, Marysia Watters	Sep-24		Complete	17 February 2025: A debrief was held within the communications department following the implementation of the operational changes to identify lessons learned and reports were shared with the Strategic Leadership Team (SLT). This has been used to inform our approach to development of options for consultation and to ensure that SFRS adheres to the staff first principle enshrines in the SFRS Communications Strategy. This action is complete and has been marked blue.	100%	Sep-24	Complete	
We recommend that the Service review its engagement strategy with a view to improving the visibility of Strategic Management at local level.	22	SFRS Communications and Engagement strategy has been reviewed to ensure it meets the needs of the organisation. Internal communication framework is to be developed.	Head of Communications, Marysia Waters	Mar-25		Complete	17 February 2025: The Draft Internal Communications Framework will go to Corporate Board in February 2025. This action is progressing and has been marked green. 23 June 2025: The Internal Communications Framework is completed and currently going through the governance process. It is scheduled to go Corporate Board in June for final approval. This action is now complete and has been marked blue.	100%	Aug-25	Complete	
We recommend that the Service review its management and governance structure with a view to identifying improvements, which would give staff more local responsibility, autonomy and flexibility.	23	Undertake a series of Focus Groups to inform a review of governance structures and processes within the West Service Delivery Area.	Head of Corporate Governance, Richard Whetton	Aug-25		Complete	26 August 2025: In discussion with DACO McMeekin, a paper with recommendations for governance changes has been produced. Any changes are proposed to be phased in over the rest of 2025. This action has been marked blue and is now complete.	100%	Aug-25	Complete	
We recommend that the West Service Delivery Area reviews its delivery of Core Skill TfOC training with improvement in completion at Volunteer Duty System stations deemed a priority. (Local Action)	24	Review current strategy for training delivery of Training for Operational Competence (TfOC) Core Skill training for Volunteer Duty System (VDS) staff.	Head of Training, Craig McGoldrick Deputy Assistant Chief Officer (West), Stephen Wright /	Jan-25		Complete	17 February 2025: A review will be instigated by Local Senior Officer (LSO) Area teams responsible for Volunteer Duty System (VDS) stations, with specific focus on Training for Operational Competence (TfOC) module requirements tailored to their station risk profiles. Once completed, robust monitoring and management of Volunteer Duty System (VDS) station quarterly training performance is required by Local Senior Officer (LSO) Area teams and the Training Function will support the amendment of station specific Training for Operational Competence (TfOC). It is proposed that this action should be closed, and work should be considered as business as usual (BAU).	100%	Jan-25	Complete	

We recommend that the Service review its delivery of core skill refresher training with improvement in West Service Delivery Area Breathing Apparatus Compartment Fire and Tactical Ventilation courses and all skills at Volunteer Duty System stations deemed a priority.	25	Review current strategy for training delivery of Training for Operational Competence (TfOC) Core Skill refresher training regarding Breathing Apparatus Compartment Fire and Tactical Ventilation for Volunteer Duty System (VDS) staff.	Head of Training, Craig McGoldrick	Nov-24		Complete	17 February 2025: It should be noted that since the HMFSI field work, the Service has implemented a Breathing Apparatus (BA) Recovery Programme which will see all qualified Breathing Apparatus (BA) wearers attend a revised 3:1 Course to address competency gaps. The Breathing Apparatus (BA) Recovery Programme will be reported, with full updates provided, via Training Functional Management Team (FMT) and the Training Safety and Assurance Directorate Management Team (DMT) (governance and scrutiny). It is proposed that this action should be closed as work is being undertaken and scrutinised through established governance routes.	100%	Nov-24	Complete	
We recommend that the Service review its delivery of specialist skill refresher training with improvement in WSDA Heavy Rescue and USAR required.	26	Review delivery of specialist skill refresher training with specific improvement in Heavy Rescue and Urban Search and Rescue (USAR).	Head of Training, Craig McGoldrick	Nov-24		Complete	17 February 2025: The data used by HMFSI for their inspection report was from the 2022/23 Key Performance Indicator (KPI) reporting and it should be noted that since the HMFSI field work, the reporting data for Heavy Rescue and Urban Search and Rescue (USAR) now have a competency percentage of 125% and 99% respectively. It is proposed that this action should be closed as work has been undertaken and refresher training for Heavy Rescue and Urban Search and Rescue has continued to be undertaken and competency levels have been attained.	100%	Nov-24	Complete	
We recommend that the Service review the provision of TSFF training and explore the delivery of WSDA acquisition and refresher courses in the future.	27	Review the provision of Tactical Ship Firefighting (TSFF) training and explore the delivery of acquisition and refresher courses.	Head of Training, Ross Robison	Nov-24	Mar-25	Complete	23 June 2025: It is proposed that this action should be closed. A joint review of the SFRS Marine Capability was carried out by Operations Function and supported by Training Function specialist skill leads. To meet the findings of the review: Year 1 focus on Command & Control aspects • SFRS Training Function facilitated and delivered acquisition training to upskill and qualify 12 x Marine Tactical Advisors. These Flexi Duty Officers now provide 24/7 coverage across our Incident Command System (Completed March 2025). (link to Course outcomes as evidence). • To enhance the knowledge and understanding of Operational staff, Training Function E-Learning & Development designed and launched a Maritime Case Study which is now available on our SFRS Learning Content Management System (LCMS) platform, created via cutting-edge XVR Immersive Software (link as evidence). Future planned work, to go beyond the recommendation/action, includes: • The Training Function intends to review the current Marine National Training Standard as part of an upcoming National Training Standards Review Project. • Operations and Training continue to ensure alignment in the support of the roll out of additional Marine capabilities (Operations Strategy), this will be driven by Policy and Operational Procedure reviews. This action is now complete and has been marked blue.	100%	Mar-25	Complete	
We recommend that the Service implement and resource the new Training Vision and Strategy in its entirety, in order that both historic and contemporary areas of improvement be upgraded and that evaluation of this be completed.	28	Implement and resource the new SFRS Training Vision and Strategy.	Head of Training, Craig McGoldrick	Nov-24		Complete	17 February 2025: The Training Vision and Strategy (TVS) has been launched and Training Frameworks are in development to embed the approach laid out within the Training Vision and Strategy (TVS). A Training Asset Management Programme is also in development (due November 2024) which will complement the asset refresh and investment to complement the Training Vision and Strategy (TVS). This is business as usual (BaU) and will be reported on under the Training Continuous Improvement Plan via the Functional Management Team, Directorate Management Team and People Committee (governance route). It is proposed that this action should be closed as work is being undertaken and reported and scrutinised through established governance routes.	100%	Nov-24	Complete	

SCOTTISH FIRE AND RESCUE SERVICE

Service Delivery Committee



Report No: C/SDC/01-26

Agenda Item: 9.1

Report to:		SERVICE DELIVERY COMMITTEE						
Meeting Date:		24 FEBRUARY 2026						
Report Title:		SERVICE DELIVERY COMMITTEE QUARTERLY PERFORMANCE – Q3 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>					
			<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose							
1.1	To provide members with the quarter 3 performance of KPIs 1 – 21, 30 & 31 for fiscal year 2025-26.							
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 this quarter as a new performance framework progresses through governance.							
3	Main Report/Detail							
3.1	This paper covers all performance indicators stated in the PMF intended for scrutiny by the Service Delivery Committee.							
3.2	Please note that KPI 7 - % High Risk HFSV and KPI 8 - % Partner Referral HFSV are no longer available due to changes in the underlying data captured.							
3.3	In November 2025 the SFRS migrated from the Incident Recording System (IRS) to the Fire and Rescue Data Platform (FaRDaP) for operational data recording. Since the migration there are issues downloading operational records into the SFRS digital infrastructure. Consequently, we have not been able to automatically produce KPIs based on operational records for 2025-26 Q3. A manual work-around has been used to report KPIs 1,2,3,5,10,12,13,21,30, and 31. KPI 21 – UFAS Incidents has been produced using a similar but different definition due to limitations in data access.							
3.4	It has not been possible to produce the following KPIs as they could not be manually extracted from the system: <ul style="list-style-type: none">KPI 14 - Median Response Time to Life Risk IncidentsKPI 15 - Median Call Handling Time for Life Risk IncidentsKPI 11 - % High Severity ADFs							
3.5	A developer in DaTS is working on the download process in conjunction with subject experts within the Ministry for Housing, Communities and Local Government (MHCLG) to restore full data access.							

3.6	On-call rostering systems also changed in 2025-26 Q3, which has impacted our semi-automated process for reporting KPI 16 - On-Call 1st Appliance Availability. Access to the underlying data for On-Call availability has not yet been established by the Rostering Project. We have manually joined in data from the new system; however, it has not been possible to do this seamlessly. In-system reporting runs on a weekly basis (Monday – Monday), yet system changes occurred mid-week (Tuesday), it has not been possible to merge that week, so we have defaulted to using the new system report for that week.
3.7	The Operational Intelligence (OI) department is currently unable to report on OI activities, including KPI 18 – Operational Intelligence Inspections for 2025-26 Q3. Since the beginning of October 2025, the OI system has been unable to integrate with the QlikView data extraction and reporting platform. Digital and Technology Services (DaTS) have confirmed that QlikView is no longer supported and is scheduled to be replaced. As a result, no alternative reporting solution is currently available to enable the extraction, interrogation, or analysis of data from the OI system.
3.8	As an interim measure (pre 2025 SFRS Strategy & PMF), any current KPI indicators with compliance, statutory or other legislative implications, are identified in <u>red underlined text</u> to assist their intended audience considering wider implications than just improving or deteriorating performance.
3.9	<p>The indicators identified in this report as pertinent to the requirement of 3.5 are –</p> <ul style="list-style-type: none"> • 9 - Audits Completed – SG Fire and Rescue Framework states “<i>SFRS should deliver its statutory duties by providing information, guidance and advice and fire safety audits of relevant premises</i>”. • 17 - Wholetime Availability – 5WDS Collective Agreement Statement states “<i>The 5WDS is managed with the aim of maintaining agreed confidence levels</i>”. • 18 - OI Inspections – OI Policy and Guidance states “<i>SFRS has a statutory obligation under the Fire (Scotland) Act 2005, which directs the SFRS to have arrangements in place for obtaining information required or likely to be required for fires and other emergencies</i>”.
3.10	<p>Exceptional variation:</p> <ul style="list-style-type: none"> • 6 - HFSV Conducted
3.11	<p>Deteriorating (long-term):</p> <ul style="list-style-type: none"> • 16 - On-Call 1st Appliance Availability
3.12	<p>Improving (long-term):</p> <ul style="list-style-type: none"> • 1 - Non-domestic Building Fires • 2 - Deliberate Primary Fires • 3 - Refuse and Vehicle Fires • 10 - ADFs • 20 - Hydrant Inspections • 21 - UFAS Incidents
3.13	<p>Not changing:</p> <ul style="list-style-type: none"> • 4 - Fire Fatalities • 5 - Fire Casualties • <u>9 - Audits Completed – TARGET NOT KNOWN</u> • 13 - Non-refuse Secondary Fires • <u>17 - Wholetime Availability</u> • 19 - Ops Assurance Audit Actions

3.14	<p>Not known – limited data or unspecified direction:</p> <ul style="list-style-type: none"> • 7 - % High Risk HFSV • 8 - % Partner Referral HFSV • 11 - % High Severity ADFs • 12 - Total Incidents • 14 - Median Response Time to Life Risk Incidents • 15 - Median Call Handling Time for Life Risk Incidents • <u>18 - OI Inspections</u> • 30 - Assist Other Agencies Incidents • 31 - Effect Entry/Exit Incidents
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	<p>SPPC001 - Service Performance Management – High Risk</p> <p>There is a risk of the service not consistently providing accurate performance management information from some sources due to inaccurate data or inadequate systems resulting in loss of confidence in reporting service performance.</p>
5.1.2	<p>Appetite - In relation to our internal governance, including systems of controls and data governance, SFRS has a Cautious appetite.</p> <p>.</p>
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	There are no workforce implications in this paper
5.5	Health & Safety
5.5.1	There are no specific Health and Safety implications addressed in this paper
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	There are no specific Training implications addressed in this paper
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 1 & 2

5.10 5.10.1	Communications & Engagement There are no specific Communications & Engagement implications addressed in this paper	
5.11 5.11.1	Legal There are no specific Legal implications addressed in this paper	
5.12 5.12.1	Information Governance DPIA completed - No	
5.13 5.13.1	Equalities EHRIA completed - No	
5.14 5.14.1	Service Delivery All performance measures reported are linked to Strategic Outcomes 1 & 2 and specific to Service Delivery	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	David Farries, Assistant Chief Officer
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 Service Delivery Committee Performance 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:		Andrew Watt, Deputy Chief Officer
Links to Strategy and Corporate Values		
<u>Strategy</u> <u>Outcome 1 - Community safety and wellbeing improves as we deploy targeted initiatives to prevent emergencies and harm.</u> <ul style="list-style-type: none"> Supporting business owners to protect Scotland's non-domestic buildings and premises. we will continue to enforce and provide advice around fire safety legislation to business owners in shops, offices, workshops and factories. We will further expand our prevention work to Scottish households and develop our prevention approaches to influence people's behaviours to help keep themselves safe and improve their wider wellbeing. We will build on the work with our partners to target education and safety initiatives to those who need it most, including the young and the vulnerable. 		

Outcome 2 - Communities are safer and more resilient as we respond effectively to changing risks. <ul style="list-style-type: none"> • More efficiently responding to false fire alarm calls and improving road safety by reducing the number of blue light journeys we make to them. • Improving how we manage calls from the public and deploy our resources to emergency incidents. • We will ensure we have the right resources in the right places at the right times and further improve our On Call service. 		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>Service Delivery Committee</i>	<i>24 February 2026</i>	<i>For Scrutiny</i>
<i>Service Delivery Board</i>	<i>10 February 2026</i>	<i>For Scrutiny</i>



SCOTTISH

FIRE AND RESCUE SERVICE

Working together for a safer Scotland

Service Delivery Committee Performance Report



**LIVE
MANAGEMENT
INFORMATION**

Latest quarter shown: **2025-26 Q3**

Previous report

All previous reports

APPENDIX A

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



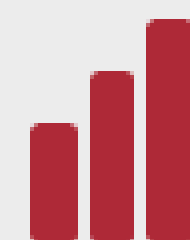
Welcome

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

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

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

Key contact: Bl@firescotland.gov.uk



**BUSINESS
INTELLIGENCE**



LIVE MANAGEMENT INFORMATION

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

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

SPC Charts




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

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




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

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

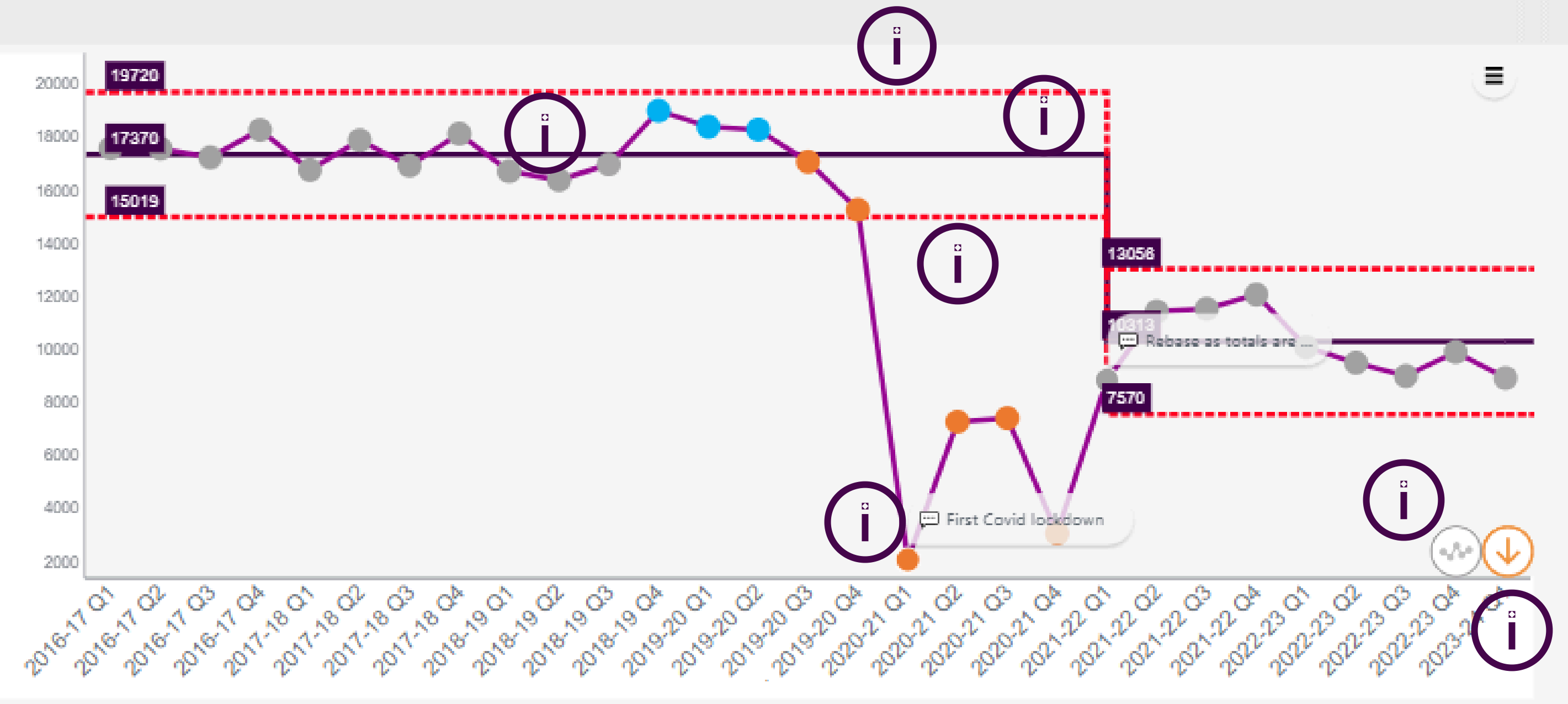
Normally data points will fall **between the upper and lower control limits**. If any of the following scenarios apply, the change needs to be investigated and an explanation provided. Over time this lets us analyse performance in a meaningful way.

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

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

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

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



Above: anatomy of a SPC chart

Data source for this report:

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



Frequency of update:

This report will be updated quarterly.

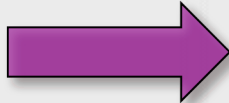
OUTCOME 01 (Prevention & Protection)

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



OUTCOME 02 (Response)

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



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

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



Prevention and Protection



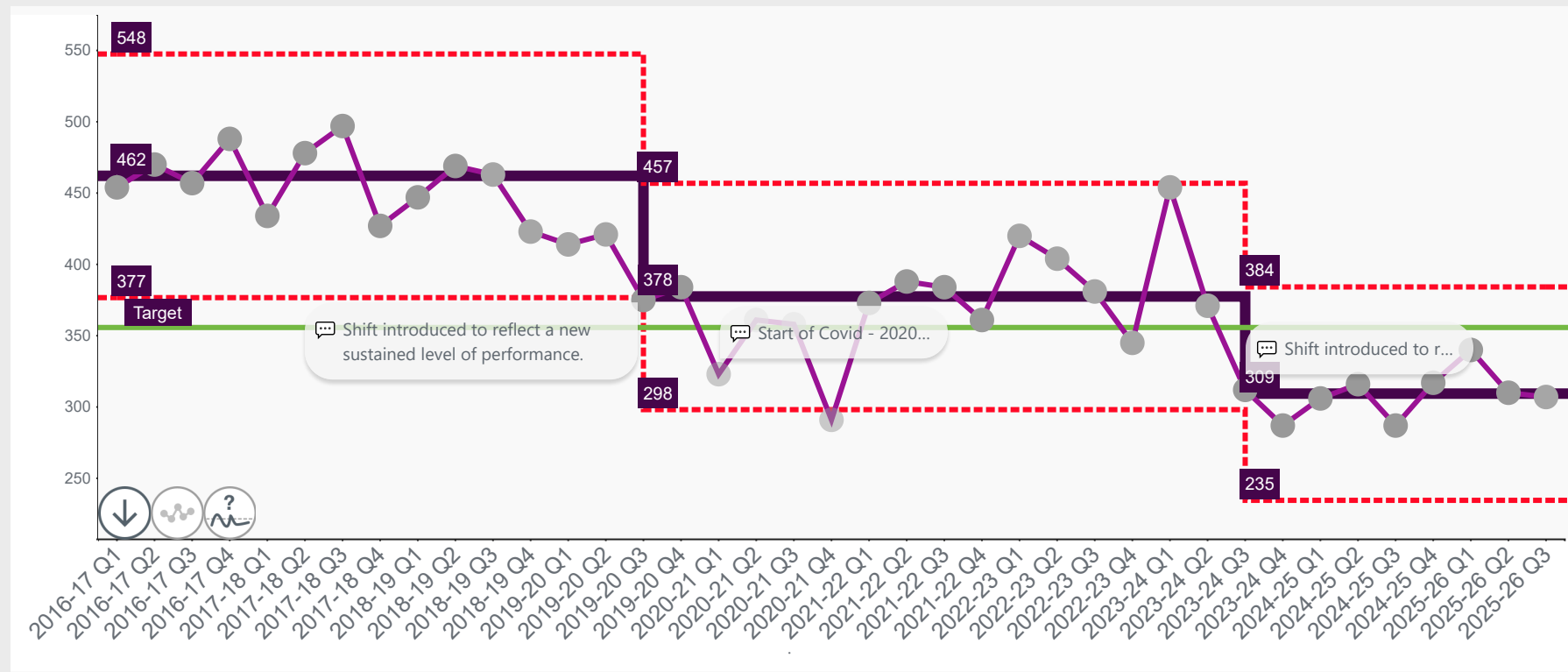
Community safety and wellbeing improves as we deploy targeted initiatives to prevent emergencies and harm.

KPI 1 Non-domestic Building Fires

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

Reduce against previous year

OWNER: Head of Service Delivery - East



SUMMARY

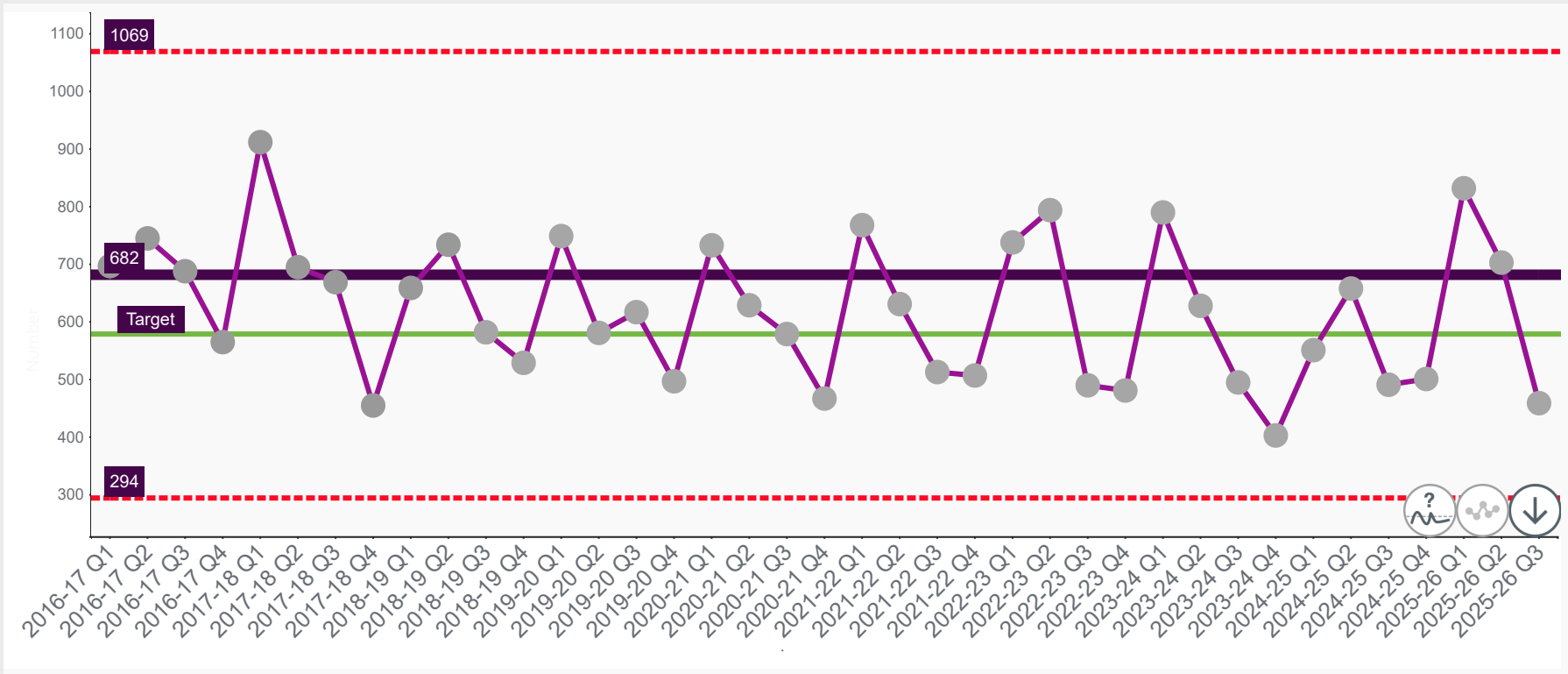
Maintaining Fire Safety enforcement schedules, continuing to educate Duty holders regarding responsibilities in fire safety. Continual monitoring at a local and national level, analysis will inform any remedial action if required.

KPI 2 Deliberate Primary Fires

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

Reduce against previous year

OWNER: Head of Service Delivery - East



SUMMARY

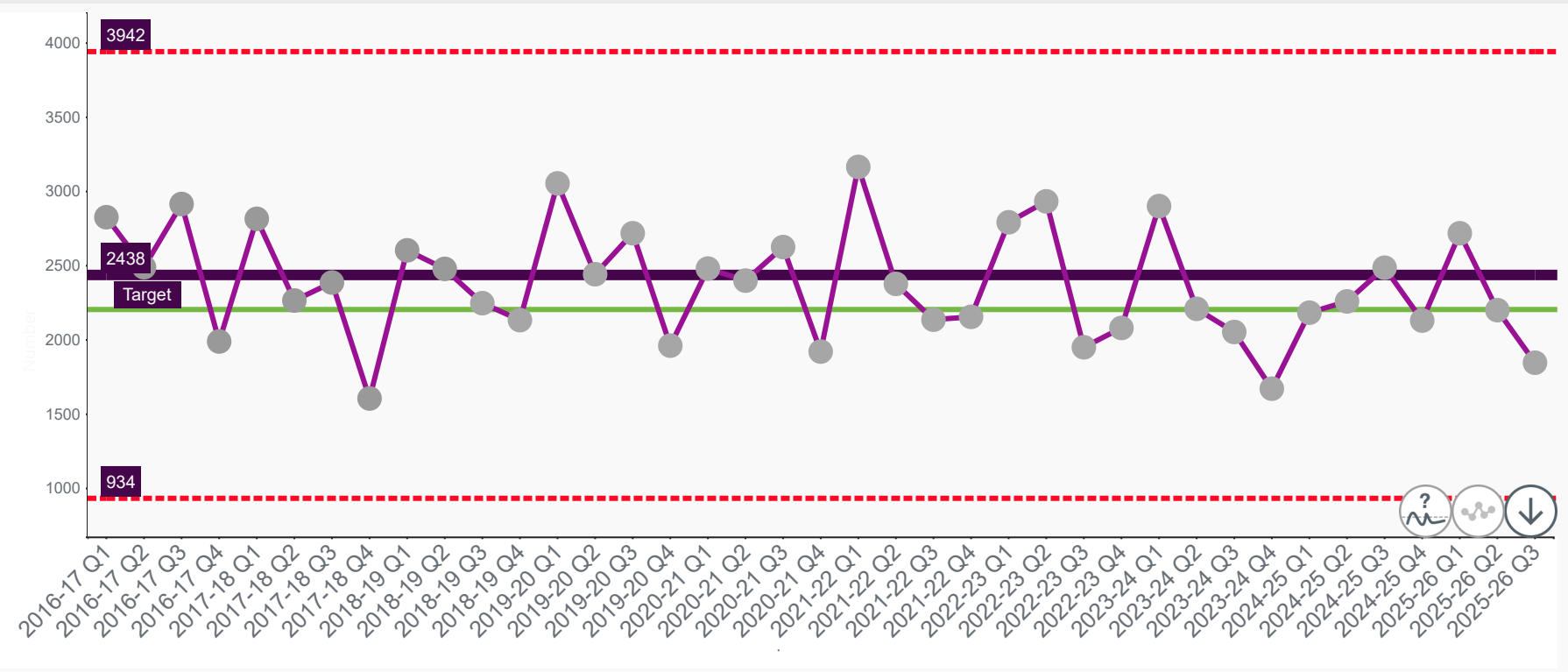
Significant decrease from previous quarter. Continued prevention activities within both domestic and non domestic settings. Data should be used to identify and drive appropriate prevention activities.

KPI 3 Refuse and Vehicle Fires

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

Reduce against previous year

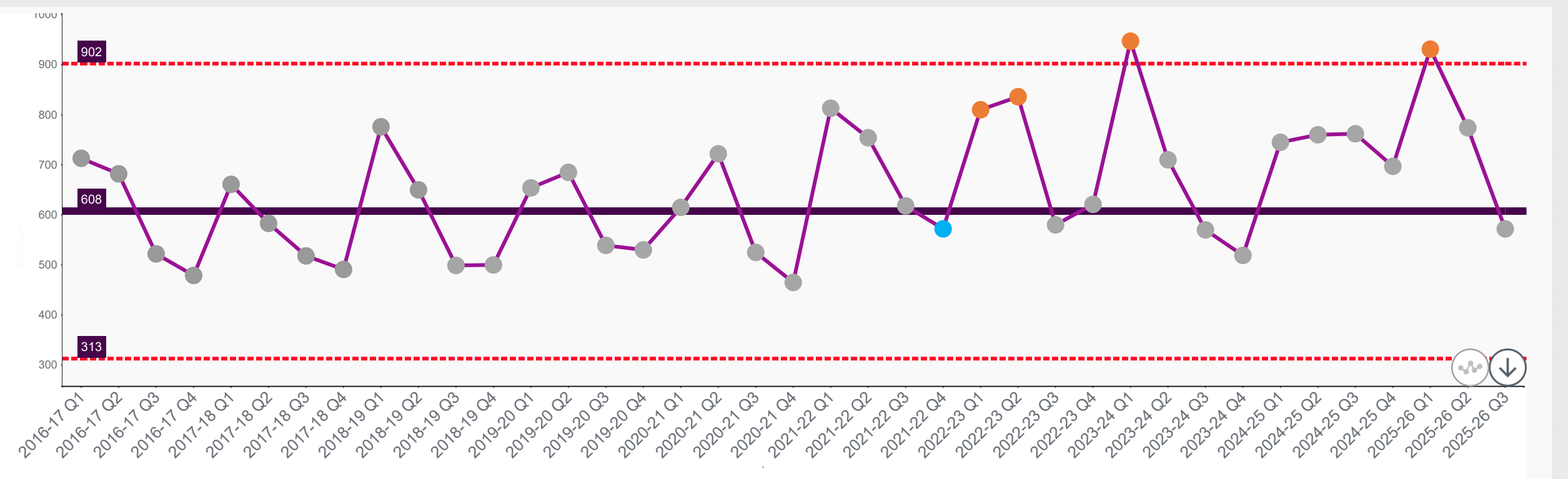
OWNER: Head of Service Delivery - East



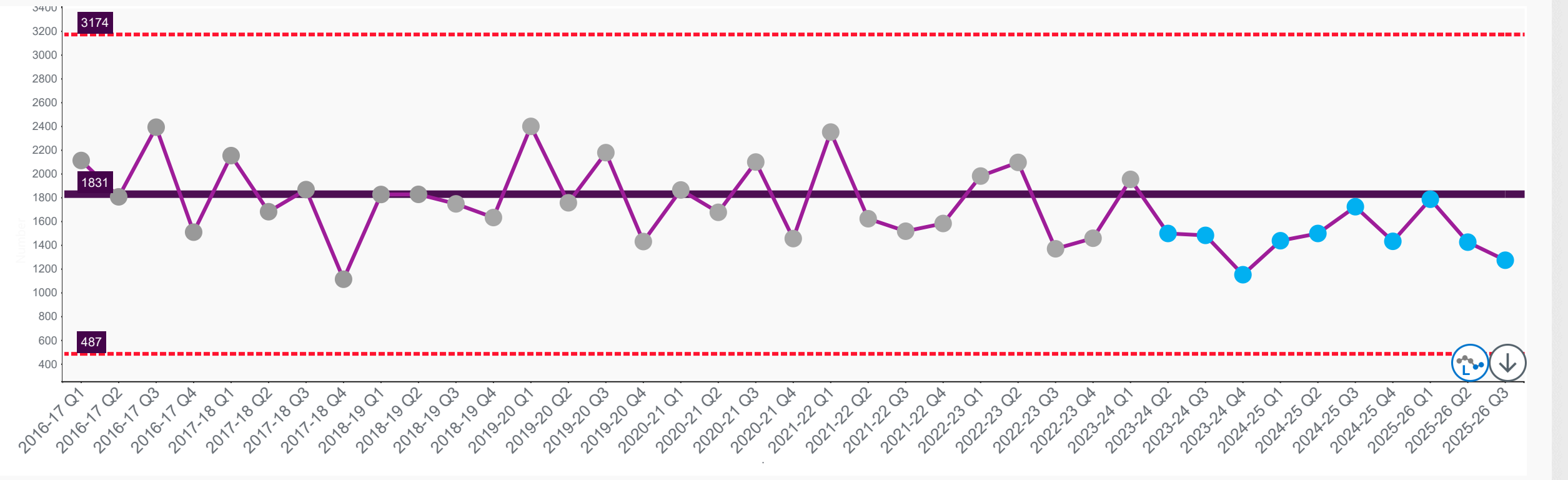
SUMMARY

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

Accidental Refuse and Vehicle Fires



Deliberate Refuse and Vehicle Fires



Prevention and Protection

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



KPI 4 Fire Fatalities

Reduce against previous year

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

OWNER: Head of Service Delivery - East

SUMMARY

Fire fatality numbers remain generally consistent with previous data, however show a slight increase from previous quarter. We continue to apply post incident multi agency case conferences to assess and identify causes and any common trends, which may inform future prevention measures.

Building Fire Fatalities

Vehicle Fire Fatalities

Outdoor Fire Fatalities

KPI 5 Fire Casualties

Reduce against previous year

PURPOSE: SFRS aims to refocusing our preventative activities to address issues of social, economic and health inequalities and sustained behaviour change in the home. This should reflect reduced victims of fire.

OWNER: Head of Service Delivery - East

SUMMARY

Slight increase from previous quarter. Our main prevention activity will continue to be Home fire safety visits and community education. Serious fire casualties will include multi agency case study approach. This KPI is subject to seasonal trends.

Building Fire Casualties

Vehicle Fire Casualties

Outdoor Fire Casualties

OUTCOME 1: KPI 6 - 11

SCOTTISH
FIRE AND RESCUE SERVICE

LIVE
MANAGEMENT
INFORMATION

Prevention and Protection

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

KPI 6

Number of Home Fire Safety Visits conducted

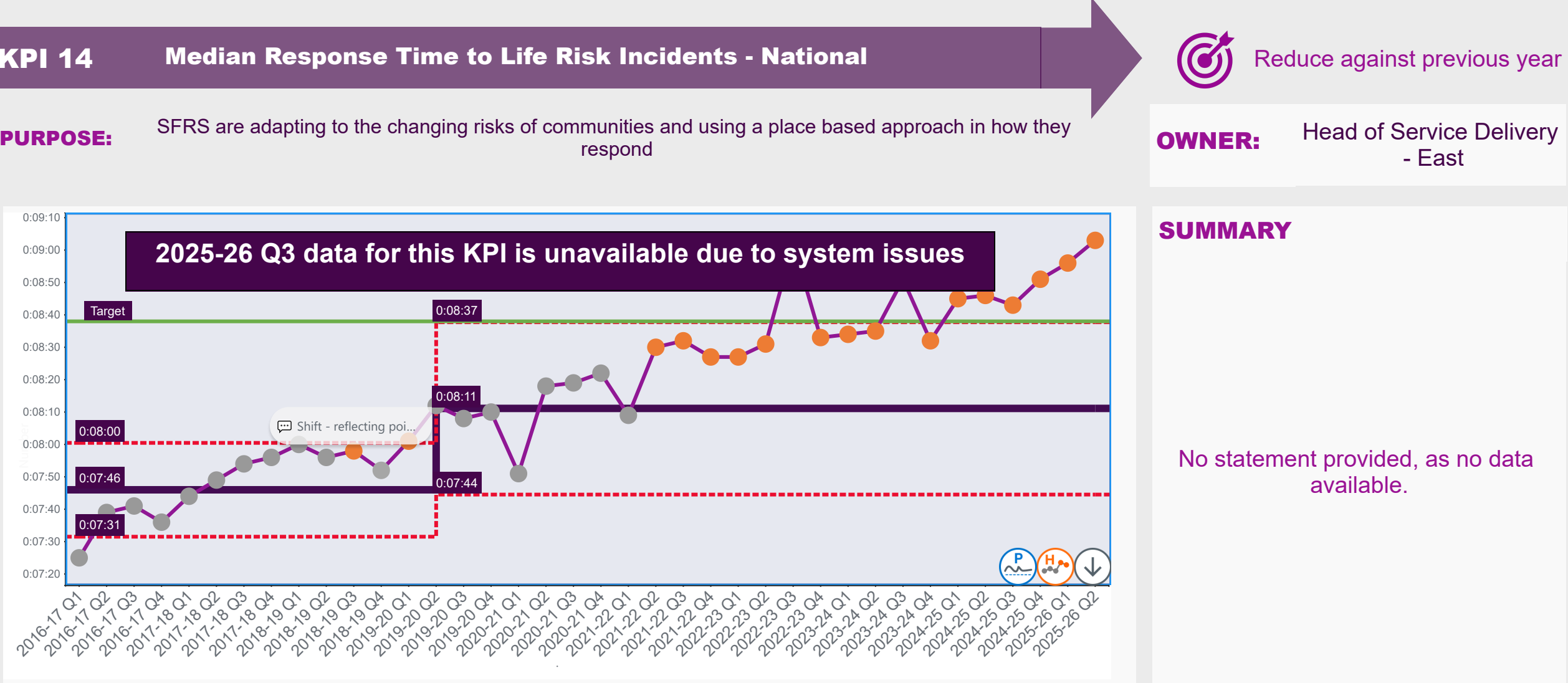
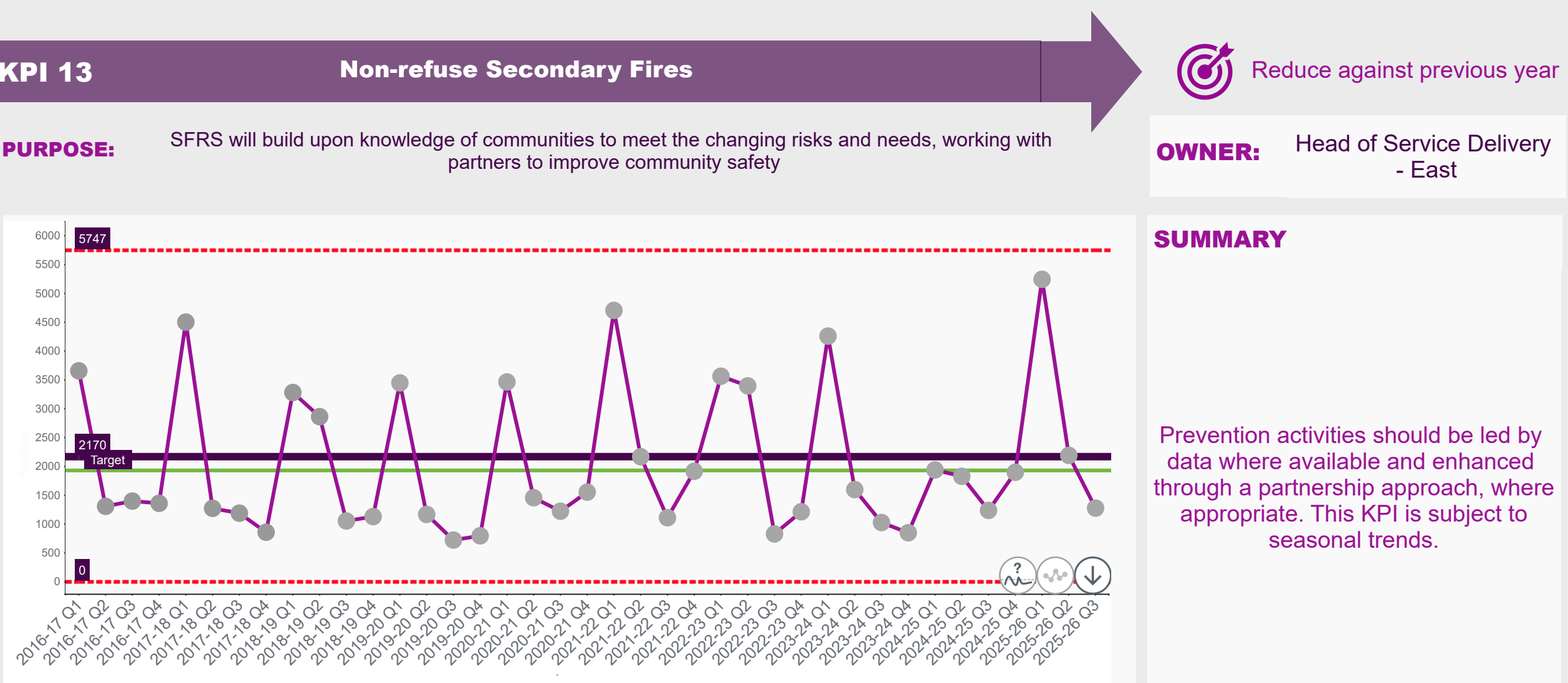
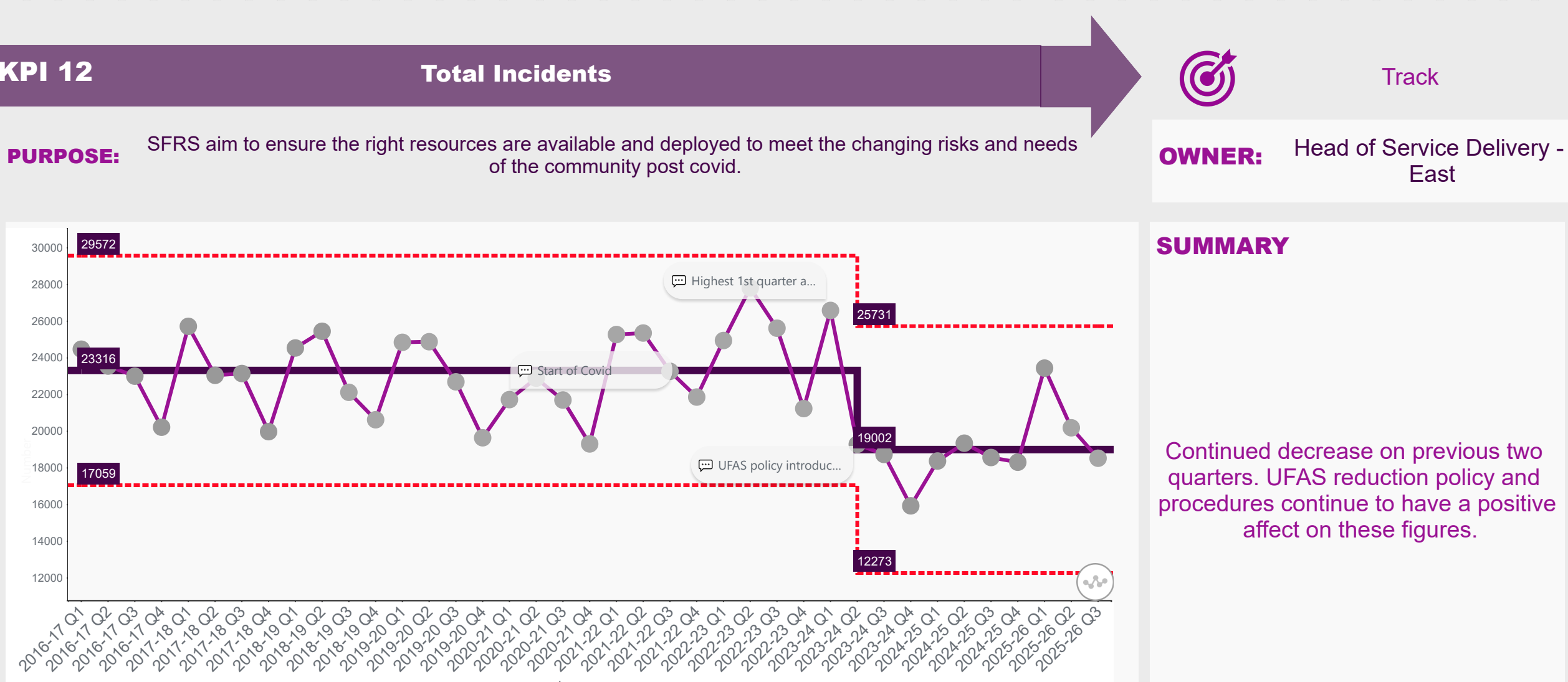
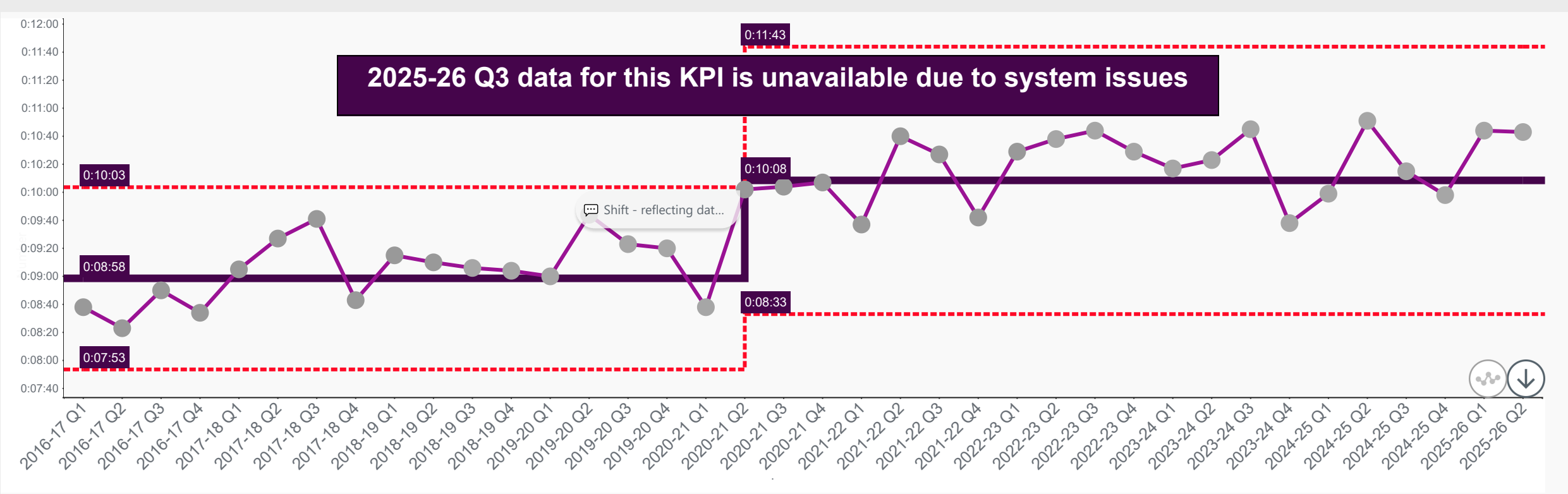
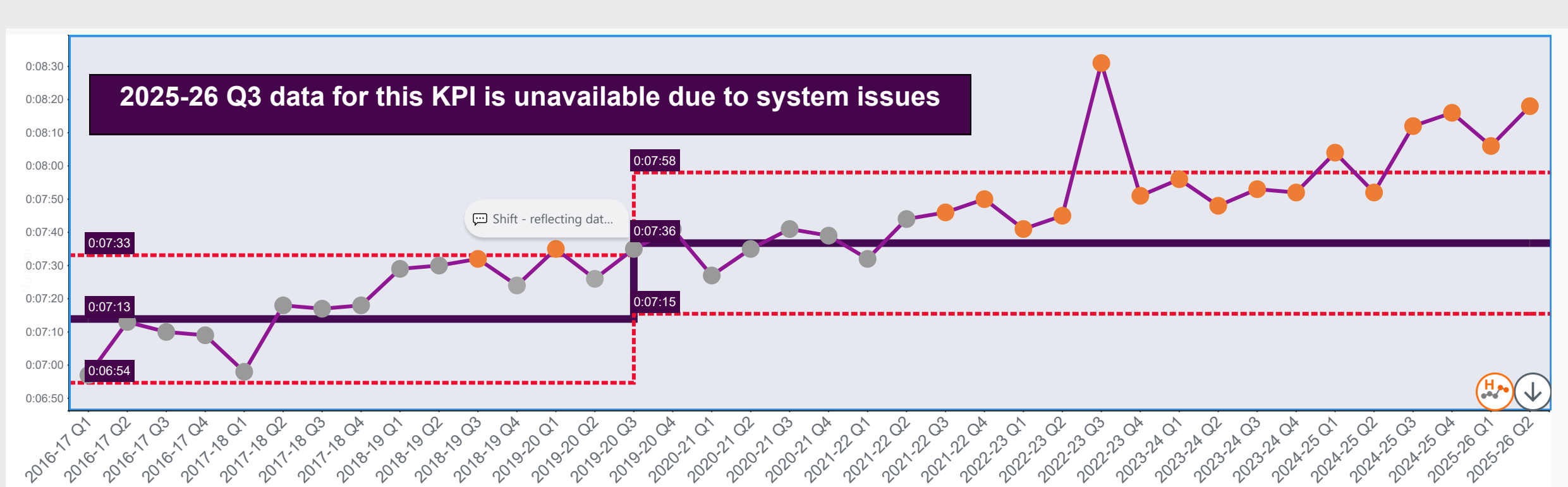
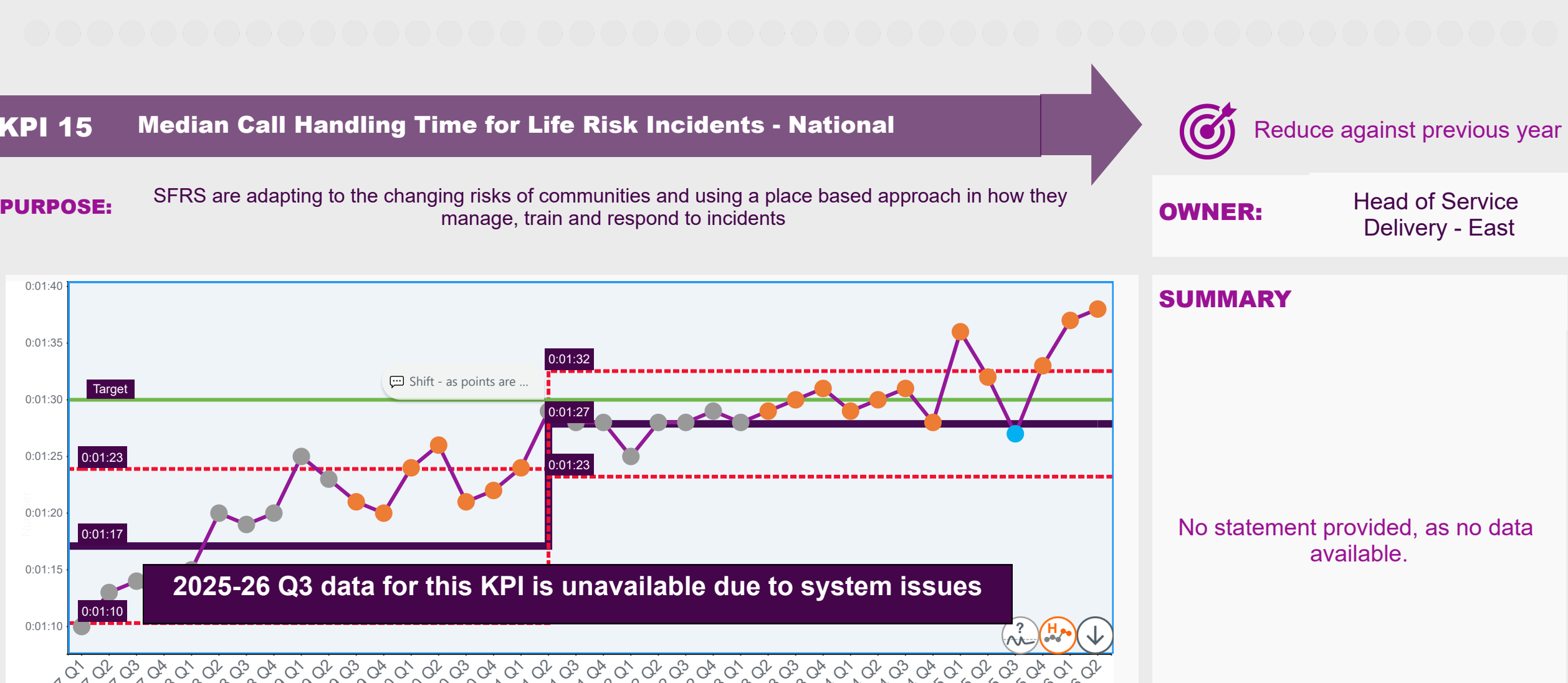
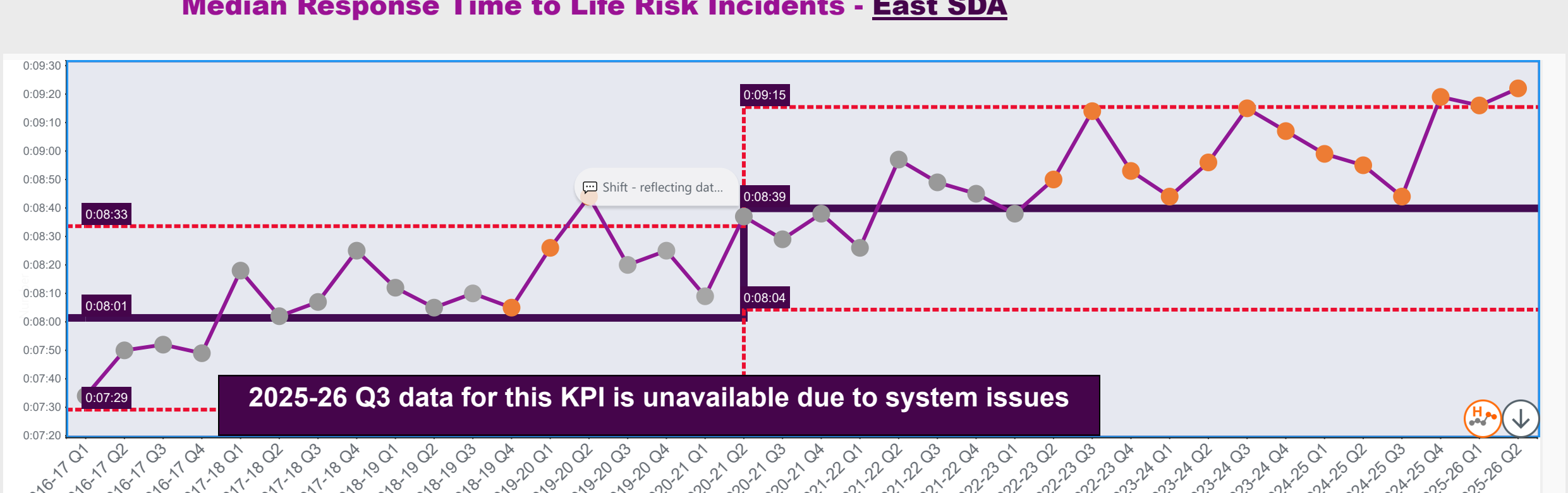
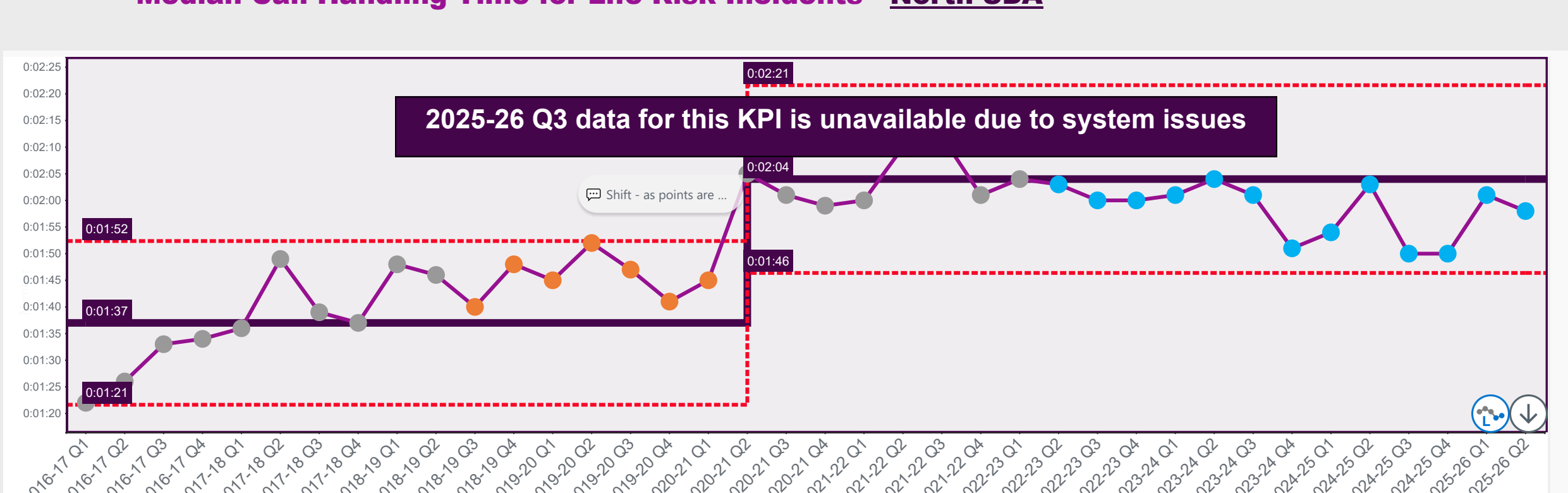
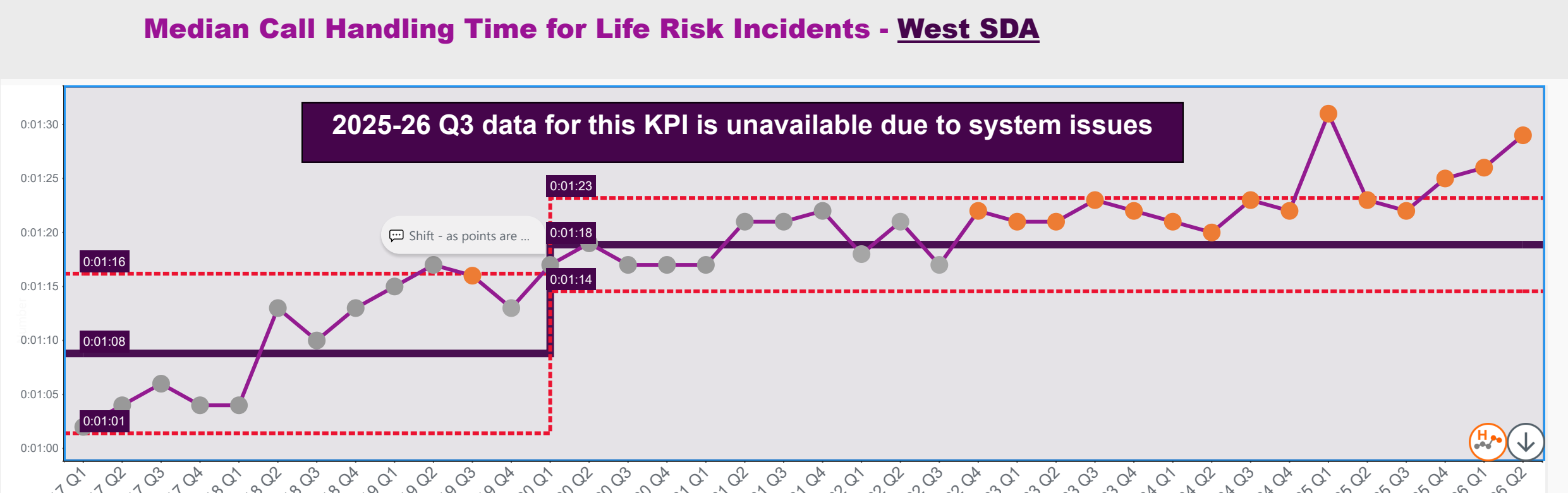
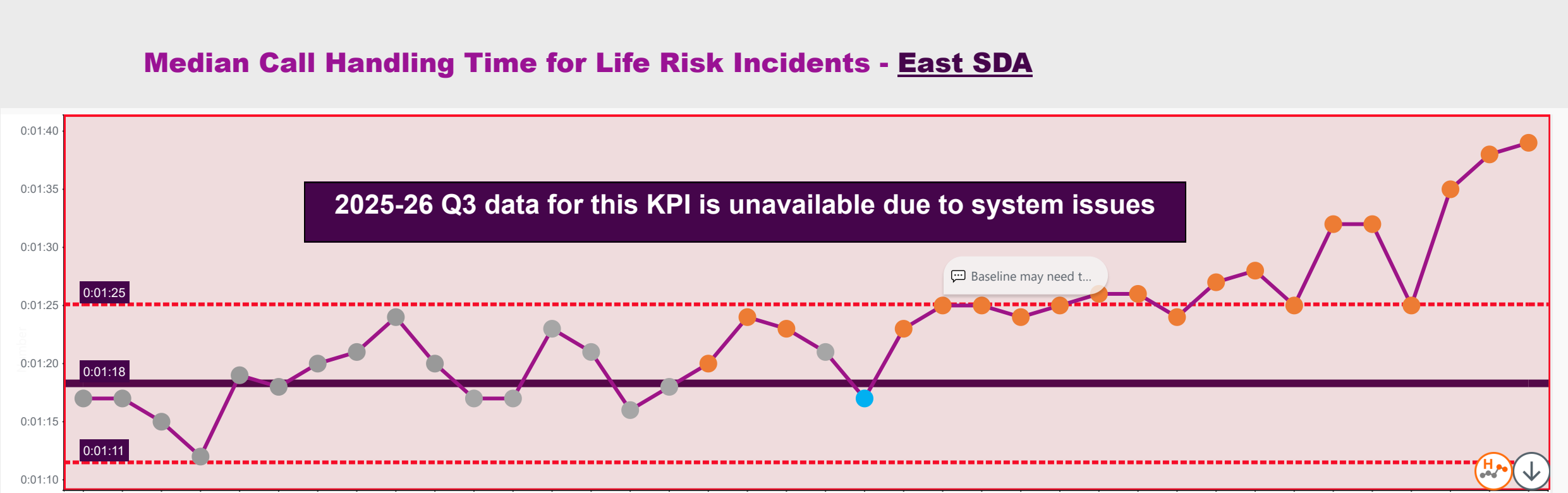
Community safety and wellbeing improves as we deploy targeted initiatives to prevent emergencies and harm.

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



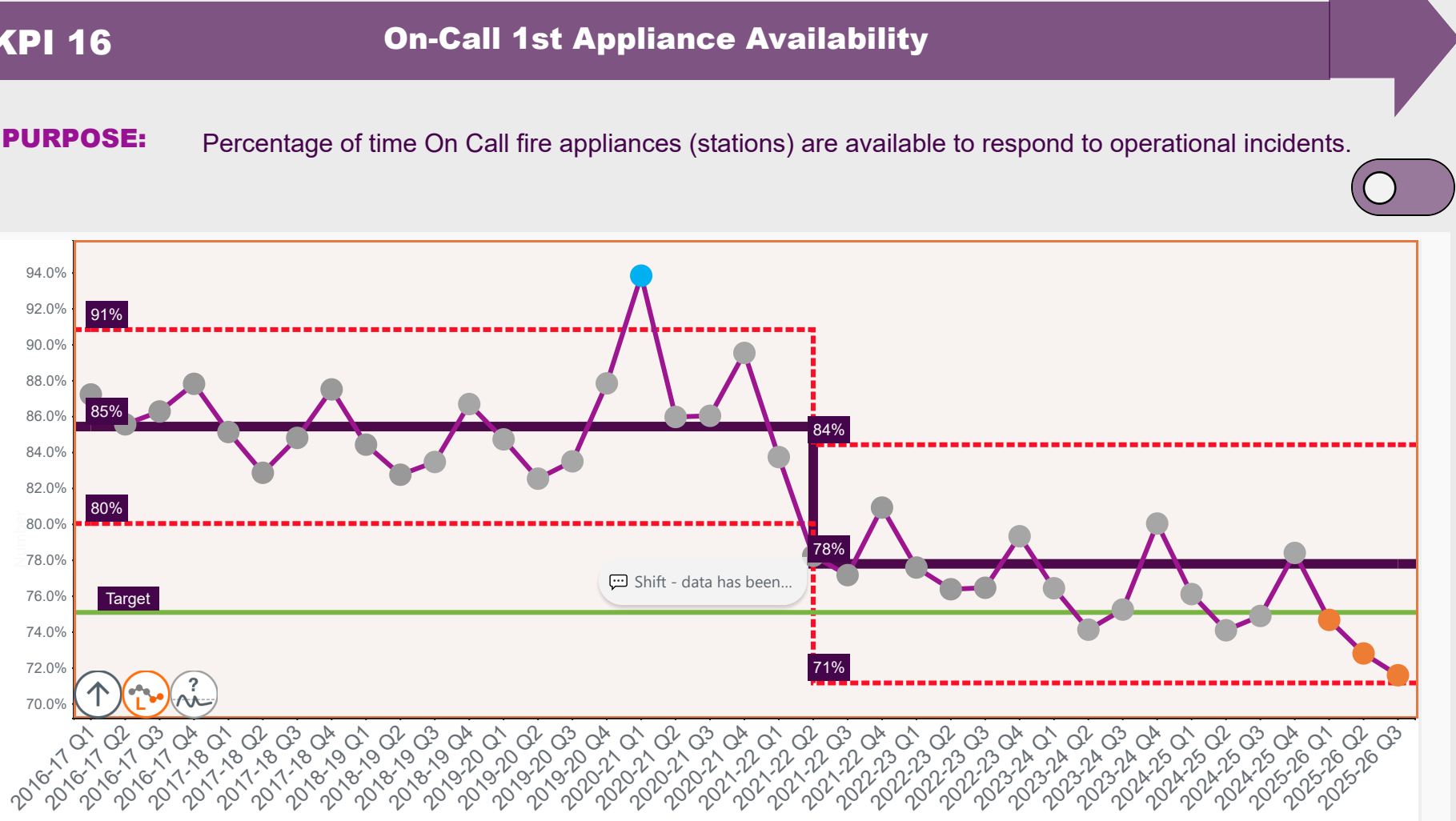
Response

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

**Median Response Time to Life Risk Incidents - North SDA****Median Response Time to Life Risk Incidents - West SDA****Median Response Time to Life Risk Incidents - East SDA****Median Call Handling Time for Life Risk Incidents - North SDA****Median Call Handling Time for Life Risk Incidents - West SDA****Median Call Handling Time for Life Risk Incidents - East SDA**

Response

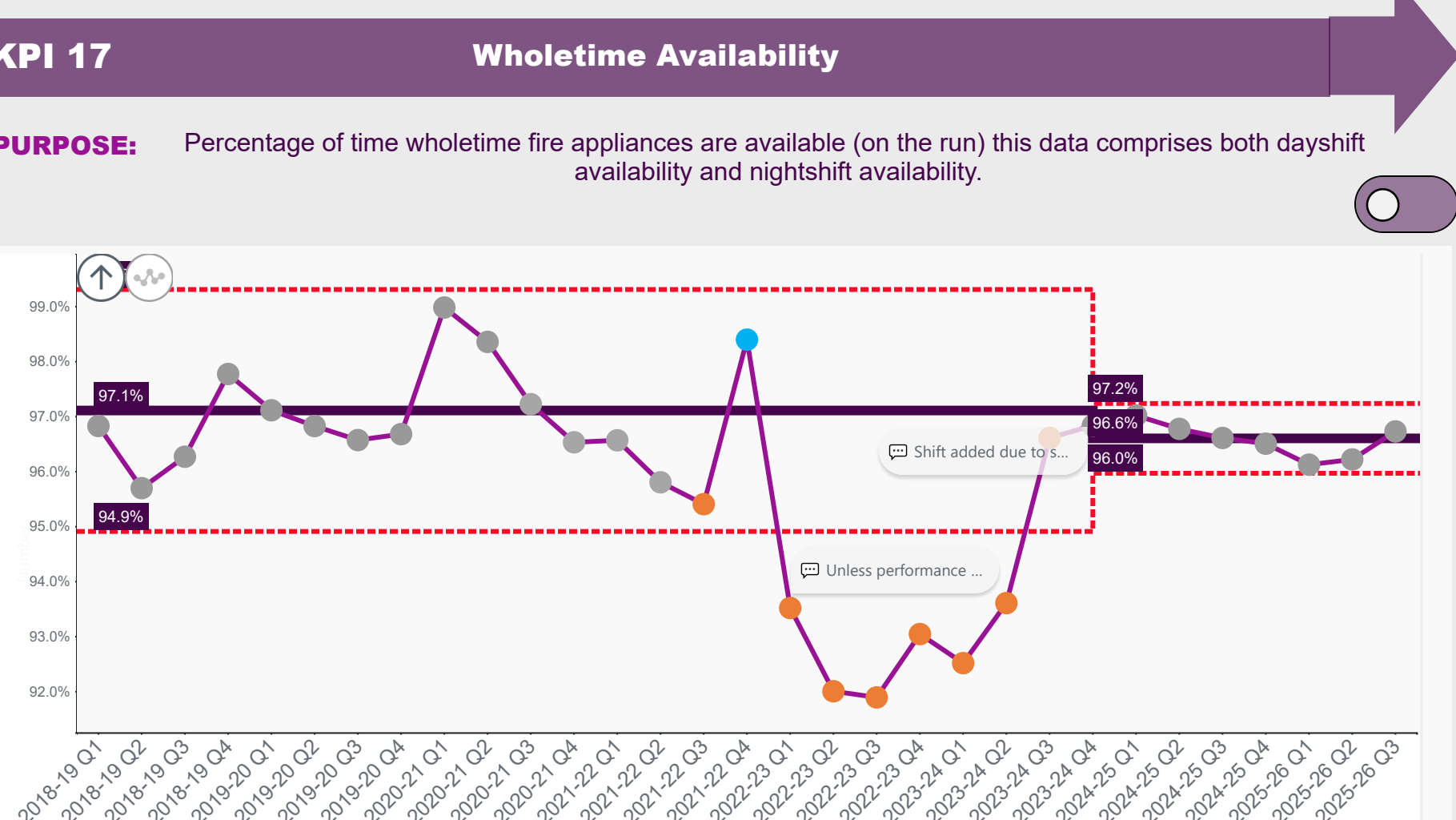
Communities are safer and more resilient as we respond effectively to changing risks.



OWNER: Head of Operations

SUMMARY

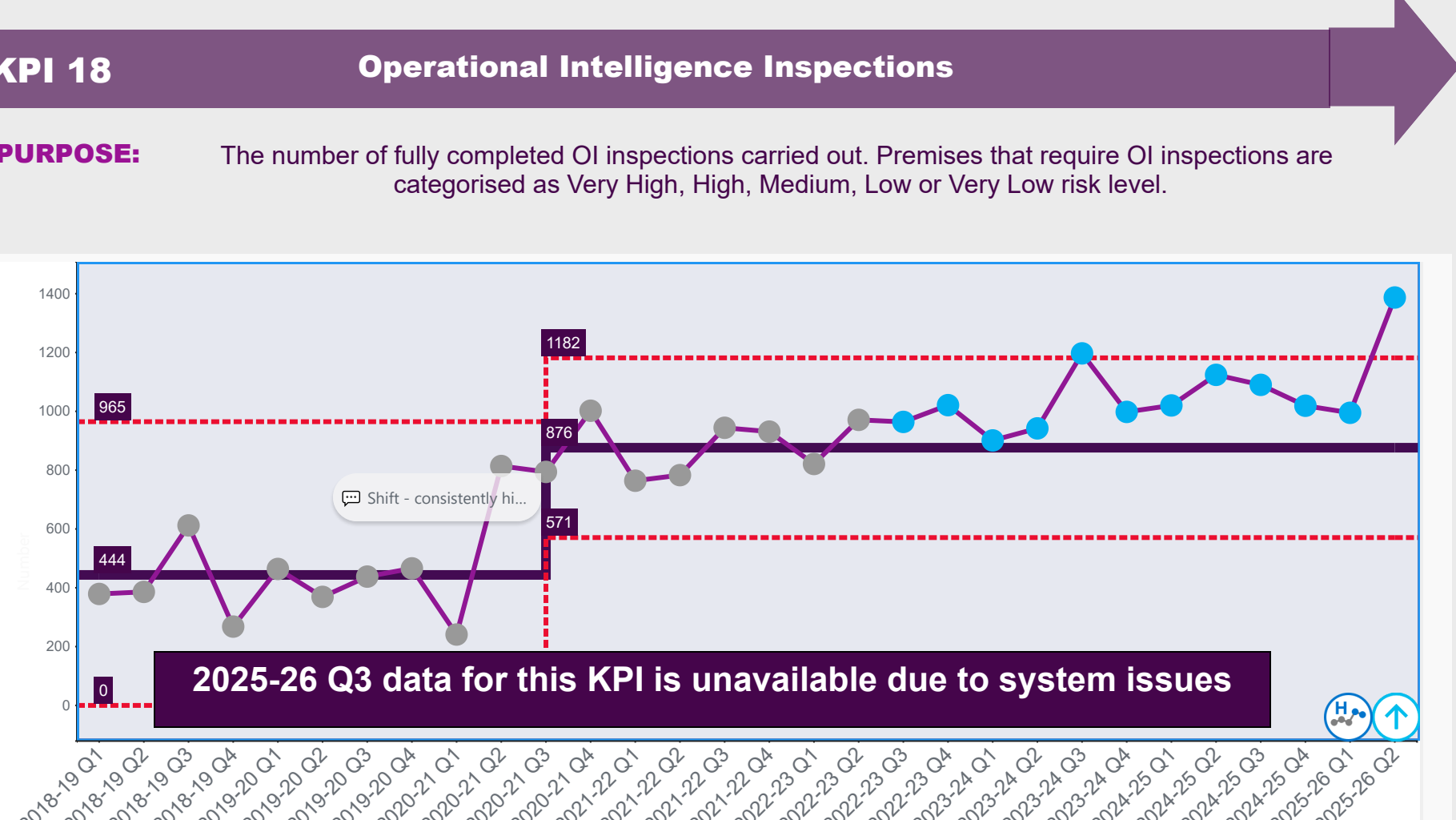
A new On Call Structure has been put in place to better support LSO areas and drive performance. The On Call Strategic Co-ordination Group, has formed 2 Tactical Groups, one for East and North mainland and the Other for West and islands, led by On Call leads at Area Commander level. A reporting and performance structure has been created to support LSO areas, to drive performance and improvements with On Call.



OWNER: Head of Operations

SUMMARY

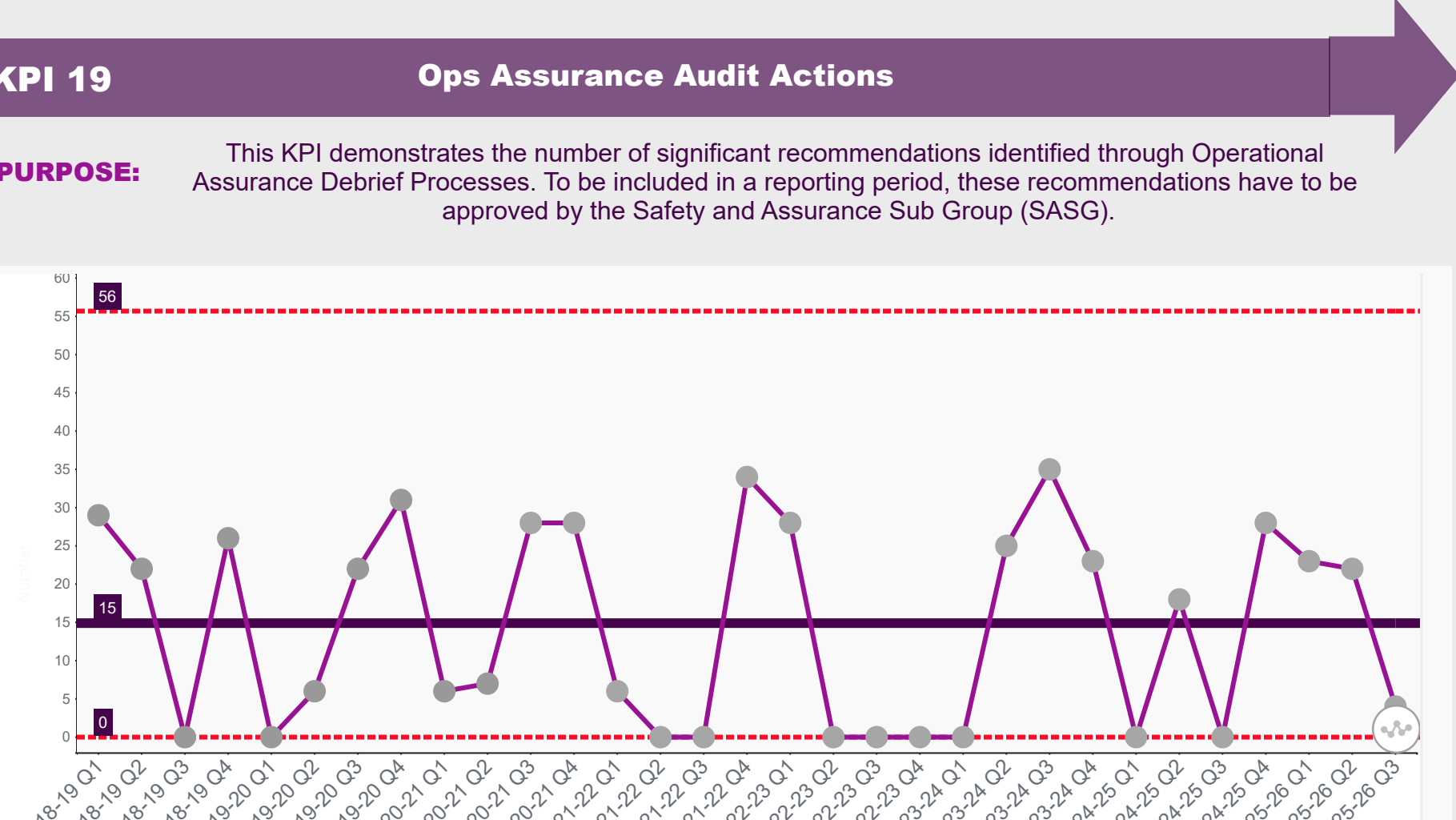
Wholtime Appliance Availability is managed by the Operations Central Staffing Function supported by the Overtime Availability Group (OAG) and remains above the confidence level of 96% for the period, shortfalls in availability are mainly due to staffing and decontamination impacts.



OWNER: Head of Prevention, Protection and Preparedness

SUMMARY

No Performance Statement Available

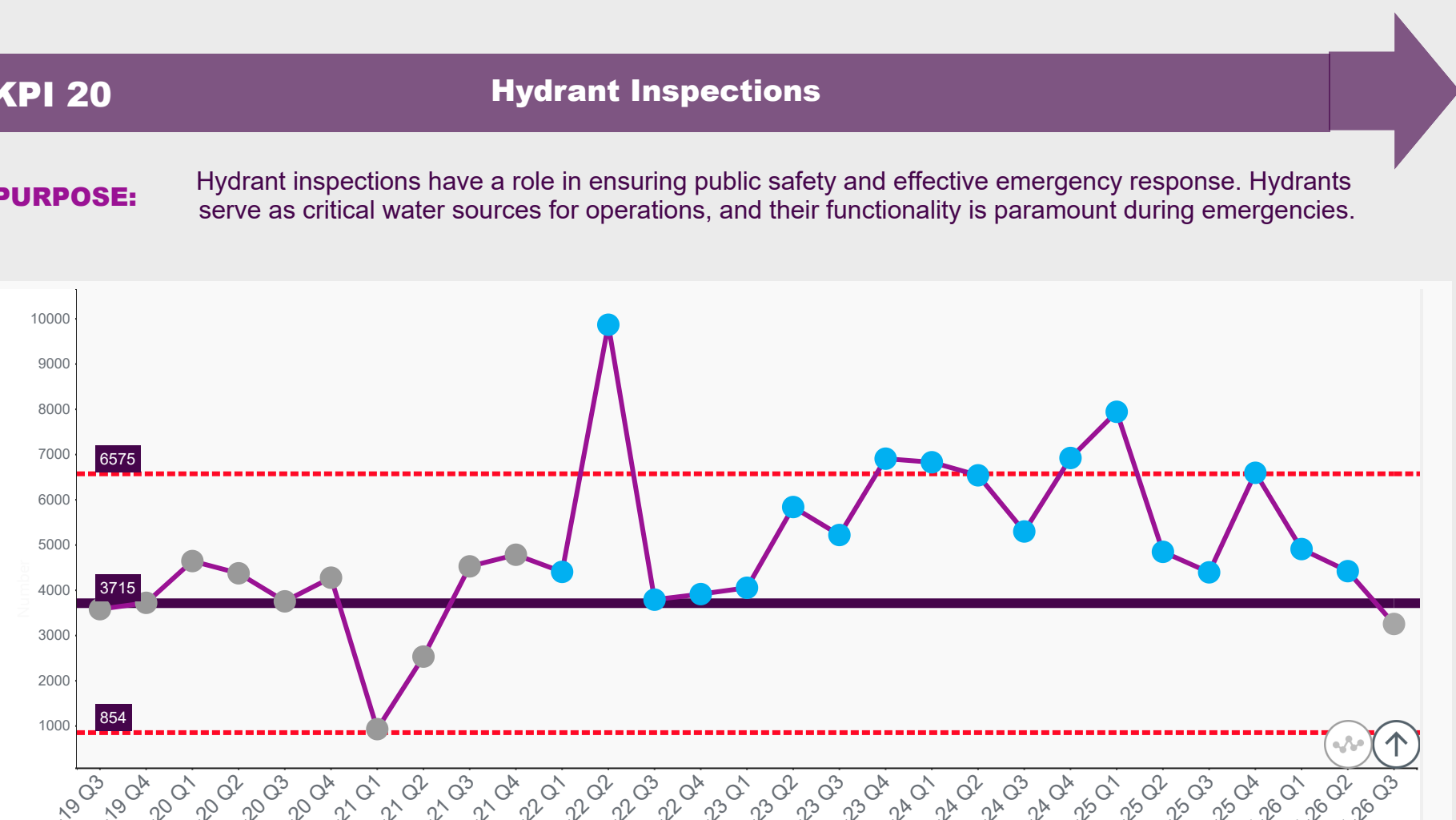


OWNER: Head of Safety and Assurance

SUMMARY

4 actions have progressed to OLG in Q3 following the approval of the Fortingal debrief and subsequent action plan.

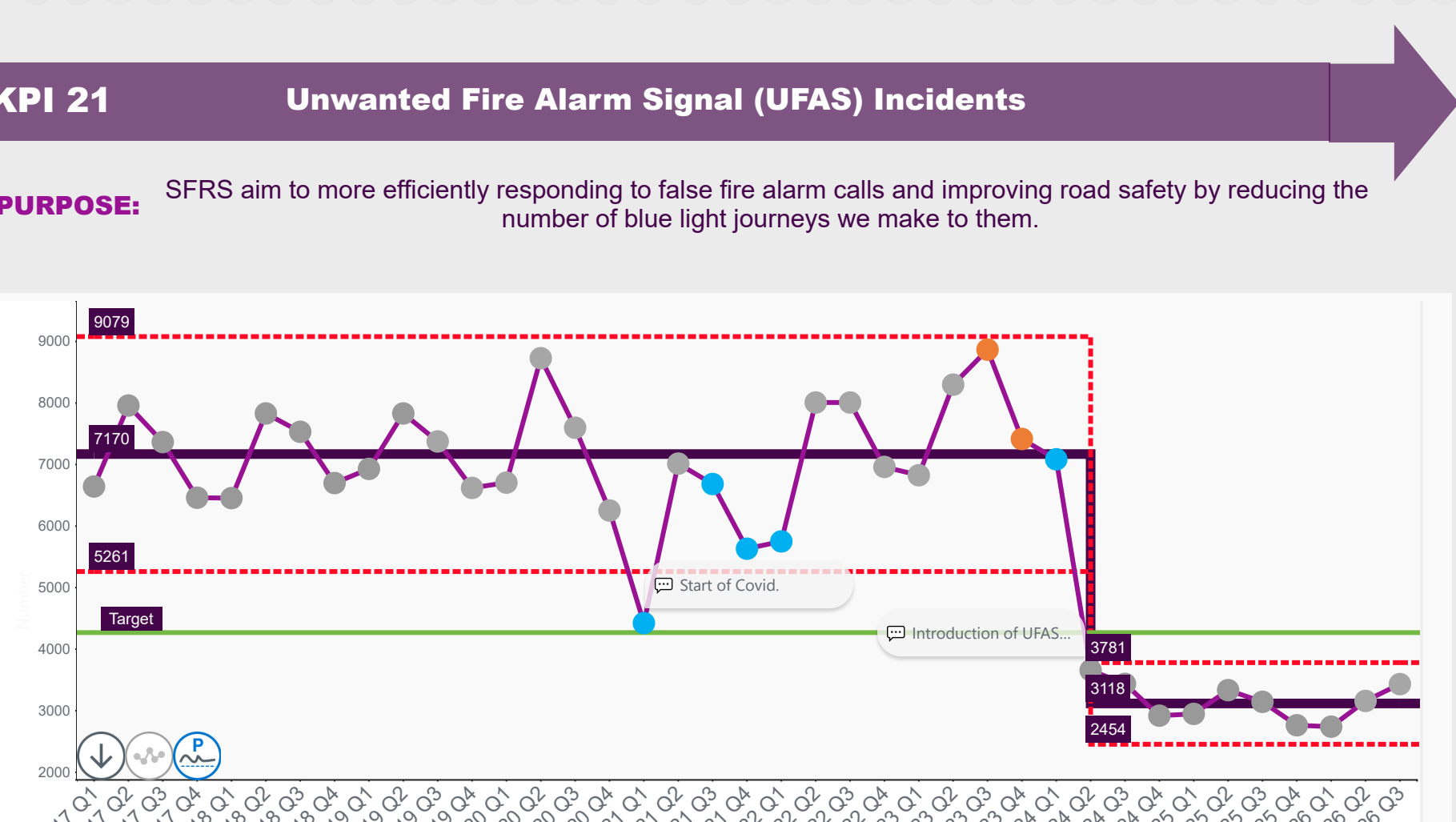
Actions from debriefs continue to be progressed by the risk owner and managed through the OLG.



OWNER: Head of Prevention, Protection and Preparedness

SUMMARY

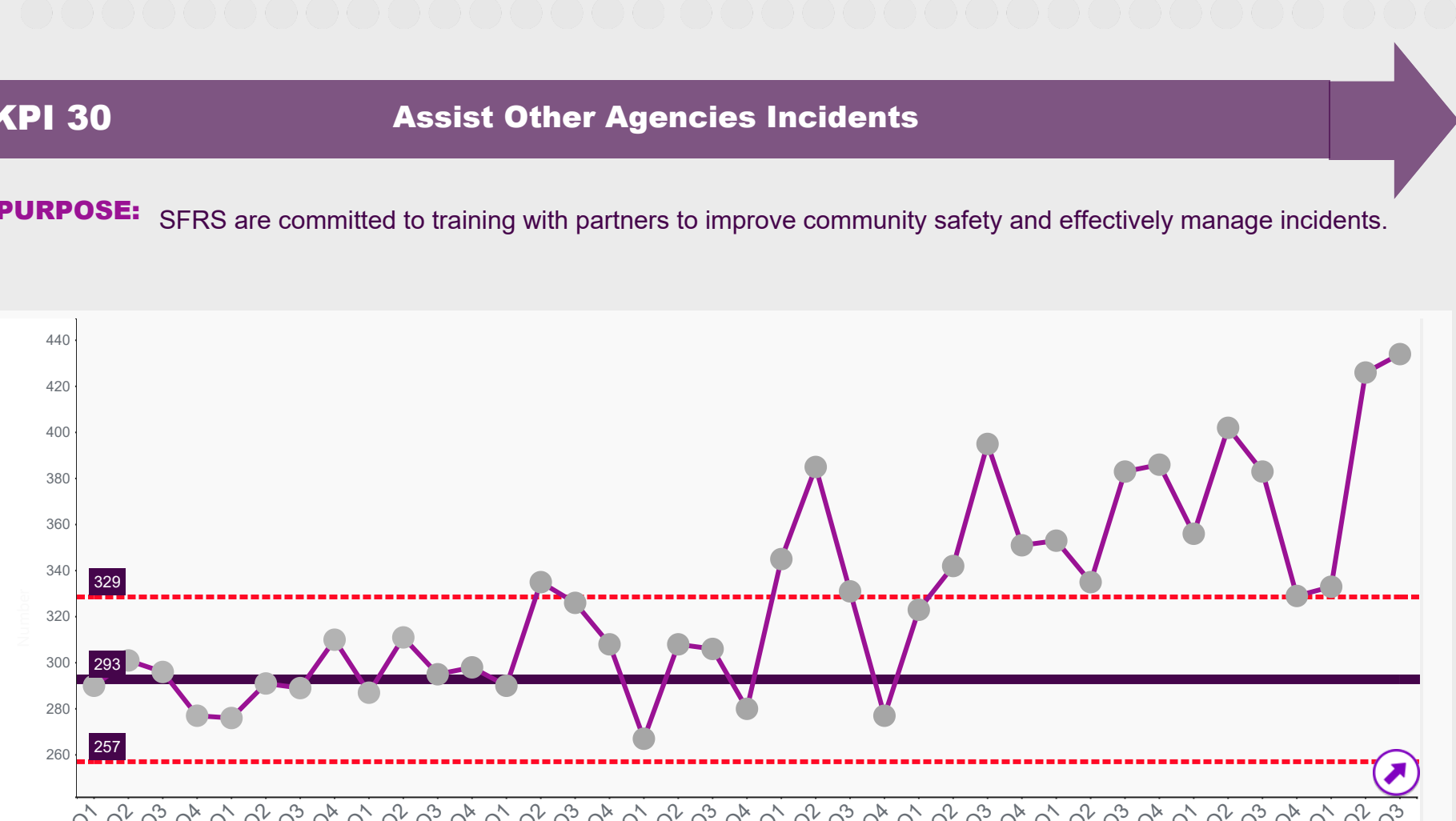
Impact on inspection completions is Vans OTR (Ad Blu sensors) and Weather warnings, A/L and festive break.



OWNER: Head of Service Delivery - East

SUMMARY

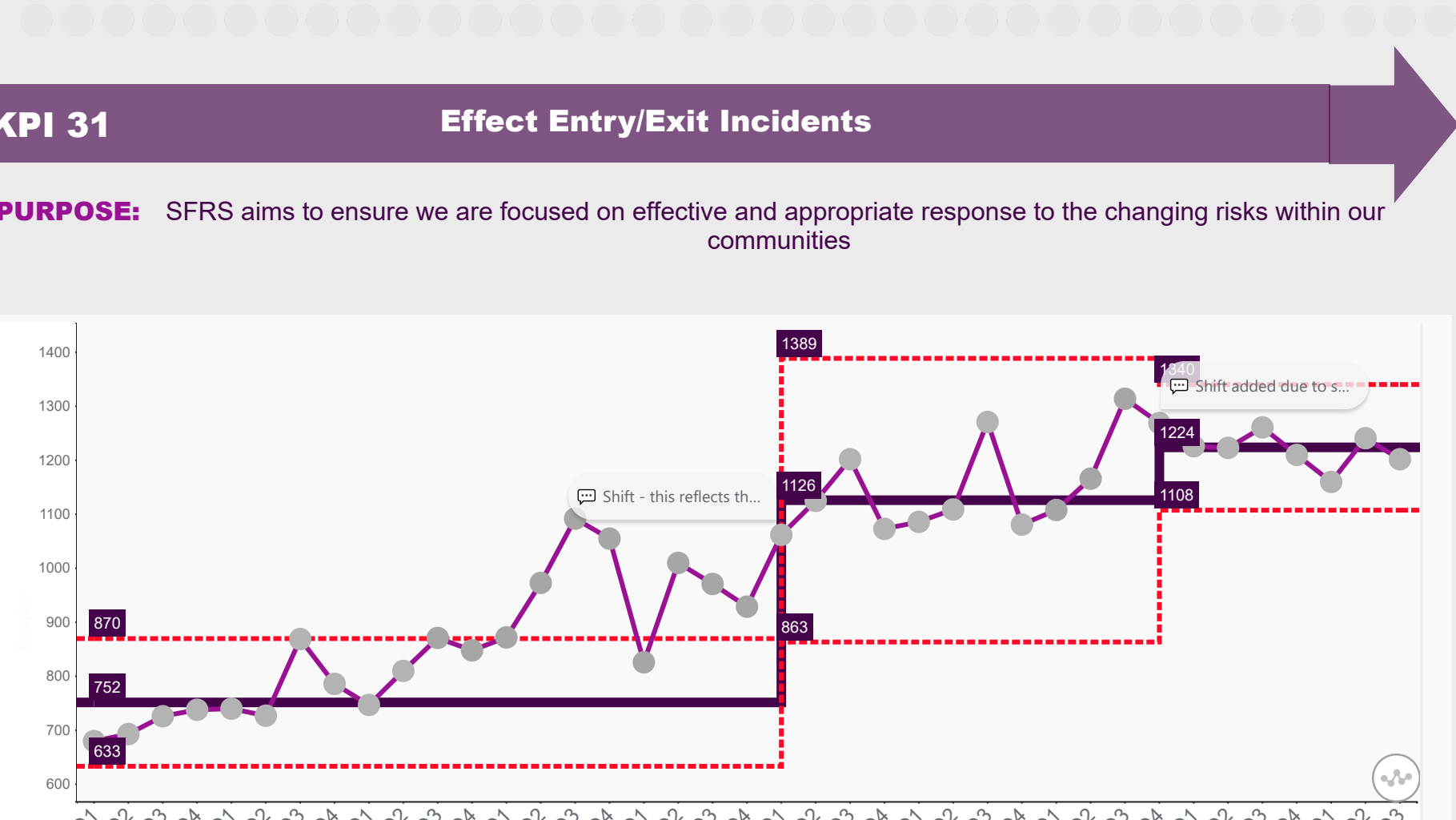
Increase in UFAS from previous quarter, further analysis required to identify why this is the case we will continue to engage with duty holders to highlight their responsibilities and continue to apply robust call challenging procedures within ops control.



OWNER: Head of Service Delivery - East

SUMMARY

Slight increase on previous quarter. Expect demand for this type of incident to continue, which reflects changes in community risk. We have experienced an increase in requests from partner agencies to access fire & rescue capabilities from previous quarter.



OWNER: Head of Service Delivery - East

SUMMARY

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



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Interpreting statistics and trends:

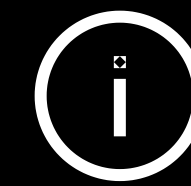
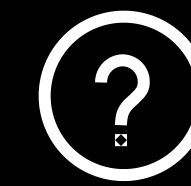
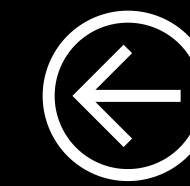
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SCOTTISH FIRE AND RESCUE SERVICE

Service Delivery Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/SDC/05-26

Agenda Item: 10

Report to:	SERVICE DELIVERY COMMITTEE						
Meeting Date:	24 FEBRUARY 2026						
Report Title:	COLLABORATION FOR HEALTH EQUITY PILOTS						
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	To provide Committee members with an update on the ongoing Collaboration for Health Equity Partnership (CHES) pilots.						
2	Background						
2.1	<p>Public Health Scotland (PHS) has joined with the University College London's Institute of Health Equity (IHE) for a two-year Collaboration for Health Equity in Scotland (CHES). Working with Professor Sir Michael Marmot, the Director of the Institute, this collaboration will strengthen and accelerate the action underway to:</p> <ul style="list-style-type: none"> improve Scotland's health increase wellbeing reduce health inequities 						
2.2	<p>The partnership between PHS and IHE is to support public service reform and will cover two key areas:</p> <ul style="list-style-type: none"> work at a national level, providing new insights into the most effective ways to progress with health equity in Scotland through Marmot's eight principles work in partnership with Local Authority and NHS boards across Aberdeen City, North Ayrshire and South Lanarkshire to develop and implement strategies to enhance health equity. 						
2.3	<p>These two strands of work aim to enable CHES to answer:</p> <ul style="list-style-type: none"> what are the most impactful areas for intervention to make meaningful progress in closing inequities in healthy life expectancy in Scotland? how can national and local organisations work more effectively to close the gap between policy intent and impact in these areas? 						
2.4	<p>As a key public sector body, embedded in Community Planning arrangements, SFRS is a respected and valued partner involved in the three CHES areas. This paper provides a summary of overall progress made to date in the areas, along with SFRS involvement.</p>						
3	Main Report/Detail						
3.1	National Picture						
3.1.1	<p>Across the three areas activity has been focussed around understanding the key areas and issues and how the CHES work integrates with existing partnership work and priorities.</p>						

3.1.2	<p>CHES work recommends the main social determinants of health in places are developed in the following areas (known colloquially as the 'Marmot Eight' principles):</p> <ol style="list-style-type: none"> 1. Give every child the best start in life. 2. Enable all children, young people and adults to maximise their capabilities and have control over their lives. 3. Create fair employment and good work for all. 4. Ensure a healthy standard of living for all. 5. Create and develop healthy and sustainable places and communities. 6. Strengthen the role and impact of ill health prevention. 7. Tackle racism, discrimination and their outcomes. 8. Pursue environmental sustainability and health equity together.
3.1.3	<p>One objective of CHES is exploring approaches to the design of systems and use of resources in ways which are proportionate to the needs of different parts of the community. This is the allocation of resource according to need, with need being defined as the ability to benefit. Services should be available for all to access (not just disadvantaged groups), but they are flexible and able to respond with more intensity where there is a greater need. In practice, many public programmes are designed to support those most in need. Local work with CHES is identifying examples where decision making could, potentially, be more explicitly influenced by a health equity and “Proportionate Universalism” approach. Engagement sessions, webinars and inputs have been delivered, with SFRS attendance, to help identify the priority areas of work and identify how it will operate. These can be accessed at the following Past webinars - The CHES Learning System</p>
3.2	<p>CHES Areas: Activity by area is summarised below, acknowledging not all three areas have progressed to the same extent.</p>
3.3	<p>North Ayrshire</p>
3.3.1	<p>Local Senior Officer (LSO) attended two-day Leadership Event facilitated by the Hunter Foundation, Columba 1400 and the Drummond Partnership. In attendance were strategic leaders from North Ayrshire Council and PHS. The event was extremely valuable with direction of travel agreed, enhanced by focussed workshops and relationship building. The event facilitated inspiring and energising inputs, full of hope for the impact that can be made by collaborating/shared vision, reduce silos, sharing information/assets/resources, collective leadership, working on the right things, reducing bureaucracy etc. Common challenges were also evident across all partners, mainly related to resource and capacity.</p>
3.3.2	<p>Partners have agreed to an enhanced focus on priorities 1, 3 & 6. The three separate workstreams are being organised to map assets, resources and existing local community provisions with an awareness to engage the third sector who are already embedded in communities. Each of the three workstreams have also been narrowed down to specific areas: Priority 1 (Fullarton, Bourtreehill and Castlepark), Priority 3 (Ardrossan Central, Saltcoats Central, Stevenson Hayocks), Priority 6 (Kilbirnie South and Longbar).</p>
3.3.3	<p>Monthly meetings, with all relevant partners, have been scheduled with attendance by LSO and Station Commander, Community Safety Engagement. SFRS are active members of the group but currently have no specific actions/tasks.</p>
3.3.4	<p>Currently, discussions are very niche high-level Health & Social Care related matters, and it isn't clear how SFRS can contribute to the workstreams or provide expertise to the meetings e.g. Priority 1 – partners are focussing on very early years family support involving midwives, health visitors etc. Priority 3 focusses on adults who have been long term economically inactive due to health issues so involving GP's, link workers etc. As work develops there will be more opportunity for input and SFRS support.</p>

3.3.5	<p>One proposal is the creation of a “hub” which SFRS would be able to support with embedding personnel, helping to scope out opportunities for SFRS involvement. SFRS contribution, within current capacity levels may be just to tailor and deliver what has been provided historically. Examples of work ongoing within the area which will assist with achieving outcomes are:</p> <ul style="list-style-type: none"> - Provision of Fireskills and Fire Safety Support and Education (FSSE) courses to young persons identified by partners, where we can support progress and development through teenage years. These courses are proven to change and upskill behaviours, promote respect and team building and build confidence in young persons; - Use of stations as true community facilities, providing space for community meetings, group sessions, drop in's etc. - Attendance at jobs fairs and organisation of local recruitment events to engage with those seeking employment; - Rollout of further mentoring opportunities over longer term periods than a Fireskills course, providing young persons with a role model and someone out with their normal routine to gain a good example and support from; - Improved referral pathways with partners following HFSV's.
3.3.6	<p>As the project matures, it is hoped new opportunities can be identified for SFRS to support in addition to this recognised effective community safety work.</p>
3.4	<p>City of Aberdeen</p>
3.4.1	<p>LSO and Management team members have attended Community Planning Board meetings to explore the delivery of PLACE based initiatives, how this aligns to CHES and how the partnership ensures the right groups / individuals are reached, how to track progress, and how to identify and categorise success.</p> <p>CHES work at a partnership level to date includes: -</p> <ul style="list-style-type: none"> • Reviewing and contributing to: <ul style="list-style-type: none"> ○ The Population Needs assessment for the Aberdeen ○ The Local Housing Strategy ○ The Health Equity Plan for Grampian ○ The Strategic Plan for Aberdeen City Health & Social Care Partnership • Working with the Health Determinants Research Collaboration Aberdeen (HDRCA) to identify an evidence base of interventions for the ongoing refresh of the Local Outcome Improvement Plan and co-hosting a workshop for Community Planning Aberdeen to prioritize those interventions. • Working with council officers and the HDRCA to develop a process for estimating the likely impact of interventions and support the implementation of this.
3.4.2	<p>The partnership has agreed to focus on priorities 1 and 3 <i>Give every child the best start in life and create fair employment and good work for all.</i></p>
3.4.3	<p>Engagement has taken place across the management team and Aberdeen City stations to outline that Aberdeen City has formally aligned itself with the Marmot Principles and ensure a clear understanding of what this means in practice. Through discussions it was emphasised this approach does not introduce new or additional activity but rather builds upon the engagement and prevention work we already deliver, aligning with the broader aims of reducing inequalities and improving community wellbeing.</p>
3.4.4	<p>The following activities have been identified that can contribute to the identified priorities:</p> <ul style="list-style-type: none"> • Breakfast club – This is run at North Anderson Drive station with a large uptake from families for the surrounding area. This is being further scheduled for 2026/27. This work helps reduce health and wellbeing inequalities by ensuring people have access to a nutritious meal, providing warm, safe spaces (particularly important during winter months) and offering informal wellbeing support and social interaction. • Vaccination Clinics – Discussions with NHS Grampian and the Aberdeen Health & Social Care Partnership for the potential for a vaccination clinic initiative. Utilising

	<p>community Fire stations as vaccination hubs delivering covid and flu boosters and immunisations for babies and children under 5 years old. This model is effective in increasing local access to essential health services while reinforcing the role of the SFRS as a trusted and community-embedded partner. Importantly, these partnerships also create valuable opportunities for SFRS staff to deliver key safety messages directly to members of the public in a supportive and familiar environment. By engaging with individuals and families attending these clinics, we are able to promote core prevention themes—such as home fire safety, reducing unintentional harm, and seasonal safety advice. Moreover, these interactions allow us to identify individuals who may benefit from enhanced assistance and signpost them to the most appropriate partner service, whether that be health, social care, housing, welfare support, or voluntary-sector organisations. This initiative is already working well across Aberdeenshire and is being expanded into Aberdeen City.</p> <ul style="list-style-type: none"> • Primary School CPR initiative - Currently developing an initiative with the Education Officer of Aberdeen City Council aimed at delivering CPR training in Primary Schools from Q1 2026/27. Teaching CPR in primary schools provides early exposure to lifesaving skills, confidence-building, and health-related knowledge. It embeds capability and resilience at a formative age, particularly benefitting children in communities where health outcomes are poorer. This supports the work currently done in Secondary schools to deliver <i>Emergency First Aid at Work</i> qualifications to all pupils. • Amended delivery material for education-prevention presentations – New material on Healthy Eating, Active Lifestyles, and Employment Opportunities have been added across to existing SFRS education and prevention presentations—spanning Nursery, Primary, and Secondary audiences, ASB inputs, and Young Driver/Fatal 5 sessions. Applying these themes consistently city-wide will cultivate healthy habits from early years through adolescence and improve employability information.
3.5	South Lanarkshire
3.5.1	The LSO management team attended the launch of the South Lanarkshire (SL) Marmot places at Almada Street, Hamilton on the 25 February 2025. Following the launch there have been meetings chaired by SL Local Authority (LA) to scope out the first phase.
3.5.2	The partnership has agreed to focus on priority 1, <i>Give every child the best start in life</i> .
3.5.3	The agreed approach is to split the priority into manageable phases with Phase 1 being a focus on gathering and analysing data, information, and information sharing protocols. Phase 1 is nearing completion with the expected outcome to be a specific public facing dashboard made available via the Community Planning Partnership (CPP) website.
3.5.4	The inclusion of Early Years Marmot principle will be embedded within the SL Local Senior Officer (LSO) Plan and the deliverables captured within the Local Prevention Delivery Plan. This will assist in educating and supporting colleagues to build on the prevention work currently undertaken across the LA with an emphasis on targeting areas where inequalities exist by utilising the newly created dashboard, SIMD modelling and SFRS data.
3.2.4	<p>Examples of current workstreams that contribute to giving every child the best start in life include:</p> <ul style="list-style-type: none"> • Fire Safety Support and Education (FSSE) Six young people from South Lanarkshire have been involved in the SFRS Fire Safety Support and Education (FSSE) programme. FSSE is aimed at those who demonstrate an unsafe or concerning interest in fire or have been involved in fire-related antisocial behaviour. In many cases, a risk to wellbeing, as set out in the Getting it Right for Every Child (GIRFEC) approach, can be a strong indication that the young person could be at risk of harm if the immediate matter is not addressed. These are the basic requirements for all young people to grow and develop and

3.2.5	<p>reach their full potential. The eight wellbeing indicators are used to record observations, events and concerns and will aid to improve the support they receive. The FSSE approach supports young people to realise their full potential at home, school and within their community. These indicators are sometimes referred to as SHANARRI Indicators; and,</p> <ul style="list-style-type: none"> • Child Protection Training Child Protection training is being provided to Operational Crews across SL by the Local Adult and Child Protection Officers. The aim of this training is to improve knowledge and increase confidence surrounding Child Protection and the Referral Process whilst reducing the stigmas attached to making referrals. Note, this training is ongoing. <p>LSOs from the three Areas provide regular updates and shared learning with the Head of Prevention to ensure the wider Service is aware of progress and identify any additional support required. As the project matures, it is hoped lessons learned can be utilised in other parts of the country.</p>
4	Recommendation
4.1	It is recommended SDC members acknowledge the information in the paper. Further updates will be provided as the CHES work matures across the three areas.
5	Key Strategic Implications
5.1 5.1.1	Risk Appetite and Alignment to Risk Registers Not applicable
5.2 5.2.1	Financial No additional funding is required.
5.3 5.3.1	Environmental & Sustainability Not applicable
5.4 5.4.1	Workforce Not applicable
5.5 5.5.1	Health & Safety Not applicable
5.6 5.6.1	Health & Wellbeing Not applicable
5.7 5.7.1	Training Not applicable
5.8 5.8.1	Timing The project is a two-year initiative supported by PHS and local authorities in Aberdeen City, North Ayrshire, and South Lanarkshire. The first report, providing an overview of health inequalities in Scotland and the collaborating sites, was published in July 2025.
5.9 5.9.1	Performance Associated activities and outcomes will be captured via local CHES partnerships. SFRS activities are captured via the CSE Activities App and wider learning will be share via the three lead LSOs.

5.10 5.10.1	Communications & Engagement As the project develops, key learnings will be captured and shared, with PHS as the lead agency.	
5.11 5.11.1	Legal Not applicable	
5.12 5.12.1	Information Governance DPIA completed Yes/No. If not applicable state reasons.	
5.13 5.13.1	Equalities EHRIA completed Yes/No. If not applicable state reasons.	
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:	Jon Henderson, Assistant Chief Officer Director of Prevention
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.3	Rationale:	Healthy equity is at the forefront of the future and feeds directly into all matters, Prevention.
8	Appendices/Further Reading	
8.1	Further Reading: - Background - Collaboration for Health Equity in Scotland - Environmental health impacts - Population health - Public Health Scotland	
Prepared by:		Cathy Barlow Deputy Head of Prevention and Kevin Murphy, Area Commander Local Senior Officer
Sponsored by:		Andy Watt Deputy Chief Officer
Presented by:		Jon Henderson Assistant Chief Officer and Kevin Murphy Area Commander Local Senior Officer
Links to Strategy and Corporate Values		
Strategic Objective – Safer Communities through Prevention.		
Governance Route for Report		Meeting Date
<i>Service Delivery Committee</i>		<i>24 February 2026</i>
		Report Classification/ Comments
		<i>For Information.</i>

SCOTTISH FIRE AND RESCUE SERVICE

Service Delivery Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/SDC/07-26

Agenda Item: 11

Report to:	SERVICE DELIVERY COMMITTEE						
Meeting Date:	24 FEBRUARY 2025						
Report Title:	ORGANISATIONAL LEARNING – WILDFIRES 2025 SEASON						
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 Service Delivery Committee (SDC) with an overview of organisational learning from the 2025 wildfire season.						
1.2	It summarises key impacts and highlights the priority learning themes identified through both the Scottish Fire and Rescue Service (SFRS) Structured Debrief and the Scottish Multi Agency Resilience Training and Exercise Unit (SMARTEU) debrief report.						
2	Background						
2.1	The 2025 wildfire season resulted in several significant operational incidents across Scotland, prompting a comprehensive review of SFRS preparedness, response, and post-incident learning.						
2.2	In line with established Organisational Learning arrangements, the Service undertook a Structured Debrief and completed a comparison against a SMARTEU lead Wildfire debrief to ensure an assessment of emerging themes.						
2.3	This work reflects ongoing commitment to strengthening capability following the launch of the SFRS Wildfire Strategy and supports continuous improvement across operational practice, training, and partnership activity.						
2.4	The identified learning is being progressed through the Organisational Learning Group by responsible risk holders internally. Recommendations that sit out with the direct remit of SFRS are being progressed and coordinated through the Wildfire Forum, which includes multi-agency representation and is chaired by SFRS.						
3	Main Report/Detail						
3.1	The combined findings from the Operational Assurance and SMARTEU debriefs highlight several overarching themes that reflect organisational learning from the 2025 wildfire season, below is a high level summary:-						
3.2	Operational Resilience						
3.2.1	Both debriefs underline the need to strengthen SFRS operational resilience in response to increasing wildfire activity. This includes ensuring access to appropriate equipment, improving communications in remote areas, and enhancing operational readiness during periods of elevated demand.						

3.3	Safety and Welfare
3.3.1	Maintaining firefighter safety remains a critical priority. Key themes include the requirement for improved wildfire-specific PPE, consistent welfare provision during protracted incidents, and clearer arrangements for managing non-SFRS personnel on the fire ground.
3.4	Training and Capacity
3.4.1	The findings reinforce the need to expand wildfire training provision and strengthen tactical capability, ensuring sufficient capacity across SFRS to meet rising operational demands. This includes further support for Wildfire Tactical Advisors and improved joint training opportunities both internally and externally.
3.5	Partnership Working
3.5.1	Strong partnership working was evident, however, both debriefs identify opportunities to improve multi-agency coordination, aviation tasking, public messaging, and alignment of planning and readiness. Effective engagement with land managers, estates, and wider responders remains essential to Scotland's wildfire resilience.
3.6	Oversight / Tracking of the De-brief Recommendations
3.6.1	The actions arising from the SFRS National Debrief recommendations will be monitored and tracked via the SFRS Organisational Learning Group, with specific actions allocated to risk holders across the Service. Recommendations produced through the SMARTEU Debrief will also be progressed and coordinated through the Wildfire Forum.
4	Recommendation
4.1	The Committee are invited to note the information contained within this report and provide any feedback.
5	Key Strategic Implications
5.1	Risk Appetite and Alignment to Risk Registers
5.1.1	In relation to meeting our legal and regulatory obligations, SFRS has a minimalist appetite. In relation to continuous improvement and learning, utilising all stages of the OA process, SFRS has an open appetite.
5.2	Financial
5.2.1	The recommendations outlined may have associated financial implications. The ongoing development of the lightweight PPE strategy could result in additional costs related to the procurement of new equipment. Similarly, the review of the welfare may incur expenditure should replacement or upgrades be deemed necessary. Furthermore, increasing the number of wildfire training instructors and increasing the capacity of training delivery is likely to involve additional financial investment for the Service.
5.3	Environmental & Sustainability
5.3.1	Wildfires pose significant risks to the environment, often resulting in the destruction of ecosystems and causing long-term damage to plant and animal life. In addition, wildfires contribute to climate change through the release of substantial amounts of CO ₂ and other greenhouse gases into the atmosphere.
5.4	Workforce
5.4.1	Enhancements to welfare arrangements, training, and personal protective equipment (PPE) are expected to strengthen operational competency and promote the highest standards of safety across the Service.
5.5	Health & Safety
5.5.1	Health and safety of personnel and partners may be at risk should SFRS policies, procedures and safe systems of work if not adopted at operational incidents.

	Recommendations within this report will support compliance to health and safety legislation and ISO 45001.	
5.6 5.6.1	Health & Wellbeing There is a risk to the health and wellbeing of SFRS personnel and partner agencies when dealing with incidents of this nature.	
5.7 5.7.1	Training The recommendations include national training actions to be implemented to ensure operational resilience.	
5.8 5.8.1	Timing Operational Learning requires to be captured and shared across the organisation in a timely manner to ensure the safety of our workforce and the communities.	
5.9 5.9.1	Performance Performance will be monitored measured and analysed via the organisational learning action tracker with specific actions allocated to risk holders through the Organisational Learning Group (OLG). Recommendations produced through the SMARTEU Debrief will also be progressed and coordinated through the Wildfire Forum.	
5.10 5.10.1	Communications & Engagement Comprehensive engagement has been undertaken across Local Senior Officer (LSO) Areas, Operations Control, Training, Safety and Assurance, Communications, DaTS, RDI, representative bodies and tactical advisors and SMARTEU. This coordinated approach has enabled a national debrief format, ensuring stakeholder alignment, consistent messaging, and effective dissemination of operational learning.	
5.11 5.11.1	Legal There are no legal implications to be considered within this report.	
5.12 5.12.1	Information Governance A Data Protection Impact Assessment (DPIA) is not required for this report as there is no sensitive information to consider.	
5.13 5.13.1	Equalities An Equality and Human Rights Impact Assessment (EHRIA) is not required for this report. Directorate and LSO Area will capture required EHRIA.	
5.14 5.14.1	Service Delivery The identified learning and recommendations highlight areas for service delivery to focus upon.	
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:	A significant amount of progress reflects SFRS's ongoing commitment to strengthening the Wildfire capability and partnership approaches necessary aligned to the SFRS Wildfire Strategy, supporting continuous improvement across operational practice, training, and partnership activity.

8	Appendices/Further Reading	
8.1	<u>Further Reading:</u> <ul style="list-style-type: none">• SFRS Wildfire Strategy• SFRS Strategy 2025-2028• SFRS Values	
Prepared by:		Ian Higson, Watch Commander Safety and Assurance
Sponsored by:		Alasdair Cameron, Area Commander Deputy Head of Safety and Assurance
Presented by:		Craig McGoldrick, Assistant Chief Officer Director of Training Safety & Assurance
Links to Strategy and Corporate Values		
<u>SFRS Wildfire Strategy</u> – Prevention, Response & Partnership Woking. <u>SFRS Strategy 2025–2028</u> <ul style="list-style-type: none">• Safe and Effective Response: Improving operational resilience through enhanced training, equipment, and communication systems.• Investing in Our People: Prioritising health, safety, and wellbeing through welfare improvements and PPE upgrades.• Innovation and Investment: Advocating for modern technology (drones, multi-sim devices) and innovative practices to strengthen wildfire response.• Improving Performance: Using structured debriefs and organisational learning to inform future operational strategies.• Safer Communities through Prevention: Leveraging Community Asset Register (CAR) and community engagement to reduce wildfire risk and improve preparedness. <u>SFRS Values</u> <ul style="list-style-type: none">• Safety: Enhancing firefighter safety through improved PPE, welfare arrangements, and operational procedures.• Innovation: Promoting innovative solutions such as the use of drones, CAR assets, and advanced wildfire tactics to improve operational effectiveness.		
Governance Route for Report		Meeting Date
Service Delivery Committee		24 February 2026
Report Classification/ Comments		For Information only

SCOTTISH FIRE AND RESCUE SERVICE

Service Delivery Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/SDC/06-26

Agenda Item: 12.1

Report to:	SERVICE DELIVERY COMMITTEE						
Meeting Date:	24 FEBRUARY 2026						
Report Title:	RISK UPDATE REPORT – FEBRUARY 2026						
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this report is to provide the Service Delivery Committee (SDC) 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
3.2.1

Alignment to Strategic Outcomes

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.	3	2			5
Outcome 2	Communities are safer and more resilient as we respond effectively to changing risks.	5	3	1		9
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	6	4	5		15
Outcome 6	The experience of those who work for SFRS improves as we are the best employer we can be.	6	6	2		14
Outcome 7	Community safety and wellbeing improves as we work effectively with our partners			1		1
		20	16	10		46

3.2.2

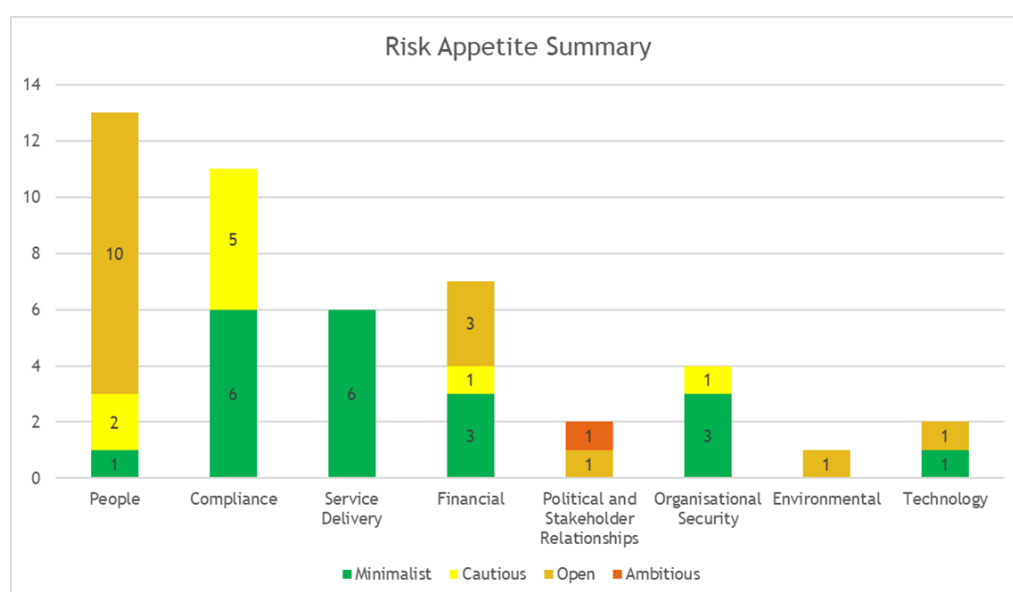
All risks will be realigned to the new 2025-2028 Strategic Plan with work programmed through the Performance and Data Services.

3.3
3.3.1

Risk Appetite

Following agreement of the Services risk appetite statements an alignment to current Directorate risks was undertaken. The tables below provide 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 Risk Appetite and risks rated 15 or over:

Risk Theme	Risk ID	Governance Alignment	Risk Name	Risk Rating	Target Risk	RR Above or Within RA
Technology (Open)	FCS019	SDC (SDB)	Critical service and system failure	20	12	Above
Service Delivery (Minimalist)	PPP008	SDC (SDB)	Disruption and National Event Team	16	4	Above
Service Delivery (Minimalist)	SD001	SDC (SDB)	Command and Control Mobilising Systems	15	10	Above
Service Delivery (Minimalist)	OD001	SDC (SDB)	Operations Control Staffing	15	6	Above
People (Open)	POD020	PC (CB)	People Capacity & Wellbeing	16	4	Above
People (Open)	FCS022	PC (CB)	Recruitment & Retention	16	12	Above
People (Cautious)	POD026	PC (CB)	Remedial Pensions Exercises	16	4	Above
People (Minimalist)	SPPC017	PC (CB)	Resourcing Levels	16	9	Above
People (Open)	POD025	PC (CB)	Support Staff Pay & Reward Framework	16	4	Above
People (Open)	PPP005	SDC (SDB)	Trained, skilled staff and legal/regulatory compliance	16	4	Above
Organisational Security (Minimalist)	SDD007	ARAC (CB)	Cyber Security	20	12	Above
Organisational Security (Minimalist)	PPP009	SDC (SDB)	HFSV Partner Application	16	4	Above
Organisational Security (Minimalist)	FCS017	ARAC (CB)	Planning for and minimising Cyber disruption	15	10	Above
Financial (Minimalist)	POD024	PC (CB)	Misalignment of Learning & Development Investment with	20	2	Above
Financial (Minimalist)	FCS005	ARAC (CB)	Core Funding	16	8	Above
Financial (Open)	TSA019	PC (TSAB)	Training Facilities	16	8	Above
Compliance (Minimalist)	TSA020	PC (TSAB)	Health and Safety Legal Compliance	16	1	Above
Compliance (Cautious)	SPPC004	ARAC (CB)	Information Governance Legislation	16	8	Above
Compliance (Minimalist)	TSA018	PC (TSAB)	Training Capacity	16	6	Above
Compliance (Cautious)	POD027	PC (CB)	Reporting Systems	15	4	Above

3.3.3

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

Risk Theme	Risk ID	Governance Alignment	Risk Name	Risk Rating	Target Risk	RR Above or Within RA
Technology (Minimalist)	SPPC016	SDC (SDB)	IRS FARDAP	5	5	Above
Service Delivery (Minimalist)	POD016	PC (CB)	Development to Competent Policy Arrangements	9	4	Above
Service Delivery (Minimalist)	SD003	SDC (SDB)	Operational Availability Systems	9	6	Above
Service Delivery (Minimalist)	SD006	PC (CB)	Statutory Duties	12	8	Above
Political and Stakeholder Relationships (Open)	SPPC013	ARAC (CB)	Partnership Working	8	8	Below
Political and Stakeholder Relationships (Ambitious)	SPPC015	ARAC (CB)	Consultation and Engagement	9	6	Below
People (Open)	FCS018	PC (CB)	Recruitment and Retention	9	6	Below
People (Open)	FCS024	ARAC (SDB)	Capital Programme	12	4	Within
People (Cautious)	POD022	PC (CB)	Employee Relations Case Management	12	4	Above
People (Open)	POD023	PC (CB)	People (Organisational Change) Framework	12	4	Within
People (Open)	FCS015	ARAC (SDB)	Staffing Issues	12	8	Within
People (Open)	PPP004	SDC (SDB)	Trained, skilled staff and legal/regulatory compliance	12	4	Within
People (Open)	FCS025	PC (CB)	Training for support staff	12	4	Within
Organisational Security (Cautious)	SPPC018	ARAC (CB)	Organisational Security	10	5	Above
Financial (Open)	FCS020	ARAC (CB)	Best Value	12	8	Within
Financial (Minimalist)	FCS011	ARAC (CB)	Fraud Detection	12	9	Above
Financial (Open)	FCS021	ARAC (SDB)	Investment Backlog	12	8	Within
Financial (Cautious)	FCS023	ARAC (CB)	New Finance System	12	9	Above
Environmental (Open)	FCS008	ARAC (SDB)	Environmental Management	12	8	Within
Compliance (Cautious)	POD018	PC (CB)	Personal Record Files	6	4	Within
Compliance (Cautious)	SPPC001	SDC (SDB)	Service Performance Management	8	5	Within
Compliance (Cautious)	SPPC003	ARAC (CB)	Statutory Framework	8	8	Within
Compliance (Minimalist)	SPPC019	ARAC (CB)	Statutory Framework	9	6	Above
Compliance (Minimalist)	PPP007	SDC (SDB)	Business Continuity Management System (BCMS)	12	4	Above
Compliance (Minimalist)	TSA014	PC (TSAB)	Health and Safety Legal Compliance	12	4	Above
Compliance (Minimalist)	TSA021	PC (TSAB)	Health and Safety Legal Compliance	12	1	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.

3.4

3.4.1

Risk Spotlights

All Committee's and Executive Boards will consider risks for future spotlights and following these discussions, identify whether required levels of assurance on progress have been provided.

3.4.2

In alignment to these spotlights, SLT will be asked to consider a programme of Directorate risk register reviews, allowing scrutiny of all registers and associated control actions over the financial year. This additional oversight would allow discussion of new areas of risk that could impact the Service or consideration of areas not currently reported.

3.5
3.5.1

Significant Directorate Risks

In relation to the current period Directorates reviewed their registers identifying 46 risks of which 20 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)					1
	Unlikely (2)			1	3	1
	Possible (3)			5	11	2
	Likely (4)			4	13	2
	Almost Certain (5)			2	1	

3.5.2

Appendix A to the report identifies 6 risks, aligned to SDC, rated 15 or above and categorised as significant:

Risk Ref.	Risk Description
FCS019	There is a risk that many of our critical services and systems, which support Operations Control team functions, could fail and be unrecoverable.
PPP005	There is a risk of insufficient levels of qualified and skilled Fire Engineering resources due to challenges with recruitment, access to qualifications/training requirements, finances and retention of staff.
PPP008	The Resilience Management Team has recognised a gap in national-level planning and Disruption preparedness.
PPP009	There is a risk SFRS cannot accept, record and report on partner referrals for HFSVs (and reciprocal referrals for support) due to the partner element of the App not being live - due to failing cyber security testing.
OD001	There is a risk of a non-resilient fire control due to insufficient employees and an ineffective fire control structure. Failure to attract, recruit, personnel, high abstraction and sickness levels lead to ineffective workforce planning.
SD001	There is a risk of failure to mobilise to an incident due to a technical failure of the existing mobilising systems.

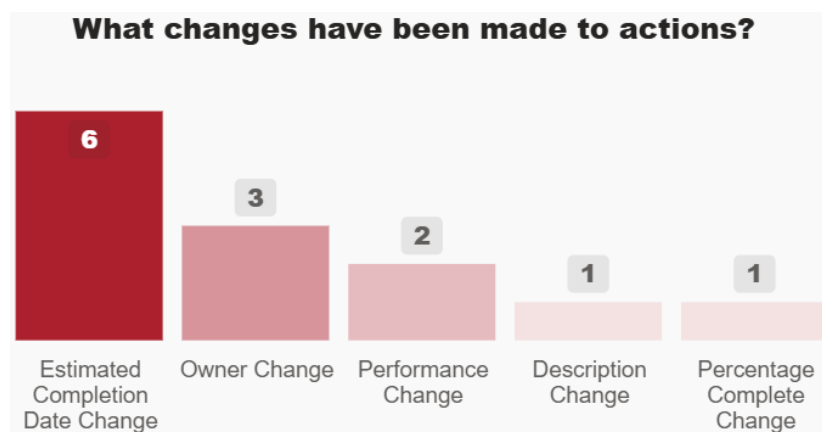
3.5.3

In relation to these risks no significant changes have been made since the last report.

3.6
3.6.1

Control Actions

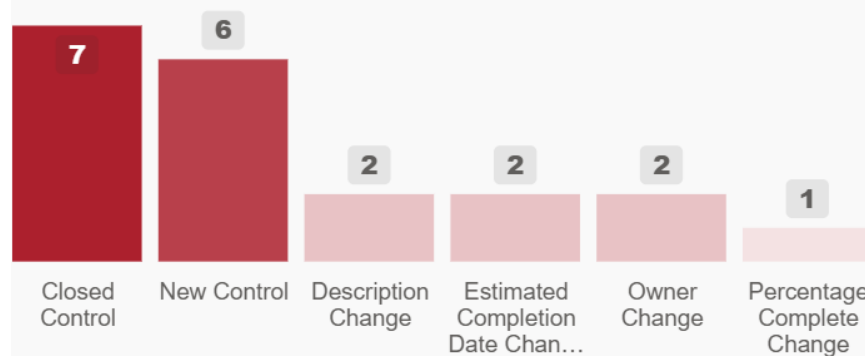
Following review, the following changes have been made to control actions rated 15 or above, aligned to SDC:



3.6.2

Following review, the following changes have been made to control actions rated below 15, aligned to SDB:

What changes have been made to actions?



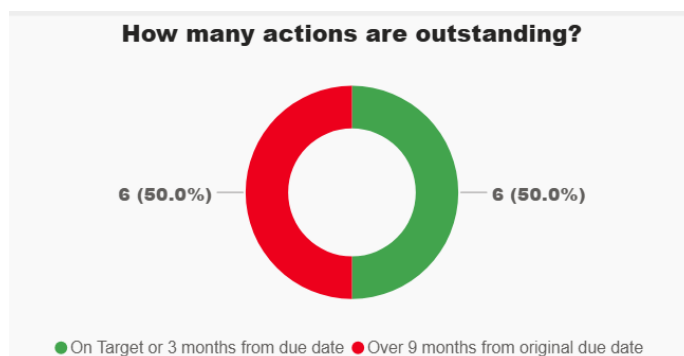
3.6.3

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 6 control actions, over 9 months from original due date, aligned to SDC.



3.6.5

The table below identifies the 6 control actions over 9 months from their original due date.

Risk ID	Action Description	Action Due	Est. Date	Action Comment
OD001	Develop and implement an active recruitment strategy	01/08/24	31/03/26	Recruitment campaign has progressed with candidates issued conditional offers of employment, with medicals taking place shortly. Firefighter Control Foundation Programme scheduled to commence 16 th March 2026.
OD001	Explore targeted development of OC Management (Supervisory to Strategic level).	31/03/25	31/03/26	We are working with Business Partners to explore delivery methods which take cognisance of the concurrent workstreams and capacity pressures. This includes discussion around bitesize sessions which can be recorded and supported with good practice.
SD001	Support the design, procurement, delivery and implementation of the New Mobilising System (NMS) - Phase 1	31/12/23	31/10/26	NMS ICCS was successfully delivered with CAD following in November 2026. Phase two optimisation will follow post-CAD implementation.
SD001	Procurement and implementation of Vision 5 Disaster Recovery System (for EOC and DOC)	31/12/23	31/07/26	Awaiting update of contract negotiations with supplier – work to be undertaken by DaTS

PPP005

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.

31/03/25

31/03/26

UK Wide scoping work and engagement continues 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. 4 SFRS delegates are on an FE degree course on year 1 at UCLan. Business Case developed to secure funding for a further 2 delegates to attend the FE degree in 2026. Retirement profile alongside achievement timescales considered to secure competency within the Function.

PPP005

Form contingency options to mitigate any Service failures to deliver Fire Engineering services through existing staff. Option to be progressed through governance for decision.

31/03/25

31/03/26

SFRS may have to consider an external contractor with careful contract considerations in absence of appropriately skilled staff. Alternative option would require employment at market value rates approximately 3 times the current contractual pay grade. Business Case prepared for consideration at CPIG/SLT to support additional development post within Fire Engineering.

3.6.6

In relation to risks falling below a rating of 15, there are 2 control action over 9 months from its original due date:

How many actions are outstanding?

2 (40.0%)

3 (60.0%)

● On Target or 3 months from due date

● Over 9 months from original due date

3.6.7

The table below identifies the 2 control actions over 9 months from their original due date.

Risk ID	Action Description	Action Due	Est. Date	Action Comment
PPP004	Delivery of a DaTS solution to ensure SFRS are able to sufficiently and accurately record and report on FSE activity, enabling compliance with legislation.	31/03/25	31/03/26	Issues with DaTS capacity means any work to update / replace PPED will not commence until sufficient support available. Limited support provided to maintain stability of current system. No report replacement for QlikView. DaTS currently looking to add to a future project plan.
PPP004	Prioritise Fire Safety Enforcement workload to obtain additional resource and engage with People and Work Force Planning to ensure key skills considered when allocating posts and skills into new roles.	31/03/25	31/03/26	SFRS may have to consider an external contractor with careful contract considerations in absence of appropriately skilled staff. Alternative option would require employment at market value rates approximately 3 times the current contractual pay grade. Bus

3.7

3.7.1

Development of Risk Dashboard

Work is being undertaken with Performance and Data Services to develop an automated reporting capability in relation to Appendix A and B, with the current attachments now showing a closer alignment to other data reports issued.

3.7.2

Aligned to the new reporting capability, development work is being undertaken to remove excel based risk registers allowing Directorates to input data directly into the risk dashboard. Testing of the new functionality will be undertaken during Q4 and Q1 with new recording and reporting arrangements anticipated to be fully adopted during Q1.

3.7.3	Both of these areas will assist in providing more up to date information for the Committee but will also require additional guidance on governance arrangements to ensure the accuracy of data directly input into the system.
3.7.4	In addition to this work, and where appropriate, revisions will be made to risk descriptions and related control actions, ensuring we capture the real risk faced by the Service and clearly articulate further mitigating actions required.
4	Recommendation
4.1	The Service Delivery Committee is asked to: <ul style="list-style-type: none"> • Scrutinise the information presented within the report and consider whether any additional assurance is required in relation to updates provided. • Consider any additional risks, identified by Committee, that should be considered within Directorate risk registers.
5	Key Strategic Implications
5.1	Risk Appetite and Alignment to Risk Registers
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 5.11.1	Legal Any implications arising from the report will be managed by the relevant Directorate.	
5.12 5.12.1	Information Governance DPIA completed - No. The report provides a summary of risks identified by Directorates. Each Directorate will ensure that any relevant DPIA is completed as required.	
5.13 5.13.1	Equalities EHRIA completed - No. An assessment was undertaken in relation to the Risk Management Policy. Any individual elements of work, which may have an impact upon Equalities, will require to be assessed and managed by the relevant Directorate.	
5.14 5.14.1	Service Delivery Any implications arising from the report will be managed by the relevant Directorate.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Deborah Stanfield, Director of Finance and Contractual Services
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable / Limited / Insufficient
7.2	Rationale:	There is room for improvement in the identification of the right risks, their associated risk rating, controls and the completion of mitigating actions within identified timescales. The report is based upon information received from Directorate's and I have confidence that the information is correctly reported based upon these returns.
8	Appendices/Further Reading	
8.1	Appendix A – Significant Risks	
8.2	Appendix B – Other Risk Summary	
Prepared by:		David Johnston, Risk and Audit Manager
Sponsored by:		Lynne McGeough, Head of Finance and Procurement
Presented by:		Andrew Watt, Deputy Chief Officer
Links to Strategy and Corporate Values		
<p>The Risk Management Framework forms part of the Services Governance arrangements and contributes to the Services 2025-2028 Strategy in relation to the following outcomes:</p> <ul style="list-style-type: none"> • Our organisational performance, productivity and resilience continually improve, delivered through organisational risk, security and resilience activities. • We are more innovative and achieve sustained investment in our technology, equipment, estate and fleet, making us more effective and efficient, delivered through more efficient and effective corporate business processes. 		
Governance Route for Report		Meeting Date
<i>Service Delivery Committee</i>		<i>24 February 2026</i>
		Report Classification/ Comments
		<i>For Scrutiny</i>



SCOTTISH

FIRE AND RESCUE SERVICE

Working together for a safer Scotland

Appendix A - Significant Risks



MANAGEMENT
INFORMATION

Updates received in:

2025-26Feb

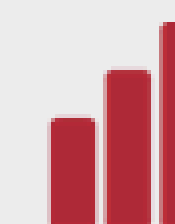
Welcome

This report outlines all significant risks with a current risk rating of 15 or higher, including details of the most recent control actions for each risk.

Click on the navigational buttons at the top of the following pages to go to a specific risk.

Key Contact: David.Johnston2@firescotland.gov.uk

Risk Management Policy & Framework: [RiskMgtPolicyFrameworkV3.0 \(firescotland.gov.uk\)](#)



BUSINESS
INTELLIGENCE



MANAGEMENT INFORMATION

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

Overview

FCS019

POD024

SDD007

FCS005

FCS022

POD020

POD025

POD026

PPP005

PPP008

PPP009

SPPC004

SPPC017

TSA018

TSA019

TSA020

FCS017

OD001

POD027

SD001

Risk ID	Risk Name	Risk Rating	Previous Risk Rating	Fiscal Mth
FCS019	Critical service and system failure	20	20	2025-26 Feb
POD024	Misalignment of Learning & Development Investment with Strategic Priorities	20	20	2025-26 Feb
SDD007	Cyber Security	20	20	2025-26 Feb
FCS005	Core Funding	16	16	2025-26 Feb
FCS022	Recruitment & Retention	16	16	2025-26 Feb
POD020	People Capacity & Wellbeing	16	16	2025-26 Feb
POD025	Suport Staff Pay & Reward Framework	16	16	2025-26 Feb
POD026	Remedial Pensions Exercises	16	16	2025-26 Feb
PPP005	Trained, skilled staff and legal/regulatory compliance	16	16	2025-26 Feb
PPP008	Disruption and National Event Team	16	16	2025-26 Feb
PPP009	HFSV Partner Application	16	16	2025-26 Feb
SPPC004	Information Governance Legislation	16	20	2025-26 Feb
SPPC017	Resourcing Levels	16	16	2025-26 Feb
TSA018	Training Capacity	16	16	2025-26 Feb
TSA019	Training Facilities	16	16	2025-26 Feb
TSA020	Health and Safety Legal Compliance	16		2025-26 Feb
FCS017	Planning for and minimising Cyber disruption	15	15	2025-26 Feb
OD001	Operations Control Staffing	15	15	2025-26 Feb
POD027	Reporting Systems	15		2025-26 Feb
SD001	Command and Control Mobilising Systems	15	15	2025-26 Feb

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS019	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. Vendor or SME support contracts are largely on a best endeavours basis resulting in, for example, the potential of Operations Control being unable to mobilise resources to an incident. This risk is enhaced during the period of transition to the NMS whic parallel running bringing additional challenges.	SDC	SDB	Director of Finance and Contractual Services	20	20	12	Technology - Open (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Ensure subject matter experts are involved in the NMS transition phase of the project	31/03/2026	31/03/2026	Greg Aitken	DaTS resources heavily involved and identified to support the ICCS go-lives.	On Target or 3 months from due date
Work closely with support partners to ensure preventative maintenance is carried out on at risk systems.	31/03/2026	31/03/2026	Greg Aitken	Ongoing as part of BAU processes. NEC position remains challenging.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
POD024	6	There is a risk that the organisation’s Learning and Development (L&D) budget is predominantly allocated to compliance and regulatory training, due to limitations on the available funding, resulting in insufficient resources to support strategic workforce development, leadership capacity building, and future capability needs. This may hinder the organisation’s ability to adapt to evolving business needs, innovate, and achieve long-term strategic goals.	PC	CB	Ceri Dodd, Deputy Head of People	20	20	2	Financial - Minimalist (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Conduct strategic L&D needs analysis aligned to organisational priorities	30/06/2026	30/06/2026	Danielle Milligan, People Manager - Talent	L&D prioritisation matrix for the 2026-27 LNA has been revised to become multifactor including alignment to organisational priorities.	On Target or 3 months from due date
Engage senior leaders in L&D planning and prioritisation	30/06/2026	30/06/2026	Danielle Milligan, People Manager - Talent	Quarterly L&D reporting to Corporate Board (CB) continues and onward reporting to People Committee (PC) commenced from Q2 update. Heads of Function approval for annual LNA has been mandated and included in the 2026-27 process enabling greater engagement with their functional LNA prior to submission to People Directorate for centralised collation and inclusion with in the SFRS annual planning processes.	On Target or 3 months from due date
Identify future skill and capability requirements and ensure funding for their development is included in future budget setting processes.	31/03/2026	31/03/2026	Ceri Dodd, Deputy Head of People	Future leadership and management skills and capability development funding requirements have been included within the medium term (3 year service delivery plan) financial planning process. A revised approach for the 2026-27 LNA process has been implemented to enable clear identification of different development categories including regulation/compliance, development qualifications, leadership and management and future skills/capability L&D needs from across the Service.	On Target or 3 months from due date
Review L&D budget approach	31/03/2026	31/03/2026	Ceri Dodd, Deputy Head of People	Learning Needs Analysis (LNA) Investment Report was been developed and presented to SLT. It outlined SFRS' current L&D approach and noted that most learning and development funding is currently focused on statutory and compliance training, with limited resources for future skills and leadership, and proposed a more strategic, prioritised approach to workforce development and funding to better align with organisational goals and future needs.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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 a cyber 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	Head of ICT	20	20	12	Organisation al Security - Minimalist (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Delivery of Phase 1 of Cyber Security Action Plan	01/03/2028	30/03/2026	Greg Aitken	This is managed via the DaTS Cyber Security Project. Phase 1 work packages have been identified, some delivered and others scheduled to be delivered before 31/03/2026.	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	31/03/2026	Greg Aitken	Staff training continues to be monitored with risk spotlights provided to required Committee's and Executive Boards. Engagement with People Directorate has taken place, and they are assisting with encourgaing those who have yet to register with KnowBe4 to do so ASAP. Once that exercise is complete they will focus on staff training compliance with the aim of increasing completion rates.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS005	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. This could result in delays to agreed and future projects requiring a resetting of the Services objectives.	ARAC	CB	Head of Finance and Procurement	16	16	8	Financial - 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	31/08/2025	Head of Finance and Procurement	Report provided to the Strategic Planning Change Committee on 6th November presenting the medium term financial plan for scrutiny. Further engagement with SLT required, to allow implementation of plan, pending SG budget proposals in January 2026.	Over 9 months from original due date
Regular review of financial monitoring reports to SLT, ensuring they remain fit for purpose to allow appropriate decision making.	31/03/2027	31/03/2027	Lynne Mcgeough	Monitoring requirements continue to be reviewed.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS022	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 relates to all functions, with particular impacts apparent within the Accountancy and Procurement Sections which is proving to have a very buoyant job market, and provides pay grade challenges. This can result in the inability to support service delivery requirements and future impacts upon resilience and succession planning may be experienced.	PC	CB	Head of Finance & Procurement	16	16	12	People - Open (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Following SLT agreement recruit to establishment in relation to the Systems Team.	31/05/2026	31/05/2026	Lynne Mcgeough	Currently being progressed.	On Target or 3 months from due date
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

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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. This could result in a lack of ability to deliver and perform effectively as a Directorate, as an enabler to the SFRS, as well as negatively impacting the health and wellbeing of People colleagues, resulting in increased levels of absence, reduced engagement, higher staff turnover and reduced ability to deliver against Directorate and Service plans.	PC	CB	Lyndsey Gaja, Head of People	16	16	4	People - Open (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
New Demand to CPIG setting out case for targetted resource to mitigate risks	30/11/2025	30/11/2025	Lydsey Gaja. Head of People	New demand for CPIG submitted on 20 November, ahad of 26 Nov meeting	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
POD025	6	There is a risk the SFRS is unable to attract and retain the support staff capabilities it needs, due to a perception that the current reward framework is not attractive, resulting in a reliance on long term market allowances and a negative impact on the organisation's ability to meet its strategic priorities.	PC	CB	Geri Thomson, Deputy Head of People	16	16	4	People - Open (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Deliver phase 1 pay and reward review to define challenges and develop options	30/06/2026	30/06/2026	Geri Thomson, Deputy Head of People	Numbers and details of posts within support staff structure being prepared to support analysis to be carried out by consultant	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
POD026	5	There is a risk that the concurrent remedial pensions exercises are not progressed in line with planned deadlines, some of which are statutory, due to the complex and inter-related nature of the work, along with capacity constraints at the Scottish Public Pensions Agency. This may result in a lack of clarity and discontent for employees; potential legal challenge and / or employee relations issues; increased enquiries from external stakeholders; and financial disadvantage to scheme members.	PC	CB	Geri Thomson, Deputy Head of People	16	16	4	People - Cautious (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Participate in various informal and formal forums with Scottish Public Pensions Agency and Finance colleagues to maintain regular oversight on project plans and agreed milestones and ensure effective internal communication and signposting	31/03/2026	31/03/2026	Geri Thomson, Deputy Head of People	Regular project meetings ongoing on weekly basis with SFRS participation, along with attendance at extraordinary SAB's as required. McCloud Remedial Service Statements now issued to 72% of active members, issue to Retired members expected to commence December 2025. Matthews and Booth both "paused" to permit focus on McCloud. Consultation on revision of Statutory Regulations governing Matthews just complete, and incorporates extension of Statutory deadline until September 2026	On Target or 3 months from due date
Provide regular progress updates to SFRS management teams and stakeholders to ensure appropriate oversight and escalation of potential challenges / delays should these arise	31/03/2026	31/03/2026	Geri Thomson, Deputy Head of People	Updates on current progress and impact of further delays provided to both SLT and RANSc in early September. With update to Service Delivery Board provided in mid-October. Regular meetings between SFRS and SPPA Comms team now underway, SPPA issuing monthly newsletters on progress. SFRS actively responding to employee queries and concerns, and SPPA have, at the behest of SFRS, created an email "hotline" between both organisations to fast-track any SFRS employee concerns over RSS statements. SFRS also responding to elected member questions, and supporting SPPA address Ministerial questions on issues concerning Volunteer employees in receipt of Retaining fees.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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	16	4	People - 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	AC Getty	UK Wide scoping work and engagement continues 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. 4 SFRS delegates are on an FE degree course on year 1 at UCLan. Business Case developed to secure funding for a further 2 delegates to attend the FE degree in 2026. Retirement profile alongside achievement timescales considered to secure competency within the Function.	Over 9 months from original 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	31/03/2026	AC Getty	SFRS may have to consider an external contractor with careful contract considerations in absence of appropriately skilled staff. Alternative option would require employment at market value rates approximately 3 times the current contractual pay grade. Business Case prepared for consideration at CPIG/SLT to support additional development post within Fire Engineering.	Over 9 months from original due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
PPP008	1	The Resilience Management Team has recognised a gap in national-level planning and Disruption preparedness. Currently ad-hoc teams are formed as needed, composed of members from the Resilience Team, LSO representation, and other stakeholders. Risks: Inconsistent planning, knowledge loss between events, and reactive deployment.	SDC	SDB	Head of Directorate (DACO)	16	16	4	Service Delivery - Minimalist (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Scope, and where agreed implement, options in relation to increasing capacity within the RM Team	01/04/2026	01/04/2026	AC Marshall	Paper taken to DMT on requirement for team to be established. Option 2 in paper approved that requires 3 WC and 3 CC's to resource the team. Proposal sent to SDR team for consideration of reinvestment of staff. Alternative options for resourcing being explored.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
PPP009	1	There is a risk SFRS can not accept, record and report on partner referrals for Home Fire Safety Visits (and reciprocal referrals for support) due to the partner element of the App not being live - due to failing cyber security testing. There are reputational risks as partners have been advised they could register as a HFSV referrer since February 2025. Without a secure Partner app there are data security issues should there be a cyber security attack which as led to the delays.	SDC	SDB	Head of Directorate (DACO)	16	16	4	Organisation al Security - Minimalist (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Engage with DaTS to ensure the full HFSV system is available, allowing for the recording of partner referrals for a HFSV and onward referrals for housholders to access wider support.	31/01/2026	31/01/2026	C Barlow	Development work has been ongoing since the HFSV App went live (Feb '25) to address security issues identified during cyber security testing. External testing was concluded 21/11/25 and DaTS confirmed the Partner App can be released into the live environment. Once the App is fully "live" and accessible by SFRS staff (expected week beginning 01 December) and partners this risk can be closed.	On Target or 3 months from due date
Support SFRS staff and partners to utilise the current HFSV App to provide HFSV referrals whilst awaiting the full system to be launched.	31/01/2026	31/01/2026	C Barlow	Guidance and support has been provided to partners to ensure they can still refer to the Service. These however are recorded as self referrals so we have no way of knowing the number of partners referrals since the App went live.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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	Head of Communication and Engagement	16	20	8	Compliance - Cautious (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
▲ Undertake review within SFRS to ascertain policy compliance	01/04/2025	31/08/2026	Head of Governance, Strategy and Performance	Work on hold due to lack of staff capacity and availability. Considered as part of review of Corporate Services.	Over 9 months from original due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC017	6	There is a risk where current resourcing falls below required levels to meet demand. This is due to current sickness absence, vacancy management and increased demands placed upon the Function. This has resulted in delays to work being completed, additional pressures placed upon other members of the Team and a reduction in the quality of work able to be provided.	PC	CB	Head of Communication and Engagement	16	16	9	People - Minimalist (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Review demands and prioritisation of work within Teams.	31/03/2026	31/03/2026	Marysia Waters	Communications demand arrangements have been reviewed and approved by corporate board.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
TSA018	2	<p>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, which could result in current and future negative impact on currency in operational skills & capacity, associated legal and regulatory compliance and financial and reputational cost.</p> <p>(Capacity meaning: the ability to do or produce)</p>	PC	TSAB	Assistant Chief Officer Craig McGoldrick Head of Training	16	16	6	Compliance - Minimalist (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Support Central Staffing with the implementation of a structured validation process to ensure accuracy and alignment across systems and confirm that data integrity checks verify that supplied competency data is complete, consistent, and formatted correctly before integration.	31/10/2025	31/03/2026	Andy Scott	Test data has been generated for Breathing Apparatus, Driving (Cat B and Cat C), and Incident Command. This data is currently undergoing validation checks to confirm accuracy and formatting before a test file is prepared for upload to the Gartan system, as contractual data will not be included in the upload file.	3-9 months from original due date
Cross-System Validation: Conduct automated and manual checks to ensure competency records match across HR, training, and operational databases.	01/03/2026	01/03/2026	Andy Scott	Cross-validation checks are ongoing for Breathing Apparatus, Driving, and Incident Command competencies. Data verification has been completed successfully, and the final output file is being prepared for upload to the Gartan system.	On Target or 3 months from due date
Discrepancy Resolution: Identify and rectify any inconsistencies in collaboration with Operations and relevant stakeholders before finalising updates.	01/03/2026	01/03/2026	Andy Scott	Next stage started with limited output of B.A. and Driver Training and Incident Command. When confirmed move to output and check Specialist Skills	On Target or 3 months from due date
Driver training management team to engage with People Team to review current terms and conditions to align with emerging service needs.	01/04/2026	01/04/2026	Garry Douglas	Communication with trade unions and staff is taking place in advance of any formal agreements or implementation.	On Target or 3 months from due date
Exception Reporting: Generate reports highlighting anomalies or missing data, with corrective actions assigned to responsible personnel.	01/03/2026	01/03/2026	Andy Scott	Checks Started and output file being generated for verification into Gartan	On Target or 3 months from due date
Look at costing and timeline to put additional staff onto ADI instructor pathway to increase output of Category B courses.	01/11/2026	01/11/2026	Garry Douglas	Candidates have signed up to ADI register and the first phase of the course.	On Target or 3 months from due date
Review the job descriptions of non-uniformed instructors to confirm contractual obligations and assess the risk if driving instructors withdraw their ADI qualification for delivering Cat B ERD courses.	31/03/2026	31/03/2026	Gary Douglas	Communication with trade unions is underway prior to staff engagement. Consideration is being given to incorporating an out-of-core-hours allowance to ensure readiness for weekend and evening working ahead of the introduction of planned legislative changes to driving at speed courses.	On Target or 3 months from due date
To alleviate the current backlog of Category B courses explore options and costings for external training providers to deliver training to alleviate the current	01/03/2026	01/03/2026	Garry Douglas	An Initial Cat B course was delivered in December, with a second course scheduled for mid-January. A quick quote procurement process will now commence to enable further courses to be delivered prior to the end of the financial	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
TSA019	2	<p>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, associated legal and regulatory compliance and financial and reputational cost.</p> <p>(Facilities meaning: infrastructure, buildings, training centres, welfare)</p>	PC	TSAB	Assistant Chief Officer Craig McGoldrick Head of Training	16	16	8	Financial - Open (Above 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	31/03/2026	Sarah Robertson Group Commander Training	Upgrade works to the facilities at Dundee Airports Training site is progressing following a short pause over the festive holiday period, completion dates remain on track for the end of March.	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.	01/12/2025	31/03/2026	Srah Robertson	Since the December update, the proposal to improve Portlethen's welfare facilities has been discussed within the Training Function and agreed to progress. A wider priority list of training facility improvements is being developed and will be presented to Assets to determine the order of works. Once priorities are confirmed, tenders will be sourced to enable delivery of the agreed improvements.	On Target or 3 months from due date
Liaise with Assets / Property to support and oversee the timeline and delivery of works required for the new welfare facility at Sumburgh Training Centre.	31/03/2026	31/03/2026	Group Commander Thomas Mortimer	Still awaiting submission of the Planning Application and formal issue of the market testing (tender) package to the contractor; works continue to progress to maximise spend within the current financial year. The new accommodation units are expected to be on site by the end of March; however, completion of the “below ground” works is unlikely within that timeframe. As a result, the units may be temporarily sited at the Training Facility for several weeks while below ground and service connection works are completed. A programme to completion can only be provided once a contractor has been appointed.	On Target or 3 months from due date
Liaise with Property Project Manager and SMEs to support and oversee the design, user requirements, planning, procurement, tendering and construction of Perth Training Centre CFBT and Contaminants Control Facility.	30/09/2026	30/09/2026	Group Commander Sarah Robertson	CFBT project work commenced on Saturday 13/12/25, on breaking out the existing slab, in preparation for piling and ground slab works. Groundwork design proposals are being progressed in tandem with the ground works. Current discussion focuses on how to achieve level access to the new facility. Two options are being considered; Recessed slab: Lower the building's ground slab below the existing ground level, creating a recessed floor. Raised platforms: Keep the slab at the existing ground level and provide level access by installing raised platforms with graded approaches. It is proposed that the ground works associated with the CCU commence on 15/1/26. While the quotation for all CCU works are still awaited, instruction has been issued for provision of the facility, in order to maintain programme dates. To summarise, both projects continue to be progressing within project requirements of programme, cost and quality.	On Target or 3 months from due date
Work with Assets to support the replacement schedule to address the aging fleet within the Training Function.	31/03/2026	31/03/2026	Group Commander Garry Douglas	Fleet has confirmed that new vehicles are currently on order and are expected to arrive between the end of Quarter 4 and the start of Quarter 1. Specific delivery dates have not yet been provided. Further detail regarding which appliances are being replaced, and their respective locations is still awaited.	On Target or 3 months from due date
Work with Property, Contaminants Subgroup and PRP's to oversee the implementation of facilities and resources for the management of fire contaminant control across all sites.	31/03/2027	31/03/2027	Thomas Mortimer Group Commander Training	A monthly Contaminants meeting with PRPs for CFBT sites is monitoring progress and maintaining momentum to oversee the implementation of facilities and resources for the management of fire contaminant control across all sites. A Standardised “Contamination Control Unit” is under development and is planned for deployment alongside new CFBT units at Perth, which will provide a blueprint for SFRS premises moving forward.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
TSA020	6	There is a risk that SFRS do not have established procedures in place for quantitative FFT testing of SCBA facemasks by January 2026, as required following changes in HSE guidance communicated through NFCC. Face Fit Testing (DCOL)	PC	TSAB	Teresa Kelly SA DHOF	16		1	Compliance - Minimalist (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Establish a working group to develop a delivery model	31/03/2026	31/03/2026	Teresa Kelly SA DHOF	Paper developed by DHOf for Service Delivery Board to highlighting change, risk and organisational direction with SDB Service Delivery Board approving the establishment of a working group to develop a delivery model. Nominations for the working group are being requested by Safety and Assurance.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS017	5	There is a risk where SFRS fails to appropriately plan for and minimise the impact of a cyber attack on the Service. This may be due to insufficient planning of controls and response plans, aligned to the increasing technological advances made by cyber criminals. This may result in prolonged interruption to Service operations, unplanned additional funding requirements, negative press coverage and increased external scrutiny of Service operations.	ARAC	CB	Director of Finance and Contractual Services	15	15	10	Organisation al Security - Minimalist (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
DaTS engagement with and support to Directorates/Functions in preparing business continuity plans	30/03/2026	30/03/2026	Craig Dundas	This is dependent on the Cyber Incident Response Plan (CIRP) being redeveloped and going live. Supporting functions with developing and redeveloping their BCP's will be closely aligned to the CIRP.	On Target or 3 months from due date
Delivery of Phase 1 of Cyber Security Action Plan	30/03/2026	30/03/2026	Walter Wilson	This is managed via the DaTS Cyber Security Project. Phase 1 work packages have been identified, some delivered and others scheduled to be delivered before 31/03/2026.	On Target or 3 months from due date
Redevelop Cyber incident response plan	30/01/2026	30/01/2026	Walter Wilson	We have worked alongisde Cyber Fraud Scotland to review our current CIRP. Work will now take place to redevelop the CIRP with the aim of issuing a new CIRP before the end of March 2026.	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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 plannin, as a result, we would be failing to provide a resilient fire control capability.	SDC	SDB	Head of Operations	15	15	6	Service Delivery - Minimalist (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Develop and implement an active recruitment strategy	01/08/2024	31/03/2026	AC MacDonald / GC Coyle	Recruitment campaign has progress, with candidates issued conditional offers of employment, and medicals taking place next week. Firefighter Control Foundation Programme scheduled to commence on Monday 16th March 2026.	Over 9 months from original due date
Explore targeted development of OC Management (Supervisory to Strategic level).	31/03/2025	31/03/2026	AC MacDonald / GC McCartney	We are working with Business Partners to explore delivery methods which take cognisance of the concurrent workstreams and capacity pressures. This includes discussion around bitesize sessions which can be recorded and supported with good practice.	Over 9 months from original due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
POD027	5	There is a risk that SFRS is unable to evidence effective process controls and / or unable to provide the full range of required people reporting due to system limitations and a high reliance on manual / off-system working, resulting in a reduced team capacity for strategic priority work, poor employee experience, a negative impact on the ability to make evidence based decisions, increased errors and non-compliances.	PC	CB	Lyndsey Gaja, Head of People	15		4	Compliance - Cautious (Above Appetite)

Controls Actions	Original Due Date	Est Completion Date	Owner	Comment	Action Status
Agree the approach to the Corporate Systems project to ensure that in the longer term, appropriate systems and technology are in place to enable improved ways of working and enhanced controls	30/04/2026	30/04/2026		Initial draft OBC discussed at SPCC in November. Further developed OBC will be taken to the Feb 2026 meeting	On Target or 3 months from due date
Identify process improvement oppoortunities to mitigate risk within current system constraints and agree prioritised improvements to deliver	31/03/2026	31/03/2026		TBA	On Target or 3 months from due date

Overview	FCS019	POD024	SDD007	FCS005	FCS022	POD020	POD025	POD026	PPP005
PPP008	PPP009	SPPC004	SPPC017	TSA018	TSA019	TSA020	FCS017	OD001	POD027

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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	Head of Operations	15	15	10	Service Delivery - Minimalist (Above 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	31/07/2026	GC Marie-Clare	Awaiting update of contract negotiations with supplier - this sits with Craig Dundas (DaTs)	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	31/10/2026	GC Jill Barber	NMS ICCS live in Edinburgh OC effective from 11th November 2025. Next go-live scheduled for DOC on 25th November 2025, with JOC go-live scheduled for 2nd December 2025	Over 9 months from original due date
Existing Systems Group to ensure, via DATS that the contracts for exisiting systems support are extended from 01/01/2026 to 31/12/2026	31/12/2025	31/12/2026	DACO Garry MacKay	NMS ICCS live in all OCs and supported under OC Business As Usual. Maintenance contracts for legacy mobilising systems are now in place with suppliers. Work continues on utilising wide area network (WAN) to support Crash Mobilising following cessation of PSTN lines. Timeline for completion still to be confirmed.	On Target or 3 months from due date

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Appendix B - Other Risks



MANAGEMENT
INFORMATION

Updates received in:

2025-26Feb

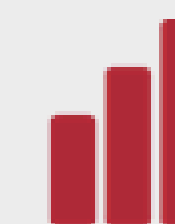
Welcome

This report outlines all significant risks with a current risk rating below 15, including details of the most recent control actions for each risk.

Click on the navigational buttons at the top of the following pages to go to a specific risk.

Key Contact: David.Johnston2@firescotland.gov.uk

Risk Management Policy & Framework: [RiskMgtPolicyFrameworkV3.0 \(firescotland.gov.uk\)](#)



BUSINESS
INTELLIGENCE



MANAGEMENT INFORMATION

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

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Prevention, Protection and Preparedness

Service Delivery

Service Development

Strategic Planning, Performance and Co...

Training, Safety and Assurance

Risk ID	Risk Name	Risk Rating	Previous Risk Rating	Fiscal Mth	Status
FCS008	Environmental Management	12	12	2025-26 Feb	Treat
FCS011	Fraud Detection	12	12	2025-26 Feb	Treat
FCS015	Staffing Issues	12	12	2025-26 Feb	Treat
FCS020	Best Value	12	12	2025-26 Feb	Treat
FCS021	Investment Backlog	12	12	2025-26 Feb	Treat
FCS023	New Finance System	12	12	2025-26 Feb	Treat
FCS024	Capital Programme	12	12	2025-26 Feb	Treat
FCS025	Training for support staff	12	12	2025-26 Feb	Treat
POD022	Employee Relations Case Management	12	12	2025-26 Feb	Treat
POD023	People (Organisational Change) Framework	12	12	2025-26 Feb	Treat
PPP004	Trained, skilled staff and legal/regulatory compliance	12	12	2025-26 Feb	Treat
PPP007	Business Continuity Management System (BCMS)	12	20	2025-26 Feb	Treat
SD006	Statutory Duties	12	12	2025-26 Feb	Treat
TSA014	Health and Safety Legal Compliance	12	12	2025-26 Feb	Treat
TSA021	Health and Safety Legal Compliance	12		2025-26 Feb	Treat
SPPC018	Organisational Security	10	10	2025-26 Feb	Treat
FCS018	Recruitment and Retention	9	9	2025-26 Feb	Treat
POD016	Development to Competent Policy Arrangements	9	9	2025-26 Feb	Treat
SD003	Operational Availability Systems	9	9	2025-26 Feb	Treat
SPPC015	Consultation and Engagement	9	9	2025-26 Feb	Tolerate
SPPC019	Statutory Framework	9	9	2025-26 Feb	Treat
SPPC001	Service Performance Management	8	15	2025-26 Feb	Tolerate
SPPC003	Statutory Framework	8	8	2025-26 Feb	Tolerate
SPPC013	Partnership Working	8	8	2025-26 Feb	Tolerate
POD018	Personal Record Files	6	6	2025-26 Feb	Treat
SPPC016	IRS FARDAP	5	5	2025-26 Feb	Treat

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Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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; Resulting in lost saving opportunities, potential fines if required targets are not met and possibly negative media coverage.	ARAC	SDB	Head of Asset Management	12	12	8	Environmental - 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	1	0	2

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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. Issues of fraud can impact the reputation of the Service, cause increased internal and external scrutiny and may have an impact upon financial reporting arrangements.	ARAC	CB	Head of Finance and Procurement	12	12	9	Financial - 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	0	1

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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; Resulting in not having the staff available to meet required demand, which would then impact on the ability of the service to deliver an effective asset management service.	ARAC	SDB	Head of Asset Management	12	12	8	People - 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	1	0

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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. This may result in missed opportunities to deliver the best possible service for the communities we serve.	ARAC	CB	Director of Finance and Contractual Services	12	12	8	Financial - 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	1	0	2

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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; Resulting in fleet vehicles being off the run and properties that do not meet minimum standards of welfare due to a failure to ensure compliance with regulatory requirements	ARAC	SDB	Director of Finance and Contractual Services	12	12	8	Financial - 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 - Committee	Governance - Board	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. The Service may experience challenge by other market provides in relation to procurement legislation and any procurement work required to support other delivery options is limited by available capacity within Procurement and Systems Teams.	ARAC	CB	Head of Finance and Procurement	12	12	9	Financial - 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

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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	Head of Asset Management	12	12	4	People - 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 - Committee	Governance - Board	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	Head of Asset Management	12	12	4	People - 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 - Committee	Governance - Board	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	9	9	6	People - 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
4	4	0	0

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Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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. This may result in a failure to follow legal and/or best practice requirements or to effectively achieve the required organisational change, as well as the potential for employee discontent, hostile and fractious relations with the representative bodies and impact on retention and engagement.	PC	CB	Rachael Scott, Deputy Head of People	12	12	4	People - 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	0	1	1

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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. This may result in protracted timescales for progression and conclusion of cases and potential for employee discontent, negative relations with the representative bodies and impact on absence, engagement and retention.	PC	CB	Deputy Head of People	12	12	4	People - 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	1	2	0

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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	Deputy Head of People	9	9	4	Service Delivery - 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	0	1

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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 resulting in potential reputational damage and / or employee relations issues, as well as uncertainty over procedures.	PC	CB	Stuart Watson, Area Commander - People	6	6	4	Compliance - 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
3	1	0	2

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Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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, resulting in the potential that the Directorate/SFRS may not be able to deliver against its legislative and organisational responsibilities.	SDC	SDB	Head of Directorate (DACO)	12	12	4	People - 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	0	0	2

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
PPP007	1	There is a risk where the Service fails to have in place a business continuity management system, minimising the risk of disruption during or after an event. This could be due to not having in place fully tested and maintained business continuity plans, which could result in unplanned disruption or a failure to effectively recover from an event.	SDC	SDB	AC Marshall	12	20	4	Compliance - 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

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Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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. This could result in Service Delivery not meeting its statutory duties under <ul style="list-style-type: none">- The Fire (Scotland) Act 2005,- The Fire and Rescue Framework for Scotland 2016,- The Fire (Additional Function) (Scotland) Order 2005,- Regulation 11 of the Building (Procedure) (Scotland) Act 2004	PC	CB	Director of Operations Delivery	12	12	8	Service Delivery - 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 - Committee	Governance - Board	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. This would impact SFRS ability to effectively mobilise. It would also cause reliability issues and licence issues in some LSO areas of SFRS.	SDC	SDB	Head of Operations	9	9	6	Service Delivery - 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

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Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC018	2	There is a risk where SFRS fails to coordinate organisational security effectively resulting in increased vulnerability to SFRS premises and personnel	ARAC	CB	Head of Governance, Strategy and Performance	10	10	5	Organisational Security - 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	4	0	0

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC019	5	There is a risk that SFRS is unable to comply with timescales for lodging information requests served on SFRS via court orders and to meet demands for witness citations due to lack of resources. The result being SFRS is cited to attend court to explain lack of court co operation, the potential for further court orders being received, complaints and the potential loss of public confidence in SFRS services.	ARAC	CB	Head of Governance, Strategy and Performance	9	9	6	Compliance - 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 - Committee	Governance - Board	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	Head of Communication and Engagement	9	9	6	Political and Stakeholder Relationships - 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
0	0	0	0

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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 resulting in missed opportunities and in a loss of workforce, stakeholder and public confidence	ARAC	CB	Head of Governance, Strategy and Performance	8	8	8	Political and Stakeholder Relationships - 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
0	0	0	0

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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	Head of Governance, Strategy and Performance	8	8	8	Compliance - 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 - Committee	Governance - Board	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	Head of Governance, Strategy and Performance	8	15	5	Compliance - 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 - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC016	5	SFRS fails to ensure that SFRS are familiar and able to use Fire and Rescue Data and Analytical Platform (FARDAP) resulting in a loss of data and reporting, leading to increased costs and reputational damage	SDC	SDB	Head of Governance, Strategy and Performance	5	5	5	Technology - 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

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Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	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	Head of Safety and Assurance	12	12	4	Compliance - 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	0	1

Risk ID	Strategic Outcome	Risk Description	Governance - Committee	Governance - Board	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
TSA021	6	There is a risk of failure to undertake periodical examinations for asbestos as required, due to the requirement to deliver recovery activity, resulting in breach of The Control of Asbestos Regulations 2012. (Asbestos Health Surveillance)	PC	TSAB	AC Michael Humphreys	12		1	Compliance - 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

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

Interpreting statistics and trends:

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

Usage:

This report uses **MANAGEMENT INFORMATION**. Only specific users can access the report, and you must not take screen shots of any of the pages.

For further help, please contact the Business Intelligence Team -

bi@firescotland.gov.uk

or visit the [Viva Engage Power BI Users page](#)

SERVICE DELIVERY COMMITTEE – FORWARD PLAN

Agenda Item 13.1

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
4 JUNE 2026	<ul style="list-style-type: none"> Chair's Welcome Apologies for Absence Consideration of and Decision of any Items to be taken in Private Declaration of Interests Minutes Action Log Review of Actions Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Date of Next Meeting 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Update from HMFSI Operational Learning <p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Service Delivery Update (incl NMS/OC Resilience) Service Delivery Performance Reporting: Quarterly Performance Report, HMFSI Inspection Action Plan Updates Risk Report Update LSO Performance Overview SFRS Complaints and Compliments Annual Report 2024/25 <p><u>Risk Spotlight:</u></p> <ul style="list-style-type: none"> <p><u>New Business</u></p> <ul style="list-style-type: none"> Safety and Statement (Private) 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Committee Statement of Assurance <p><u>New Business</u></p> <ul style="list-style-type: none">
10 SEPTEMBER 2026 To be moved	<ul style="list-style-type: none"> Chair's Welcome Apologies for Absence Consideration of and Decision of any Items to be taken in Private Declaration of Interests Minutes Action Log Review of Actions Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Date of Next Meeting 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Update from HMFSI Operational Learning Clinical Governance Annual Report Local Senior Officer Performance Overview <p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Service Delivery Update (incl NMS/OC Resilience) Service Delivery Performance Reporting: Quarterly Performance Report, HMFSI Inspection Action Plan Updates Risk Report Update LSO Performance Overview <p><u>Risk Spotlight:</u></p> <ul style="list-style-type: none"> <p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <p><u>New Business</u></p> <ul style="list-style-type: none">

SERVICE DELIVERY COMMITTEE – FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
3 DECEMBER 2026	<ul style="list-style-type: none"> Chair's Welcome Apologies for Absence Consideration of and Decision of any Items to be taken in Private Declaration of Interests Minutes Action Log Review of Actions Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Date of Next Meeting 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Update from HMFSI Operational Learning 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Service Delivery Update (incl NMS/OC Resilience) Service Delivery Performance Reporting: Quarterly Performance Report, HMFSI Inspection Action Plan Updates Risk Report Update LSO Performance Overview SFRS Complaints and Compliments Annual Report 2025/26 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none">
			<u>Risk Spotlight:</u> <ul style="list-style-type: none"> 		
		<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none">
4 MARCH 2027	<ul style="list-style-type: none"> Chair's Welcome Apologies for Absence Consideration of and Decision of any Items to be taken in Private Declaration of Interests Minutes Action Log Review of Actions Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Date of Next Meeting 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Update from HMFSI Operational Learning 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Service Delivery Update (incl NMS/OC Resilience) Service Delivery Performance Reporting: Quarterly Performance Report, HMFSI Inspection Action Plan Updates Risk Report Update LSO Performance Overview 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none">
			<u>Risk Spotlight:</u> <ul style="list-style-type: none"> 		
		<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none">

SERVICE DELIVERY COMMITTEE – FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
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FUTURE ITEM (Dates TBC)

- **Influencing Factors on the outcome of Operational Incidents (D Farries):** Proposed at Forward Planning mtg on 7 July 2025 for the 21 August 2025 meeting. Subsequently deferred by DCO Watt with new meeting date to be confirmed.
- **Evaluation Programme for HFSV and Wider Prevention Activities (J Henderson):** Discussed at 28 May 2025 with subsequent specific request at 21 August 2025 to add to forward plan.