PUBLIC MEETING – STRATEGIC PLANNING AND CHANGE COMMITTEE

THURSDAY 6 AUGUST 2026 @ 1000 HRS

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

1 CHAIR'S WELCOME

2 APOLOGIES FOR ABSENCE

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

4 DECLARATION OF INTERESTS

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

5	**MINUTES OF PREVIOUS MEETING:**	*T O'Donnell*
5.1	Thursday 14 May 2026 (*attached)*	
	The Committee is asked to approve the minutes of the meeting.	
6	**ACTION LOG** (*attached*)	*Board Support*
	The Committee is asked to note the updated Action Log and approve the closed actions.	
7	**PLANNING/STRATEGY**	
7.1	Change Lifecycle Survey Results *(attached)*	*H Martin*
7.2	Strategic Planning and Change Committee Oversight of Service Delivery Review *(verbal)*	*T O'Donnell*
	The Committee is asked to scrutinise these reports.	
8	**CHANGE**	
8.1	Portfolio Progress Report - Data as of 29 June 2026 (*attached*)	H *Martin*
	The Committee is asked to scrutinise this report.	

Please note that the meeting will be recorded for minute taking purposes only.

9 FINANCE

9.1 Portfolio Finance and Performance Report - Data from Portfolio Report 26/27 P3 *(attached)* — *H Martin*

The Committee is asked to scrutinise this report.

10 COMMITTEE ROLLING FORWARD PLANNING — *T O'Donnell*

10.1 Committee Forward Plan *(attached)*

10.2 Items for Consideration at Future IGF, Board and Strategy Day meetings

11 REVIEW OF ACTIONS — *Board Support*

12 DATE OF NEXT MEETING

12.1 The next full public Committee meeting is scheduled to be held on Thursday 5 November 2026.

Report for Information Only:

- Internal Audit Draft Terms of Reference – Change Management *(attached)*

PRIVATE SESSION

13 MINUTES OF PREVIOUS PRIVATE MEETING: — *T O'Donnell*

13.1 Thursday 14 May 2026 *(attached)*

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

14 PRIVATE ACTION LOG *(attached)* — *Board Support*

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

15 PEOPLE, PAYROLL, FINANCE CLOSURE REPORT *(attached)* — *P McGovern*

The Committee is asked to scrutinise this report.

16 CORPORATE BUSINESS SOLUTIONS *(attached)* — *L McGeough*

This report is for information only.

17 ROSTERING REPORT *(attached)* — *E Tinto*

The Committee is asked to scrutinise this report.

Please note that the meeting will be recorded for minute taking purposes only.

Agenda Item 5

PUBLIC MEETING – STRATEGIC PLANNING AND CHANGE COMMITTEE

THURSDAY 14 MAY 2026 @ 1000 HRS

VIA MS TEAMS

PRESENT:
Therese O'Donnell (TOD), Chair
Angiolina Foster (AF), Deputy Chair
Stuart Ballingall (SJB)
Paul Stollard (PS)
Tim Wright (TW)

IN ATTENDANCE:

Andy Watt (AW)	Deputy Chief Officer
Richard Whetton (RW)	Head of Governance and Compliance
Curtis Montgomery (CM)	Head of Strategy and Change
Heather Martin (HM)	Centre of Excellence Manager
Richard Warren (RWa)	Business Change and Implementation Manager
Mhairi Wylie (MW)	Chair of SFRS Board
Christopher Casey (CC)	Board Support Manager
Heather Greig (HG)	Board Support Executive Officer
Margaret Kyle (MK)	Minutes

OBSERVERS:
Andrew Smith, Board Member

1 CHAIR'S WELCOME

1.1 The Chair opened the meeting and welcomed those in attendance. Attendees 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 FOR ABSENCE

2.1 Sarah O'Donnell, Deputy Chief Officer (Corporate Services)
Mark McAteer, Director of Governance, Strategy & Change
Deborah Stanfield, Interim Director of Finance, Digital and Infrastructure
Lynne McGeough, Head of Finance and Procurement

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

3.1 The Committee agreed to defer the People, Payroll, Finance Closure Report item to the next meeting due to absence of key members. The previous draft private minutes and action log would be discussed as per the agenda.

3.2 During the meeting, the Committee agreed that the Rostering Project would be discussion further within the Private Session.

4 DECLARATION OF INTERESTS

4.1 There were no declarations of interest noted.

5 MINUTES OF PREVIOUS MEETINGS:

5.1 Thursday 5 February 2026

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

5.2 Thursday 16 April 2026 (Special)

5.2.1 The minutes were agreed as an accurate record of the meeting

5.3 **The minutes of the meetings held on 5 February 2026 and 16 April 2026 were approved as a true record of the meetings.**

6 ACTION LOG

6.1 CC presented Strategic Planning and Change Committee (SPCC) Rolling Action Log for consideration. The Committee were asked to review and approve the removal of (9) actions noted as complete, note (2) actions categorised as green status, and note (0) actions categorised as yellow status.

Action 7.1.15 SFRS Strategic and Financial Planning Process (05/02/2026): The Committee requested clarification on the update for this action expressing confusion about its practical implications and whether this action was now superseded or redundant and whether uncertainty remained regarding the 2026-27 Financial Plan. CC explained this action related to a proposed meeting in March that did not occur, and the relevant paper was subsequently addressed at the Board, therefore recommended the action be closed as redundant and apologised for not doing so before this meeting. In respect of the 2026-27 financial position, AW reported that the budget had been set and was not aware of any outstanding uncertainties, reassuring Committee that no significant changes were expected. The Committee noted the explanation and agreed the action should be closed.

Action 7.1.17 SFRS Strategic and Financial Planning Process (05/02/2026): The Committee inquired whether the scheduled meeting for the Committee aligned with the planning cycle. CM explained that due to changes in the schedule, it would be prudent to review the dates and ensure alignment. This action would be reopened and reassigned to CM, who would review and verify alignment of meeting dates with the planning schedule.

Action 11.1.3 SFRS Project Lifecycle Report (05/02/2026): The Committee requested an updated regarding user feedback on the project Life Cycle Report. CM confirmed survey had been issued, and a short life working group were gathering feedback, noting that most misunderstandings were related to rollout and training. Feedback to date had been positive about the robustness of the process, and the working group would conclude with findings to be presented. The Committee requested that the survey results and findings from the working group be presented at the next meeting (August 2026).

6.2 **The Committee noted the updated Action Log and approved the removal of completed actions.**

7 COMMITTEE ASSURANCE STATEMENT

7.1 The Chair introduced the Annual Committee Assurance Statement, questioning whether it should be signed by the current Chair or previous Chair. RW clarified it is standard to use the current chair's name, but the statement should reflect the previous Chair's tenure.

7.2 The Committee raised concern that the covering paper (section 5.9.1) was too self-satisfied, suggesting that it should reference the areas for improvement noted in the main statement.

7.3 The Committee agreed that section 5.9.1 with the covering report should be updated to include cross-reference to the areas of committed improvements.

ACTION: BST

7.4 **Subject the proposed amendment, the Committee approved the Committee Assurance Statement**

8 PLANNING /STRATEGY

8.1 Long Term Vision – Refresh Proposal and Method Statement

8.1.1 RWa presented the proposal to refresh the 10-year vision and develop a strategic roadmap, emphasising a light-touch approach with regular five-year reviews. He noted that the current vision, developed in 2021, remained outcome-focused but may require updating in light of the rapid changes since COVID. The refresh would help to ensure the vision remained relevant and acted as a living guide, supported by a strategic roadmap linking it to operational strategies, plans and subordinate documents.

8.1.2 RWa reported the timing was appropriate, as the drivers for change continue to evolve and delaying action would make future change more difficult. Referring to previous Strategic Leadership Team (SLT) sessions using the three-horizons model, RWa explained that the roadmap would cover 1–2, 3–5 and 5–10 year periods to align current and future change initiatives.

8.1.3 The Strategy and Change team would lead the refresh, with the Chief Officer as Senior Responsible Officer (SRO) and regular scrutiny from the Board and Committee. The SLT would approve the scope and content, with final sign-off by the Board.

8.1.4 The Committee held mixed views, questioning the value and resource implications, expressing concern about "planning" versus "doing", and whether the vision should change if aspirations remain constant. Some Committee members advocated for a light touch review whilst others supported the refresh and stressed the need for outward looking, opportunity focused thinking.

8.1.5 The Committee agreed the refresh should be light touch rather than a full redraft, with the strategic roadmap seen as the main benefit. It also agreed that resource implications should be considered, noting that the original vision had been shaped by the COVID context and that future challenges have since changed.

8.1.6 The Committee queried whether the five-month timeline for a light touch refresh was excessive. AW clarified that governance processes impacted on the timeline. It was suggested that the vision should be a rolling, iterative document, not tied to arbitrary 10-year cylces, highlighting the need to address evolving risk profiles and technology. RWa agreed a proposed five-year cycle within the 10-year horizon.

8.1.7 The Committee sought assurance that technical risk reviews such as those relating to construction, vehicles, etc were informing the vision. AW confirmed that an Emerging Risk Group were collaborating with partners and government to monitor and address these risks and the vision would set out the approach to managing them.

8.1.8 The Committee challenged the necessity for the long-term vision, noting that it was rarely referenced in comparison to the strategy and risked becoming another artefact without a joined-up planning process. AW acknowledged the need for further SLT and Board discussions on it purpose and format.

8.1.9 The Committee supported the refresh, emphasising the need for outward-looking, world-class future thinking rather than purely internal workshops, and called for balance between risk and opportunity in the vision. The Committee requested assurance that the three-horizons model, would be applied as an integrated rather than non-sequential, approach. CM to provide further offline discussion, with AF, on three horizons model.

ACTION: CM

8.1.10 **The Committee scrutinised this report.**

8.2 **Local Plan Development Progress Update**

8.2.1 RW provided an update on the revised Local Fire and Rescue Plans, noting these were a statutory requirement and that the Service was currently outwith timescales. Local review reports had been completed, with Aberdeenshire shared as an example. Local teams were now drafting plans using the revised template for consistency, whilst allowing for local needs and community planning arrangements. Plans would be finalised over the summer, followed by an eight-week public consultation. Deputy Assistant Chief Officer's (DACO) would review and sign off local reports, and SLT would review plans before submission to local Scrutiny Committees for approval.

8.2.2 The Committee noted their raised concerns regarding the timing of public consultation, stressing the need to reflect Service Delivery Review (SDR) outcomes within local plans and ensuring Local Senior Officers (LSO) were briefed. RW confirmed that this was the intention and acknowledged SDR could affect consultation and plan approval.

8.2.3 AW clarified that local plan objectives would remain unchanged regardless of SDR outcomes. Whilst resource deployment may change, the aims for local communities would remain the same. Communication plans would address this for Scrutiny Committees.

8.2.4 The Committee requested that insights from the local plan review would be shared with the Service Delivery Committee. RW agreed and suggested adding this to the IGF agenda for further discussion. The Committee supported this approach and noted minor typographical errors within the template, which RW acknowledged. (Captured under Item 11.2)

8.2.5 **The Committee scrutinised the report.**

9 CHANGE

9.1 **Portfolio Progress Report**

9.1.1 HM presented the updated report format including RAG dials for the overall portfolio and each programme. All four programmes had approved briefs, with over £50 million committed for the next three years. Most of the spend has been profiled for later this year and spend profiles would be closely monitored for slippage. HM provided Programme Highlights as follows:-

9.1.2 <u>Service Delivery Review</u>: Board decision scheduled; resourcing remains a challenge due to fixed-term contracts ending. New resourcing model was proposed for more flexibility and consistency.

9.1.3 <u>Corporate Services Review Programme</u>: Still being defined, work ongoing with focus on corporate business solutions and recruitment for a Senior Project Manager.

9.1.4 <u>Enabling Infrastructure</u>: New mobilising system remained on track, with a compressed timeline for integration platform (Boomi) but no escalation needed. Rostering timelines had been extended due to user acceptance testing issues; integration with NMS would be moved to phase two to de-risk delivery.

9.1.5 <u>Organisational Culture & Leadership</u>: Six initiatives, with briefs, were scheduled to be presented to the SLT for review and approval next month.

9.1.6 Ongoing resourcing challenges with fixed-term positions ending, especially for the Service Delivery Review. Conversations underway about contract extensions and backfill, but details were not shared in meeting. CM confirmed discussions are active and would provide updates as required.

9.1.7 AW noted Business Case for SDR team funding had been approved, but the team may change post-decision to match required skill sets.

9.1.8 The following specific project updates were provided to Committee.

9.1.9 Rostering: Timeline extended due to supplier and testing issues; Committee raised concerns about rostering project delays and requested more information. It was agreed that further discussion would be undertaken in the private session.

9.1.10 SCBA Procurement: Tender delayed by up to four weeks to allow for an external procurement review and reduce the risk of legal challenge. The review concluded sooner than expected, so the delay may be shorter than four weeks, with no further escalation required. Committee requested clarification on the procurement process and tender timing for the self-contained breathing apparatus (SCBA) project.

ACTION: CM

9.1.11 CM to provide further updates on contract extension discussions and resourcing to the Committee.

ACTION: CM

9.1.12 **The Committee scrutinised report and noted progress.**

10 FINANCE

10.1 Portfolio Finance and Performance Report

10.1.1 CM reported that most projects remained on track or were forecasting underspends, with time performance fully on target for included projects.

10.1.2 In terms of the Rostering project, cost status was Red for the current period due to Supplier delays and additional development costs but were expected to return to Green after re-baselining and approval of change request granting a 3-month extension. Benefits work was ongoing.

10.1.3 In terms of the New Mobilising System (NMS), costs status was green, with whole life forecast expenditure below the approved business case. Benefits validation had been completed, the toolkit had been approved and submitted to the Digital Assurance Office for go-live review. Key benefits included improved satisfaction, process simplification, enhanced system reliability and risk reduction.

10.1.4 In terms of the Emergency Services Mobile Communications Programme (ESMCP) In Vehicle Systems (IVS)**:** Cost status was green, with forecast costs below approved business case.

10.1.5 In terms of the Safety and Assurance Management Systems (SAMs)**:** Cost status was green, with final project costs to be confirmed once supplier agreement had been reached. Initial benefits include improved compliance, streamlined document management, and increased efficiencies.

10.1.6 In terms of the People, Payroll and Finance Project**:** Project agreed for closure; outline business case for replacement activity approved.

10.1.7 In terms of the Service Delivery Review Programme**:** Financial performance was amber, with an overspend due to uniformed wholetime firefighter staff costs charged without corresponding budget provision. Benefits development was underway.

10.1.8 In terms of the overall portfolio: Approved Business Case costs totalled £37.229 million, with forecasted cost at £35 million. Forecasted underspend was £1.45 million (variance 3.89%), within the 5% tolerance.

10.1.9 In terms of the KPIs: All projects reported 0% variance against approved duration after re-baselining.

10.1.10 It was noted that the SCBA Project would be included in the next report once documentation had been processed.

10.1.11 The Committee scrutinised this report.

11 COMMITTEE ROLLING FORWARD PLANNING

11.1 Committee Forward Plan

11.1.2 The Committee considered and noted the Forward Plan. The following items were to be added:

- Feedback from the overall Project Strategy (August 2026)

11.1.3
- Project Life Cycle Report (August 2026)

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

11.2 **Items for Consideration at Future IGF, Board and Strategy Day meetings**

11.2.1 The following items were added to the IGF Forward Plan

- Insights from the Local Plan review would be shared with the Service Delivery Committee.

12 REVIEW OF ACTIONS

12.1 Several formal actions were recorded during the meeting.

13. DATE OF NEXT MEETING

13.1 The next full Public Committee meeting is scheduled to be held on Thursday 6 August 2026.

These being no further matters to discuss, the public meeting closed at 1115 hrs.

(The Public Meeting broke at 1115 hrs and Private Session convened at 1120 hrs)

PRIVATE SESSION

14 MINUTE OF PREVIOUS PRIVATE MEETING: 5 FEBRUARY 2026

14.1 The Committee approved the minute as an accurate record.

15 PRIVATE ACTION LOG

15.1 There were no outstanding actions.

16 PEOPLE, PAYROLL, FINANCE CLOSURE REPORT

16.1 Deferred to August SPCC.

17 ROSTERING PROJECT

17.1 The **Committee noted report was for information only.**

There being no further matters to discuss, the Private meeting closed at 1145 hrs.

Agenda Item 6

STRATEGIC PLANNING AND CHANGE COMMITTEE – ROLLING ACTION LOG

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 their 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 7 actions. A total of 3 of these actions have been completed.

The Committee is therefore asked to approve the removal of the 3 actions noted as completed (Blue status), note 4 actions categorised as Green status and note no actions categorised as Yellow status on the action log.

STRATEGIC PLANNING AND CHANGE COMMITTEE
ROLLING ACTION LOG

Committee Meeting: 5 February 2026						
Agenda Item	**Actions Arising**	**Lead**	**Due Date**	**RAG Status**	**Completion Date**	**Position Statement**
7.1.17	**SFRS Strategic and Financial Planning Process:** Following circulation of the updated Planning Process Report, the Chair requested review of SPCC meeting dates to ensure alignment with Board scheduling and key planning milestones.	**CM** ~~BST~~	**August 2026** ~~May 2026~~			**Complete (14/05/2026):** The planning cycle is aligned to reporting data and is designed to ensure early sight of key planning milestones, where required special meetings can be utilised to enhance this. Meeting dates are set to facilitate this and to allow for adequate resourcing of Board and Committee meetings, however this is kept under continuous review. **REOPENED (14/05/2026):** CM to review meeting dates and look at alignment and report back to next meeting. **Update (06/08/2026):** Review in progress. It has been broadened to incorporate cadence of financial reporting.
7.2.6	**Development of Local Plans:** RW proposed providing Committee with ongoing updates on progress, statutory compliance, and local partner engagement throughout the development and consultation process.	**RW**	**May 2026**			**Update (14/05/2026):** Work is ongoing on the development of local plans, this is at an early stage, and further updates will be provided in due course. **Update (06/08/2026):** The full Board received a detailed update on Local Plan Development in July 2026, and there is no substantive new information to report since that update. Since approval to proceed with the review and redevelopment of Local

						Fire and Rescue Plans, review reports have been completed for all existing plans and draft revised Local Fire and Rescue Plans have been developed across all local authority areas. The draft plans and associated review reports are currently entering into the final stages of review by the Deputy Assistant Chief Officers to provide assurance ahead of public consultation. An eight-week public consultation is scheduled to commence in late-August 2026, with final plans expected to be submitted to local authority scrutiny committees for approval by the end of 2026, in line with the agreed programme. A more detailed update will be presented at the next SPCC meeting, including results from the consultation exercise.
11.1.3	**SFRS Project Lifecycle Report:** The Committee requested feedback from staff using the process to ensure it is practical and enabling, not burdensome, and requested that the Portfolio Office engage with staff about their experiences with the process.	**CM**	**May 2026**		**August 2026**	**Update (14/05/2026):** A short life working group drawn predominantly from Strategy and Change has begun targeted engagement to identify opportunities to streamline and improve the Change Lifecycle. The group also has representation from Ops to ensure any future ways of working are aligned with expectations from operational colleagues. A feedback survey has been issued across the Directorate, DaTs and all of the SLT to capture pain points, with 20 detailed responses received to date. The group will review this feedback at its next meeting to inform further

						discussion, with a full set of recommendations expected by July **Complete (06/08/2026):** A report providing and overview of the survey results and actions arising will be presented to the August meeting of Committee.

Committee Meeting: 14 May 2026						
Agenda Item	**Actions Arising**	**Lead**	**Due Date**	**RAG Status**	**Completion Date**	**Position Statement**
7.3	**Committee Assurance Statement:** The Committee agreed that section 5.9.1 with the covering report should be updated to include cross-reference to the areas of committed improvements.	**BST**	**August 2026**		**July 2026**	**Complete (06/08/2026):** Section 5.9.1 (Performance) of the cover report updated to reflect the areas requiring focus in 2026. Wording now reads "Information contained within this report deems that there are no significant gaps in the performance of the SPCC, however, the strategic and financial planning focus is an area where, to fully meet the expanded remit of the Committee, more work will be required during 2026."
8.1.9	**Long Term Vision – Refresh Proposal and Method Statement:** The Committee requested assurance that the three-horizons model, would be applied as an integrated rather than non-sequential, approach. CM provide further offline discussion, with AF, on three horizons model	**CM**	**August 2026**			**Update (06/08/2026):** Meeting between CM and AF being scheduled.
9.1.10	**Portfolio Progress Report:** Committee requested clarification on the procurement process and tender timing for the self-	**CM**	**August 2026**		**August 2026**	**Complete (06/08/2026):** Update included within Portfolio Progress Report.

	contained breathing apparatus (SCBA) project.					
9.1.11	**Portfolio Progress Report:** CM to provide further updates on contract extension discussions and resourcing to the Committee.	**CM**	**August 2026**			**Update (06/08/2026):** Resourcing paper to be presented to Strategic Leadership Team seeking approval to reduce reliance on fixed term contracts and establish four substantive roles utilising previously approved funding.

SCOTTISH FIRE AND RESCUE SERVICE

Strategic Planning and Change Committee

Report No: C/SPCC/15-26

Agenda Item: 7.1

Report to:	**STRATEGIC PLANNING AND CHANGE COMMITTEE**							
Meeting Date:	**6 AUGUST 2026**							
Report Title:	**CHANGE LIFECYCLE SURVEY RESULTS**							
Report Classification:	**For Scrutiny**	**Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to Board Standing Order 9**						
		A	B	C	D	E	F	G

1	**Purpose**
1.1	The purpose of this report is to provide the Strategic Planning and Change Committee (SPCC) with a summary of the results from the Change Lifecycle Survey and overview of next steps.
2	**Background**
2.1	As part of the Corporate Services Restructure, project management capabilities from Digital and Technology Service (DaTS) and the former Portfolio Office will be brought together within Strategy and Change. In preparation for this a short life working group was established with project delivery colleagues from both functions to review ways of working within both teams, identify what was working well and what was not in relation to governance and change lifecycle processes, and recommend areas for simplification, improvement and greater consistency.
2.2	In February the Strategic Planning and Change Committee asked for staff to be surveyed on the usability and effectiveness of the current Strategic Change Lifecycle Framework. This was incorporated into the remit of the working group. A survey was issued on 14 April 2026 to: • Strategic Leadership Team (SLT) • Senior Management Board (SMB) • Colleagues working on change within DaTS • Strategy and Change function.
2.3	It was live for three weeks.
3	**Main Report/Detail**
3.1	Ninety direct requests were sent inviting stakeholders to complete the survey. There was a response rate of 33% with thirty responses received from the following groups of stakeholders: • 6 Senior Responsible Owners (SROs) including 2 members of SLT • 5 DaTS colleagues • 7 Change Delivery Roles • 6 Project stakeholders • 6 Support staff

3.2	The survey focused on four key areas: • Awareness of how SFRS delivers change • Consistency of approach to change across SFRS • Governance and decision-making • Access to guidance, templates and supporting documentation
3.3 3.3.1	**Awareness of How SFRS Delivers Change** 60% of respondents felt they had a good awareness of how change was delivered with this response aligned to those that engage with the change process on a regular basis such as senior leadership and change delivery roles. Those that had a limited awareness were required to engage with change on an episodic basis. The results point towards a structural visibility gap with people closest to change delivery knowing the process whilst those only required to engage with it occasionally struggling to access the requisite guidance and information.
3.3.2	This aligns with the outcome of the Change Management Audit where a recommendation was made to develop a repository on iHub with supporting guidance around the change lifecyle and associated templates. This recommendation is being actioned with materials developed and in the process of being placed on the intranet.
3.4 3.4.1	**Consistency of Approach to Change Across SFRS** 50% of respondents felt there was a fairly consistent approach to change across the Service with this response aligned to those in senior leadership, programme management and governance-aligned roles. For those who had less day-to-day engagement with decision-making processes, there appeared to be a lack of consistency or they felt unable to give an informed response and skipped this part of the survey.
3.5 3.5.1	**Governance and Decision-Making** 70% of respondents believe decision-making routes for change are relatively clear although this was caveated with strong feedback that there was a need to repeatedly check which forum or authority a decision needed to be requested from. Nearly a third of participants found governance routes confusing with clarity increasing with proximity to formal governance while some delivery and operational roles experienced opacity and fragmentation.
3.6 3.6.1	**Access to Guidance, Templates and Supporting Documentation** 55% of respondents found change guidance and templates easy to access, with this type of response aligned to those directly involved in the delivery of change. For everyone else it was difficult to find information around how to deliver change or templates to support them with the process.
3.6.2	This reflects templates and guidance being held in locations only accessible to those directly involved in change with limited visibility available to those who do not work in Strategy and Change or the Digital and Technology Service.
3.7 3.7.1	**What Stakeholders Need from a Change Lifecycle and Governance Processes** Survey participants were asked to identify what would help them define and deliver change effectively, support them through the decision-making process and ensure outcomes could be adequately demonstrated. Responses fell into a number of categories.
3.8 3.8.1	**Support and Tools Needed to Help Respondents Deliver Change Effectively** Items identified in this area included: • Clear governance, frameworks and guidance • Resource and capacity visibility • Skills, capability and training • Leadership support and sponsorship

	• Collaboration, communication and stakeholder engagement tools • Consistent reporting and performance insight • Accessible guidance and templates
3.9 3.9.1	**Suggested Improvements to Support Decision-Making** Respondents felt the following would help them navigate the governance process: • Defined roles and responsibilities • Single entry point for change • Proportionate and scalable governance routes • Improved transparency of approval process, communication of decisions made and feedback when decisions are delayed or proposals rejected • Simple, user-friendly process
3.10 3.10.1	**Core Business Case Components** When considering business cases and the justification for change, respondents wanted to see the following clearly outlined and sufficient detail to give confidence that successful delivery would be achieved. • Clear articulation of the problem or need • Strategic alignment and justification • Defined scope, objectives and outcomes and how success will be measured • Whole-life costs, funding requirements, affordability and financial risks • Expected benefits and how these will be tracked and realised over time • Required skills, resource and available capacity to deliver change together with anticipated impact on business-as-usual • Risks, dependencies and assumptions and how these will be addressed • Timescales and delivery approach which provide assurance that plans are realistic and credible
3.11 3.11.1	**Risk Management** The perception was that risk management was present with effectiveness varying between structured projects, programmes, and established governance environments where risks are routinely identified and reviewed, and smaller, operational, or cross-functional change where risks may be under-identified or managed informally. Feedback received suggested that clearer ownership of risks, defined escalation routes, and stronger accountability would improve effectiveness and confidence.
3.12 3.12.1	**Closure Process and Benefits Realisation** Participants gave feedback on project closure and benefits realisation, highlighting elements that they would expect to be incorporated within the change lifecycle and associated processes. • Structured handover to Business as Usual with clear ownership, accountability, and confirmation that BAU teams are ready to operate and support the change • Formal confirmation that the business has accepted the change and understands ongoing responsibilities. • Assurance that the change is embedded and effective • Lessons learned to be captured meaningfully, shared widely, and used to inform future change • Closure documentation incorporating outcomes, decisions, residual risks, benefits status, and any actions carried into BAU. • Confirmation whether intended benefits have been delivered, including reviews after a period of BAU operation • Ongoing tracking of benefits beyond formal closure • Emphasis on financial value and return on investment • Preference for blended evidence using quantitative data, measures and metrics alongside qualitative and narrative insight to provide a balanced and credible view of impact.

3.13 3.13.1	**Next Steps** Priority areas that are being progressed following the survey include: • Review of Change Governance – recommendations will be presented to SLT in August • Change Lifecycle Framework and supporting guidance and templates to be made available on iHub by end of September (dependent on availability of resource within Communications Team) • Completion of Benefits Toolkits for all initiatives and update to performance reporting to incorporate progress reporting on realisation • Review of change processes and engagement with other public sector organisations to ensure proportionality and alignment with Scottish Government requirements and industry best practice. • Implementation of project sizing tool and tailoring of project management approach to match size and complexity.
4	**Recommendation**
4.1	The Strategic Planning and Change Committee is asked to: • Scrutinise the survey feedback • Note actions in progress • Give direction on any additional actions that need to be progressed
5	**Key Strategic Implications**
5.1 5.1.1	**Risk Appetite and Alignment to Risk Registers** In relation to new ways of working and technologies, that may lead to enhanced or improved operational activities and more efficient outcomes, SFRS has an Ambitious appetite.
5.2 5.2.1	**Financial** There are no direct financial implications arising from this report.
5.3 5.3.1	**Environmental & Sustainability** There are no direct key environmental & sustainability implications arising from this report.
5.4 5.4.1	**Workforce** There are no direct workforce implications arising from this report.
5.5 5.5.1	**Health & Safety** There are no direct Health and Safety implications associated with this report.
5.6 5.6.1	**Health & Wellbeing** The are no direct health and wellbeing implications associated with this report.
5.7 5.7.1	**Training** There are no direct training implications associated with this report.
5.8 5.8.1	**Timing** The review of change governance will be completed in July 2026 and proposals presented to SLT for approval in August 2026. The completion of benefits toolkits has been mandated and these are expected to be completed by end of November. Guidance and templates have been developed for the intranet and these will be uploaded over the next two months with the expectation they will be available to the wider organisation by October 2026.
5.9 5.9.1	**Performance** There are no direct performance implications associated with this report.

5.10 5.10.1	**Communications & Engagement** There are no direct key communication and engagement implications arising from this report.	
5.11 5.11.1	**Legal** There are no direct key legal implications arising from this report.	
5.12 5.12.1	**Information Governance** A Data Protection Impact Assessment is not required as there is no personal/sensitive information on this report.	
5.13 5.13.1	**Equalities** An Equalities Impact Assessment is not required as there is no personal/sensitive information on this report.	
5.14 5.14.1	**Service Delivery** There are no direct key Service Delivery implications arising from report.	
5.15 5.15.1	**Prevention** There are no direct key Prevention implications arising from this report.	
6	**Core Brief**	
6.1	Not applicable	
7	**Assurance (Board/Committee Meetings ONLY)**	
7.1	**Director:**	Mark McAteer, Director of Governance, Strategy and Change
7.2	**Level of Assurance:** **(Mark as appropriate)**	~~Substantial~~/**Reasonable**/~~Limited/Insufficient~~
7.2	**Rationale:**	The purpose of the survey and short-life working group is to review the adequacy and effectiveness of change management and project delivery procedures and governance. Some weaknesses have been identified in governance and control procedures but they are not of a significant nature and will be addressed through agreed improvements.
8	**Appendices/Further Reading**	
	N/A	

Prepared by:	Heather Martin, Change Centre of Excellence Manager
Sponsored by:	Sarah O'Donnell, Deputy Chief Officer (Corporate Services) Andy Watt Deputy Chief Officer
Presented by:	Heather Martin, Change Centre of Excellence Manager

Links to Strategy and Corporate Values

This report provides a summary of the recent survey on change and governance processes within SFRS. By incorporating user feedback into ways of working, this will improve SFRS performance and making us more effective and efficient in the delivery of change.

Governance Route for Report	Meeting Date	Report Classification	Meeting Approvals/Outcomes
Change Portfolio Progress Group	*20/07/2026*	*For Scrutiny*	*Include breakdown of who survey was sent to. Approved to go forward to SPCC*
Strategic Planning and Change Committee	*06/08/2026*	*For Scrutiny*	

SCOTTISH FIRE AND RESCUE SERVICE

Strategic Planning and Change Committee

Report No: C/SPCC/16-27

Agenda Item: 8.1

Report to:	**STRATEGIC PLANNING AND CHANGE COMMITTEE**	
Meeting Date:	**6 AUGUST 2026**	
Report Title:	**PORTFOLIO PROGRESS REPORT – DATA AS OF 29 JUNE 2026**	
Report Classification:	**For Scrutiny**	**Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to Board Standing Order 9** A B C D E F G

1	**Purpose**
1.1	The purpose of this report is to provide the Strategic Planning and Change Committee (SPCC) with an overview of delivery progress to date of the Strategic Change Portfolio focusing on time, cost, resource, benefits realisation, business readiness and the management of key risks to successful delivery.

2	**Background**
2.1	The Scottish Fire and Rescue Service (SFRS) has a comprehensive strategic change portfolio which is designed to enhance the efficiency, effectiveness, and sustainability of the fire and rescue service across Scotland. The portfolio is structured around four distinct programmes: Service Delivery Review (SDR), Enabling Infrastructure (EI), Corporate Services Review (CSR) and Organisational Culture and Leadership (OCL).
2.2	**Service Delivery Review**
2.2.1	The central objective of the Service Delivery Review programme is to implement changes to the SFRS station and appliance footprint and duty systems to match operational resources with risk and demand. Expected benefits include increased on-call appliance availability, avoidance of capital spend and freeing up resources to invest more in targeting Prevention and Training, aligned to need/risk.
2.3	**Corporate Services Review**
2.3.1	The Corporate Service Review programme aims to enhance the administrative and support functions of the SFRS. This involves integrating services, streamlining processes, improving governance, and ensuring that corporate services are aligned with the strategic objectives of the organisation.
2.4	**Enabling Infrastructure**
2.4.1	The Enabling Infrastructure programme will deliver sustainable, user focussed, integrated systems, technology and infrastructure to enhance the safety and wellbeing of our people and communities.
2.5	**Organisational Culture and Leadership**
2.5.1	The Organisational Culture and Leadership Programme will drive cultural and leadership transformation across SFRS. Its scope includes values, standards and behaviours; diversity, inclusion and workforce development; leadership and talent; engagement, communication and wellbeing; pay, reward and agile working.

3	Main Report/Detail
	
3.1	Overall health across the portfolio is Amber.
3.2	The key milestone of Board decision on the Service Delivery Review options was achieved on 22 June. The portfolio is entering a period of intense delivery with multiple outputs scheduled for completion over the next three months. These include completion of Full Business Cases and associated procurement activities for Self-Contained Breathing Apparatus and Corporate Business Solutions, first Go-Live date for the Computer Aided Dispatch (CAD), the continued rollout of In-Vehicle systems, and resolution of the Roster issues.
3.3	The implementation timeline for the CAD remains at risk and further detail is provided in para 3.12.1. A timeline for the implementation of the Roster module together with associated costs will be agreed in September with implementation expected to move into 2027. These risks together with the volume of work scheduled for the next three months have significant implications across the Portfolio and are contributing to the Amber status for Time and Risk.
3.4	Within the portfolio a business-critical risk remains for the delivery of the Roster module. This was scheduled for end of September 2026 in line with the end of the current system contract. Challenges have been experienced around supplier performance and quality of the product. This has led to significant delays and a solution will not be ready for the end of the current system contract. The Roster module is required for the crewing of appliances and is critical to the delivery of the Service. Whilst business continuity plans are in place and manual crewing processes are available, it would not be viable to use these for more than a few weeks. A change request will be submitted to the Strategic Leadership Team (SLT) in August for approval to extend the use of the current system until end of March 2027. A workshop with the new system supplier to develop a revised implementation timeline will take place in August and a change request will be submitted to SLT in September seeking approval for this together with any associated costs.
3.5	Other key risks to the wider delivery of strategic change include: - Insufficient funding being available to meet all of the planned Portfolio investments which may limit the pace of change - Limited demonstration of benefits realised against strategic outcomes - Insufficient resource and skills available to effectively deliver change - Lessons not being learned from initiatives and the same issues arising in subsequent projects leading to increased costs, delays and limited benefit realisation.
3.6	Risk mitigations are in place including the ongoing monitoring and scrutiny of portfolio spend by CPPG, the development of benefit profiles and realisation plans at an earlier stage in the change lifecycle, and the use of robust processes for business readiness planning together with the use of independent scrutiny and assurance. A detailed overview of portfolio risk is provided in Appendix D.

3.7 3.7.1	**Portfolio Resourcing** Across the portfolio, availability of resource has been identified as a risk to the pace of delivery. There are three components to the risk. The first relates to core project resourcing, the second to the wider organisational capacity to deliver change, and the third to the health and wellbeing of those involved in change.
3.7.2	Most approved initiatives have agreed business cases in place that include funding for project management and project teams where required. Whilst this provides certainty to individual initiatives, it limits the opportunity to flex resource capacity across the portfolio to meet fluctuating demand and can lead to delays in progressing initiatives following their approval.
3.7.3	To address some of the challenges associated with this a shared model of support has been agreed with each programme receiving 0.5 FTE of Programme Officer support. The Rostering Senior Project Manager will also split their time equally between Rostering and Organisational Culture and Leadership from mid-July onwards. Due to the technical complexities that have emerged around Rostering and the need for supplier development, a technical project manager will then be recruited on a fixed term basis to provide additional support to Rostering.
3.7.4	Core project management gaps that have been identified include: • From August onwards, Service Delivery Review will have no project management resource attached to it. • The successful recruitment to the Corporate Business Solutions Senior Project Manager role has created a need to identify project management resource for the Safety and Assurance Management System (eSams). Efforts to identify capacity within the organisation have not been successful to date. • Both the Training and CivTech initiatives remain without project management support. • The Assistant Manager role within NMS fell vacant in mid-June. The NMS Team has advised that this will not impact delivery of the remaining elements of the first phase. Suitable resource will need to be identified for the second phase of the project.
3.7.5	To mitigate this risk and address some of the gaps identified above, a paper will be presented to the Strategic Leadership Team seeking approval to use Strategy and Change functional budget to create substantive project delivery positions following the end of fixed term positions. These would be advertised in line with SFRS Recruitment policy and ensure there is more flexibility around how change resource is deployed across different initiatives.
3.7.6	Organisational constraints continue to be experienced around the volume of change it is possible to deliver at any one time and there is a risk this may get worse. The SRO of Enabling Infrastructure has highlighted it as an area of key concern and multiple teams have cited workload pressures as being a leading cause of sickness and absence. A resource management approach is under development and will be presented to CPPG for consideration and input to reduce the likelihood and impact of this risk.
3.8 3.8.1	**Benefits Realisation** There is a risk across the portfolio that achievement of benefits cannot be demonstrated because they have not been sufficiently defined resulting in an inability to effectively show how change has contributed to the delivery of strategic outcomes. SFRS has a benefits toolkit that supports the definition, validation and mapping of benefits realisation. The completion of the benefits toolkit for each initiative was mandated by CPPG in June. Projects in delivery without completed toolkits include: - Rostering - Safety and Assurance Management System - ESMCP/In-Vehicle Systems

3.8.2 Self-Contained Breathing Apparatus and Corporate Business Solutions will both need to complete toolkits as part of their Full Business Cases in early September. Initial benefits scoping for each of these initiatives has begun.

3.8.3 Service Delivery Review will incorporate benefits definition and validation as part of the planning for the next phase.

3.9 Details of individual initiatives are provided in the Portfolio Progress Dashboard in Appendix A. A summary of business readiness for the New Mobilising System, Rostering, Corporate Services Restructure and the Safety and Assurance Management System is included in Appendix C.

3.10 **Service Delivery Review**

3.10.1 The overall programme status is Amber. Key achievements this reporting period include:

- Finalisation and circulation of Board materials
- Extensive stakeholder engagement in preparation for the Board decision
- Board decision on the options

3.10.2 Following the Board decision on 22 June, the consultation phase of the programme will close. A survey to capture lessons learned will be circulated to those directly involved in the consultation including the programme team, programme board and senior stakeholders. A plan for progressing the options is under development and the proposed planning approach will be presented to CPPG on 20 July. Communications and engagement will continue to be critical to the success of the programme and guidance and support from the Communications Team will continue to be required.

3.10.3 Resource is Amber due to most of the programme team being on fixed term contracts which have either ended or will do so by the end of August. The planning and pace of progress of the next phase of the programme will be dependent on the level of resourcing available. If recruitment is required, it is likely that it will be several months before all resources are in place. Work is ongoing to develop a detailed programme plan and as part of that an assessment will be undertaken of resource requirements, where these can be met internally and whether any additional resource and associated funding will be required.

3.10.4 The Alternative Duty Systems workstream has been delayed due to negotiations with representative bodies taking longer than anticipated. It is likely that negotiations will conclude after the contracts for project management and People Manager support end and appropriate support will be put in place to support conclusion of this workstream.

3.11 **Corporate Services Review**

3.11.1 The overall programme status is Amber. Key achievements this reporting period are:

- Identification of preferred route to market for Corporate Business Solutions (CBS)
- Recruitment of Senior Project Manager for CBS
- Go-live of Service Search and Service Management Framework on iHub

3.11.2 Key upcoming activities for Corporate Business Solutions include progressing through the Digital Assurance Office Business Justification gate and recruitment of the project team. The Full Business Case for the project will need to be completed by mid-September to utilise the preferred procurement route which presents a compressed timeline. Availability of resource will continue to be a risk to delivery until all project roles are filled. There is an Amber risk around the achievability of the profiled spend for this financial year due to the lead-time for recruitment to roles.

3.11.3 Further engagement is underway with Heads of Function, Representative Bodies and People colleagues on options around the Pay and Reward Framework Review. A proposal will be developed for SLT and taken through governance in September.

3.11.4 An initial workshop on service redesign will be held at the August Programme Board meeting. A paper will be presented to SLT in July seeking approval for resource to take forward the Digital, Data and Technology Strategy.

3.11.5 A key risk to the programme is the ability to identify appropriate benefits measures and lack of baseline data and owners. Without this it will be difficult to measure the impact of changes made and measure project and programme performance. Project benefits will need to be outlined in detail in the Full Business Case for Corporate Business Solutions in order to ensure there is a robust case for change and there is a risk that this will not be achievable within the required timescales.

3.12 **Enabling Infrastructure**

3.12.1 The overall status of the programme is Amber. Key achievements this reporting period are:

- Progress through Programme Stage Gate to Delivery;

	• Completion of Train the Trainer for NMS Computer Aided Dispatch (CAD); • Go/No-Go for ESMCP/ In-Vehicle Systems North rollout approved to commence
3.12.2	The New Mobilising System continues to report compressed timescales for the implementation of the CAD. A resolution has been identified for the issue with SFRS' integration platform for the CAD (Boomi) but it will not be in place in time to maintain the current Go-Live schedule. The Project Team are working with Digital and Technology (DaTS) colleagues to try and align timelines and the issue has been escalated to the Programme Board. A risk spotlight is included at Appendix E. A new dependency with In-Vehicle Systems has also been identified. This requires a software update to be rolled out to Mobile Device Terminals for the NMS pilot to then take place in August. This work is being progressed and prioritisation of resource will be sought if needed to maintain timelines.
3.12.3	The timeline for implementation of the Roster module is no longer achievable and supplier performance is a significant issue. Escalation has been undertaken with support from the Strategic Leadership Team. There is now clarity around arrangements for an interim solution and this will be finalised following presentation of a Change Request to SLT in August. A workshop with the supplier is scheduled for early August to finalise a revised implementation plan. A request has also been received from Business Support via Unison to re-run pilot for contract changes. There is a risk a collective grievance may be raised if this is not actioned. Lessons are being learned from this and incorporated into SFRS' business readiness approach and change management planning for future projects including Corporate Business Solutions.
3.12.4	The tender for Self-Contained Breathing Apparatus through a recently published framework closed on 10 July with evaluation commencing shortly afterwards. Key risks currently relate to the required fleet modifications for the new apparatus and the need to tender for this service. Whilst there is not an available framework for this service, timescales for this have been received from Procurement that indicate the process will be swifter than initially anticipated. The success of the project will be heavily dependent on availability of Fleet resource. The project is profiled to spend £4.172 million (Capital) and £906K (Resource) this financial year. The achievability of this spend will be clearer around September on the conclusion of the procurement exercise and confirmation from the preferred supplier on delivery timescales.
3.12.5	Programme resourcing remains a risk to delivery of key initiatives. There is no project management support available for the Training System and the CivTech initiatives. Rostering continues to operate with a small project team and this will reduce further in size due to retirement and personnel moves.
3.12.6	In-Vehicle Systems is progressing well with vehicle upgrades being rolled out in the East and North. SFRS is working closely with the supplier to resolve identified issues prior to User Acceptance Testing commencing in the West.
3.13	**Organisational Culture and Leadership** 

3.13.1	The overall status of the programme is Green. Key achievements this reporting period are: • Invitations to Advisory Board issued • Approval to invest in two key roles: Lead People Advisor and Organisational Development Adviser
3.13.2	The programme includes the following key culture and leadership initiatives: • Leadership and Management Development • Employee Voice, Networks Review • Inclusive Values-Based Hiring Practices • Enhancing Female Firefighter Experience: Facilities, Kit and Equipment • SFRS Values Review • Safety, Standards, and Performance • Employee Voice: Engagement and Partnership Working.
3.13.3	Funding of £320k for the programme has been included in the 2026/27 budget to support delivery and part of this will be used to invest in two roles within People. Project and programme support will be provided by the Strategy and Change function.
3.13.4	The first meeting of the Advisory Board will be held on 15 July.
4	**Recommendation**
4.1	The Strategic Planning and Change Committee is asked to: • Scrutinise the contents of the current report; and • Note the progress and associated constraints across the Change Portfolio.
5	**Key Strategic Implications**
5.1 5.1.1	**Risk Appetite and Alignment to Risk Registers** SFRS has an Ambitious Appetite in relation to exploring new delivery models, specifically related to SSRP and utilising various data and information sources. This is reflected in the scale of ambition within the Strategic Change Portfolio and the volume of change scheduled for delivery over the coming months. Each project and programme maintain a risk register and risks are escalated where necessary through the relevant governance routes.
5.2 5.2.1	**Financial** The overall spend for the Strategic Change Portfolio over the next three Financial Years per approved Business Cases is £51.66Million. Spend for FY2026/27 is £11.45Million.
5.3 5.3.1	**Environmental & Sustainability** There are no direct key environmental & sustainability implications arising from this report.
5.4 5.4.1	**Workforce** Resource capacity has been highlighted as a risk across the whole of the portfolio. There are approved business cases in place for many initiatives that provide funding for dedicated project teams. This funding model does limit options for utilising resources across multiple initiatives. Multiple fixed-term contracts for project management and support are scheduled to end in the Summer. Resource requirements for the portfolio have been quantified and options for optimising funding and resource capacity will be presented to SLT for consideration and approval on 22 July.
5.5 5.5.1	**Health & Safety** There are no direct Health and Safety implications associated with this report.

5.6 5.6.1	**Health & Wellbeing** The Health and Wellbeing impact on colleagues who are delivering change has been escalated by the SRO of Enabling Infrastructure. Pressures are being experienced across multiple areas leading in some cases to increased levels of sickness and absence.	
5.7 5.7.1	**Training** Training resource will be required across various projects. The development of Training Strategies and Training plans form part of Business Readiness planning.	
5.8 5.8.1	**Timing** There are no direct timing implications arising from this report.	
5.9 5.9.1	**Performance** Portfolio performance is monitored on a monthly basis and presented to the Change Portfolio Progress Group. Overall portfolio health is Amber with development of more comprehensive plans in progress which will provide greater confidence and visibility around achievability.	
5.10 5.10.1	**Communications & Engagement** There are no direct key communication and engagement implications arising from this report.	
5.11 5.11.1	**Legal** There are no direct key legal implications arising from this report.	
5.12 5.12.1	**Information Governance** A Data Protection Impact Assessment is not required as there is no personal/sensitive information on this report.	
5.13 5.13.1	**Equalities** An Equalities Impact Assessment is not required as there is no personal/sensitive information on this report.	
5.14 5.14.1	**Service Delivery** There are no direct key Service Delivery implications arising from report.	
5.15 5.15.1	**Prevention** There are no direct key Prevention implications arising from this report.	
6	**Core Brief**	
6.1	Not applicable	
7	**Assurance (Board/Committee Meetings ONLY)**	
7.1	**Director:**	Mark McAteer, Director of Governance, Strategy and Change
7.2	**Level of Assurance: (Mark as appropriate)**	~~Substantial~~/**Reasonable**/~~Limited/Insufficient~~
7.2	**Rationale:**	The report is based upon the regular highlight reporting by each project and programme and the monitoring of progress across the portfolio. Time, quality and resources are reviewed based on a red and amber escalation RAG status, including key dependencies, risks and benefits realisation.
8	**Appendices/Further Reading**	
8.1 8.2	Appendix A – Portfolio Progress Dashboard. Appendix B – Portfolio Plan on a Page	

8.3 8.4 8.5 8.6	Appendix C – Business Readiness Report Appendix D – Portfolio Risk Report Appendix E – NMS Issue Spotlight Appendix F – Portfolio Summary Spend Profile

Prepared by:	Heather Martin, Change Centre of Excellence Manager
Sponsored by:	Sarah O'Donnell, Deputy Chief Officer (Corporate Services) Andy Watt, Deputy Chief Officer
Presented by:	Heather Martin, Change Centre of Excellence Manager

Links to Strategy and Corporate Values
This report provides an overview of some of the key enablers for SFRS becoming more innovative and achieving sustained investment in technology, equipment, estate and fleet, making us more effective and efficient.

Governance Route for Report	**Meeting Date**	**Report Classification**	**Meeting Approvals/Outcomes**
Change Portfolio Progress Group	*20/07/2026*	*For Scrutiny*	*Resource Risk for Service Delivery Review reduced from Red to Amber* *Lessons Learned to be reported on a quarterly basis to Change Portfolio Progress Group* *Rostering Benefits Realisation - progress on realising cashable benefits to be reported*
Strategic Planning and Change Committee	*0/08/2026*	*For Scrutiny*	

Appendix A – Portfolio Progress Summary Report June 2026

Programme Title	Overall Health	Time	Cost	Risk	Resource	Next Milestone	Planned Date	Latest Scheduled Date
Corporate Services Review Programme (CSR)	●	●	●	●	●	Service Redesign Workshop	09/07/2	06/08/26
Overall status is Amber. Time is Amber. Digital, Data, Technology and Data Governance and Pay & Reward Framework Review activities have moved to the right, creating schedule pressure and milestone slippage. Cost remains Green and spend is within allocated budget for current financial year. Budget is only allocated to Corporate Business Solutions (CBS) Project. Risk is Amber. An issue has been escalated from CBS to programme level around the availability of appropriate measures to demonstrate project success and benefits realisation. Resource remains Amber. Recruitment is continuing for key Corporate Business Solutions roles and a paper seeking approval for DDaT Strategy resource will be presented to SLT in July.								
Enabling Infrastructure Programme (EI)	●	●	●	●	●	Agree Roster Implementation Timeline	31/08/26	30/09/26
Overall status is Amber. Key initiatives are facing delivery challenges relating to resource availability, supplier performance and compressed timelines. Time is Amber. Whilst Computer Aided Dispatch Train the Trainer has been completed for the New Mobilising System, the timeline remains at risk with an ongoing issue that the integration platform BOOMI will not be ready before the agreed go-live dates. Discussions are continuing around available mitigations. The Roster module will not be delivered as planned. Escalations are ongoing with the supplier to agree a revised timeline. A change request will be submitted in August that will ensure appropriate contingency measures are in place to enable crewing of appliances. Cost is Green - there is no overall programme budget with costs managed by individual projects. Risk is Amber due to resource demand exceeding availability, challenging project timelines, and the risk that there will not be an automated Roster solution available post September 2026 due to late supplier delivery of the new system. Resource is Amber due to vacant roles, key project staff being unavailable or leaving, and no project management resource available to support the Training System and CivTech projects. Resource gaps have been formally escalated through programme governance.								
Service Delivery Review Programme (SDR)	●	●	●	●	●	Capture lessons learned	31/08/26	31/08/26
Overall status remains Amber. The Programme has achieved its Board approval milestone and the focus is now on capturing lessons learned from the consultation phase of the programme, phasing the approved options and detailed planning for the next phase. Time is Green and the programme is on schedule. Cost is Green. Both current-year and whole-life cost forecasts remain within acceptable limits. Risk is Amber. The programme continues to carry risks relating to demonstrating successful benefits realisation against those initially outlined, reputation and stakeholder response, and staffing and resourcing to plan the next phase of the programme. These remain the main threats to successful delivery. Resource is Amber. Approximately 80% of the programme team are temporary contracts and longer-term resource arrangements are being developed.								

Programme Title	Overall Health	Time	Cost	Risk	Resource	Next Milestone	Planned Date	Latest Scheduled Date
Organisational Culture and Leadership Programme	●	●	●	●	●	Inaugural OCL Advisory Panel Meeting	15/07/26	15/07/26

Programme status is Green overall, with strong progress made in establishing governance arrangements, strengthening delivery foundations, and advancing key workstreams. A major achievement during the reporting period has been the successful establishment of the OCL Advisory Panel, including member appointments, development of Terms of Reference, stakeholder engagement, and preparation for its inaugural meeting on 15 July 2026. The programme remains aligned with wider organisational change activity and continues to support sustainable culture and leadership improvements across the Service. Whilst some mobilisation and planning activities have taken slightly longer than anticipated, there are currently no significant impacts on programme objectives or outcomes. Cost is Green with £320k allocated in the 2026/27 budget and expenditure aligned to expectations. Identified programme risks include organisational capacity, specialist resource availability, alignment with other transformation programmes, and maintaining stakeholder engagement. These are being monitored on an ongoing basis. The programme is adequately resourced through dedicated People Directorate roles, supported by Strategy and Change colleagues and wider subject matter experts. No immediate resource constraints are affecting delivery.

<table>
<tr><th colspan="9">Corporate Services Review Programme (CSR)</th></tr>
<tr><th>Project Title</th><th>Overall Health</th><th>Time</th><th>Cost</th><th>Risk</th><th>Resource</th><th>Next Milestone</th><th>Planned Date</th><th>Latest Scheduled Date</th></tr>
<tr><td>Corporate Business Solutions (CBS)</td><td></td><td></td><td></td><td></td><td></td><td>Complete SG Business Justification review</td><td>03/07/26</td><td>03/07/26</td></tr>
<tr><td colspan="9">Overall status is Amber reflecting risks around benefits realisation, team resourcing and challenging timescales. Time is Amber due to compressed timescales and multiple key outputs required by October 2026 to enable the proposed timeline and allocated spend to be achieved. Cost is Green and spend is within agreed budget. Risk is Amber due to the proposed procurement route requiring completion by October 2026 to avoid significant delays and the scale of change this project will bring that will need to be mitigated by an extensive programme of transition planning and change management activities. Resource remains Amber with recruitment ongoing for four project roles. A Senior Project Manager has been appointed - this will be on a part-time basis until resourcing is identified for one of their current initiatives.</td></tr>
<tr><th>Enabling Initiatives</th><th colspan="6">Next Milestone</th><th>Planned Date</th><th>Latest Scheduled Date</th></tr>
<tr><td>Service Management</td><td colspan="6">Review gaps in Service Management Search</td><td>01/08/26</td><td>01/08/26</td></tr>
<tr><td colspan="9">Service Search and Service Management Framework are now live on iHub</td></tr>
<tr><td>Pay & Reward Framework Review</td><td colspan="6">Proposal to SLT</td><td>30/09/26</td><td>30/09/26</td></tr>
<tr><td colspan="9">Engagement with Heads of Function has been extended to include individual discussions on the options and recommendations and is scheduled throughout June and July. Engagement with the Trade Unions has been delayed to enable the Trade Unions more time to consider the content of the report and it is likely that the proposal to SLT will be deferred to September depending on Trade Union engagement and response.</td></tr>
<tr><td>Directorate Restructure</td><td colspan="6">Further moves dependent on senior appointments.</td><td>30/09/26</td><td>30/09/26</td></tr>
<tr><td colspan="9">Initial moves completed. Further moves dependent on Director and Head of Function recruitment and following return from absence in Digital, Data and Technology function.</td></tr>
<tr><td>Digital, Data, Technology and Data Governance</td><td colspan="6">OBC governance</td><td>31/08/26</td><td>31/08/26</td></tr>
<tr><td colspan="9">Progress of Outline Business Case is dependent on SLT investment decision. The OBC captures need for additional resources and work required on data governance and business intelligence. Paper to be presented to SLT seeking investment to take initiatives forward.</td></tr>
</table>

<table>
<tr><th colspan="9">Enabling Infrastructure Programme (EI)</th></tr>
<tr><th>Project Title</th><th>Overall Health</th><th>Time</th><th>Cost</th><th>Risk</th><th>Resource</th><th>Next Milestone</th><th>Planned Date</th><th>Latest Scheduled Date</th></tr>
<tr><td>Rostering</td><td>●</td><td>●</td><td>●</td><td>●</td><td>●</td><td>Change Requests approved by SLT</td><td>31/08/26</td><td>30/09/26</td></tr>
<tr><td colspan="9">Overall project status remains Red with ongoing system functionality issues, continued resource constraints and supplier delays pushing delivery into 2027. Time is Red due to the project being unable to complete User Acceptance Testing within the original schedule and implementation expected to now complete in 2027. Cost is Red. Whilst there is an underspend within the current year due to difficulties around recruiting approved project resources, whole-life cost is forecast to exceed the approved business case. Risk has increased to Red due to ongoing system functionality issues, extended delivery timescales, dependence on supplier development activity, and the risk of further delays affecting the crewing of appliances. Resource remains Amber due to the small size of the project team and the difficulty filling approved posts. Although additional support has been approved, only one of the planned Central Staffing resources is currently in place, while a key team member is retiring and further specialist support is still being sought.</td></tr>
<tr><td>New Mobilising System</td><td>●</td><td>●</td><td>●</td><td>●</td><td>●</td><td>Station Mobilising CCP Testing Complete</td><td>11/09/26</td><td>11/09/26</td></tr>
<tr><td colspan="9">Overall status is Amber. Delivery remains achievable but is subject to significant schedule and dependency risks. Time is Amber due to compressed timelines. Implementation sequencing with the integration platform, CAD configuration requirements, and In-Vehicle Systems (IVS) project dependencies continue to threaten delivery dates. Cost is Green - both in-year and whole-life project costs remain within approved forecasts and tolerances. Risk is Amber. There is an active issue that the current development delivery dates for the integration platform extend beyond CAD go-live dates. Further key risks relate to CAD configuration workload, and Mobile Data Terminal software upgrades by the IVS project. Resource is Amber due to the vacant Assistant Project Manager post and specialist resource dependencies.</td></tr>
<tr><td>ESMCP / In-Vehicle Systems</td><td>●</td><td>●</td><td>●</td><td>●</td><td>●</td><td>Completion of Samsung tablet Dock installs</td><td>01/06/27</td><td>05/12/27</td></tr>
<tr><td colspan="9">The overall programme status is Amber due schedule pressures although delivery progress is steady, with 110 vehicle upgrades completed and the North rollout underway. Time is Amber - some milestones have slipped as a result of supplier delays and wider programme dependencies. While delivery continues and plans have been re-baselined where required, schedule risk remains present. Cost is Green. The programme remains within its approved whole-life budget. However, the ESN Data First project is reporting Red for current-year cost performance due to a £476k underspend against forecast expenditure. Risk is Amber due to schedule slippage, technical integration challenges, dependency on other programmes, network readiness concerns and reliance on a small number of specialist technical resources. Mitigations are in place, but several risks remain outside direct SFRS control. Resource is Green. Resources are currently being managed effectively within the programme and project teams. While there are some specialist resource dependencies, no significant resource issues currently require escalation.</td></tr>
</table>

Project Title	Overall Health	Time	Cost	Risk	Resource	Next Milestone	Planned Date	Latest Scheduled Date
Safety and Assurance Management System (eSAMs)	●	●	●	●	●	System Demonstrations	31/07/26	31/07/26
Overall status is Green. Governance milestones have been completed on schedule, delivery activities are progressing as planned and risks are under control with no significant issues threatening delivery. Time is Green. Supplier configuration activities are progressing, planning milestones have been achieved, and delivery work continues in line with agreed timelines. Cost is Green. Costs remain within the approved business case and contract arrangements. Risk is Green. Project risks are currently low and are being managed through established controls. Resource is Green. Resources remain sufficient for current delivery activities.								
Self-Contained Breathing Apparatus	●	●	●	●	●	Submission of FBC to SLT for approval	15/09/26	15/09/26
Overall status is Amber. Time is Amber. Delivery timescales are at risk due to the fleet modification survey being on the project's critical path and potential impacts to implementation planning and Full Business Case development. Cost is Green. Costs remain within expectations at this stage, with further review planned following supplier selection and confirmation of the baseline budget within the Full Business Case. Risk is Amber. A risk relating to delays in completing fleet modification surveys remains the principal project risk, alongside several medium-rated delivery and supplier risks. Resource is Amber. Resource pressures within Fleet and the need to maintain survey momentum continue to present a risk to delivery, although additional resources and mitigation options are being pursued.								
CivTech - Situational Awareness								
08/07/2026 Quarterly Update - the final milestone of the Pre-Commercial Assessment (PCA) is in July 2026. The developed application has been named “Braidwood” aligned to the ethos of James Braidwood regarding innovation in the fire service, with approval having been sought from the decedents of James Braidwood. Following the end of the PCA stage SFRS will have access to the completed application. If adopted by SFRS, a procurement process will be completed and a pilot started. Costs are currently being established on a variety of options including (a) not adopting the application for use; (b) adoption of the application with no further development; and (c) adopt Braidwood and continue development with Rowden Technologies. A business case will be developed and brought to the board on completion of the PCA stage for a decision on the future role of Braidwood in SFRS.								
CivTech – Contaminants						FE & OT, Gas Sensors, Marketing	27/04/26	TBC
Quarterly Update delayed from July 2026 to August 2026. Project is at “Stage 6: Pre Commercial Phase” which, for this initiative commenced in November 2025 and is expected to run for 2 years until October 2027. There are three tiers of governance, which work alongside and support the efforts and processes of the team from the Safety and Assurance Function, who manage the day-to-day relationship, development and embedding work on this project. Milestone delay was confirmed at the June Steering Group. Zudu has experienced a change in leadership and other key roles which has resulted in a 3-month slip to delivery. Firehaz is exploring options and a Commercial Consultant is supporting mitigations - detail will be provided in the August update.								

<table>
<tr><th colspan="9">Service Delivery Review Programme (SDR)</th></tr>
<tr><th>Project Title</th><th>Overall Health</th><th>Time</th><th>Cost</th><th>Risk</th><th>Resource</th><th>Next Milestone</th><th>Planned Date</th><th>Latest Scheduled Date</th></tr>
<tr><td>Public Consultation</td><td>●</td><td>●</td><td>●</td><td>●</td><td>●</td><td>Capture lessons learned</td><td>31/08/26</td><td>31/08/26</td></tr>
<tr><td colspan="9">Project status is Green: The key Board approval milestone was achieved in June. Time is Green with the focus on capturing lessons learned from the consultation and transitioning to the next phase of the programme. Cost is Green. Costs remain under control with no additional expenditure reported during the period. Both current-year and whole-life cost forecasts remain within acceptable limits. Risk is Green with the consultation having been successfully delivered and the team are continuing to respond to FOI requests. Resource is Amber due to the risk that project team contracts may end before the lessons learned exercise has been completed.</td></tr>
<tr><td>Alternative Duty Systems</td><td>●</td><td>●</td><td>●</td><td>●</td><td>●</td><td>Day Shift Duty System Collective Agreement Proposal approved by SLT</td><td>20/04/26</td><td>02/11/26</td></tr>
<tr><td colspan="9">Overall health is Amber due to delays in representative body negotiations and potential resource implications. Time is Green. The project has returned to schedule following approval of the timeline change request. Cost is Green - costs are managed through the wider SDR Programme. Risk is Amber due to ongoing uncertainty around negotiations with representative bodies. The most significant risk remains extended consultation periods which could continue to delay delivery and key project milestones. Resource is Amber because some fixed-term roles, including the People Manager and Senior Project Manager positions, are expected to end before the project closes. This creates a risk to delivery capacity and is being managed through the wider SDR Programme.</td></tr>
</table>

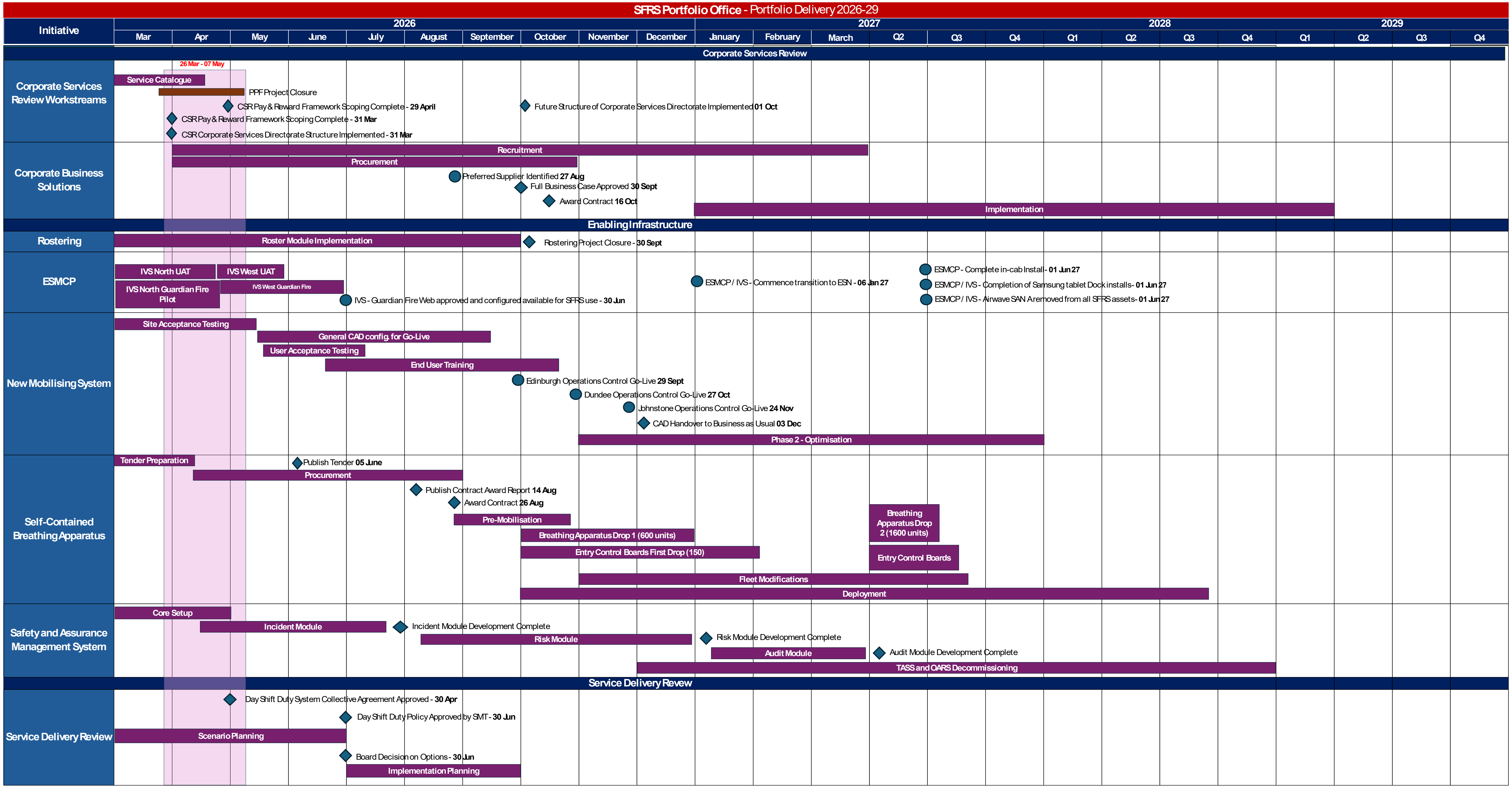
Organisational Culture & Leadership Programme

Project Title	Overall Health	Time	Cost	Risk	Resource	Next Milestone	Planned Date	Latest Scheduled Date
SFRS Values Review	●	●	●	●	●	Appointment of Delivery Resource	04/09/26	04/09/26
This work will be progressed once the approved OCL Programme resource is in place. Funding has been secured, though recruitment to the roles has not yet occurred. New Demand has been finalised and approved at OCL Programme Board on 4th June, awaiting final approval at SLT.								
Leadership and Management Development	●	●	●	●	●	Project Dossier approved by SLT	tbc	tbc
The Taskforce has completed its initial objectives to identify priority learning themes and outline potential content for supervisory managers. The work is now in the next phase, with the Taskforce transitioning to a Content and Delivery Group to refine and finalise material and consider delivery mechanisms, in preparation for a pilot rollout. Current activity is focused on preparing for a planned pilot in Q3 2026–27, subject to resource availability. In parallel, a Train the Facilitator programme launched in Q4 to build internal delivery capacity and capability, with further activity planned to support local and co delivery arrangements. A Project Dossier was approved at OCL Programme Board on 4th June and will seek final approval at SLT.								
Inclusive Values-Based Hiring Practices	●	●	●	●	●	New Demand approved by SLT	tbc	tbc
Improvements to recruitment and promotion processes introduced in 25-26 are now embedded, including the use of ALICE system to support values-based assessment. Recruitment and Selection Policy is currently being reviewed and will be updated during 26/27 to incorporate all improvements as regards the WT FF Recruitment and Uniformed Promotion Processes as well as any recommendations from the Support Staff Pay and Reward Framework. SIFT (Shortlisting, Interview, Feedback Techniques) training to be delivered to those undertaking uniform panel roles, with training beginning in June 2026. Recruitment data continues to evidence positive impact, particularly in relation to female participation and progression. The New Demand was approved at OCL Programme Board on 4th June and will seek final approval at SLT.								
Employee Voice, Networks Review	●	●	●	●	●	SLT Approval	tbc	tbc
Project status remains Green, although there is a risk of moving to Amber during July and August if current delays are not recovered. Progress has slipped slightly due to competing priorities, primarily SDR work, and the need to align employee network meetings with the Advisory Panel schedule. Consequently, the programme board update originally planned for June 2026 has been deferred to the August 2026 Board meeting. The expectation is that the lost time can be recovered during August and September, enabling the project to meet its overall deadline. In a worst-case scenario, minor delays could push final completion back by a few weeks into October or November 2026.								

<table>
<tr><th>Project Title</th><th>Overall Health</th><th>Time</th><th>Cost</th><th>Risk</th><th>Resource</th><th>Next Milestone</th><th>Planned Date</th><th>Latest Scheduled Date</th></tr>
<tr><td>Enhancing Female FF Experience: Facilities, Kit and Equipment</td><td></td><td></td><td></td><td></td><td></td><td>Determine appropriate governance and reporting arrangements for what is BAU.</td><td>tbc</td><td>tbc</td></tr>
<tr><td colspan="9">A revised range of estate and welfare enhancements are planned for 2026/27 to support inclusivity and operational readiness following revision of the capital programme to reflect removal of a potential capital receipt. Upgrades to Campbeltown Fire Station, for example, will include the provision of five gender neutral toilet/changing/shower pods together with contaminant control pathway. This addresses previous under provision of welfare facilities, particularly for female firefighters. A risk-based approach to station upgrades will continue through the capital plan, with the impact on female firefighter deployment a key consideration whilst also recognising tier one strategic stations (protected strategic locations as identified in the Strategic Cover General Information Note). A review has also been carried out regarding the quality of currently provided maternity wear. As this work is Business-As-Usual, a New Demand is not necessary, however Strategy and Change representatives will work with Ijaz to report against programme outcomes without duplication of Ijaz’s other reporting commitments.</td></tr>
<tr><td>Safety, Standards, and Performance</td><td></td><td></td><td></td><td></td><td></td><td>Determine appropriate governance and reporting arrangements for what is BAU.</td><td>tbc</td><td>tbc</td></tr>
<tr><td colspan="9">This workstream seeks to strengthen consistent standards, organisational learning, accountability, and performance behaviours that underpin a safety culture. A dedicated coordination function has been established, support by GC resource and wider operations input. Short, medium, and long term delivery plans have been developed, with early activity focused on establishing “project-lite” governance approach including development of a workstream dossier, Terms of Reference, review of station standards and station work routines, application station audit processes, and development of a standardised “return from leave” briefing approach for operational staff. The governance and reporting for this workstream are aligned through existing operations structures including to the relevant DACO, DMT, ACO, and DCO. As above, a New Demand is not necessary, however Strategy and Change representatives will work with DACO Girrity to report against programme outcomes without duplication of DACO Girrity’s other reporting commitments.</td></tr>
<tr><td>Employee Voice: Engagement and Partnership Working – NEW</td><td></td><td></td><td></td><td></td><td></td><td>tbc</td><td>tbc</td><td>tbc</td></tr>
<tr><td colspan="9">This new workstream seeks to develop a single engagement and feedback framework and joint review and refresh of the Working Together Framework. Initial focus will be to standardise approach to colleague engagement and feedback, including surveys aligned to OCL measures, and refreshing key partnership frameworks and governance arrangements. The New Demand was approved at OCL Programme Board on 4th June and will seek final approval at SLT.</td></tr>
</table>

Pipeline Activities								
Title	**Overall Health**	**Time**	**Cost**	**Risk**	**Resource**	**Next Milestone**	**Planned Date**	**Latest Scheduled Date**
Training System	●	●	●	●	●		tbc	tbc
This is a confirmed project but not fully launched. Paper presented to CPPG to outline narrowing of scope from New Demand and resource requirements to progress. Resource to form project team to be identified and agreed. The Project Management gap has been reflected in the wider resourcing paper, due for CPPG review.								
Service Delivery Review Phase 2	●	●	●	●	●		tbc	tbc
The second phase of Service Delivery Review is to be determined, and full scoping and definition will take place as part of the implementation planning for the programme.								

Appendix B – Portfolio Schedule



Appendix C – Business Readiness Report

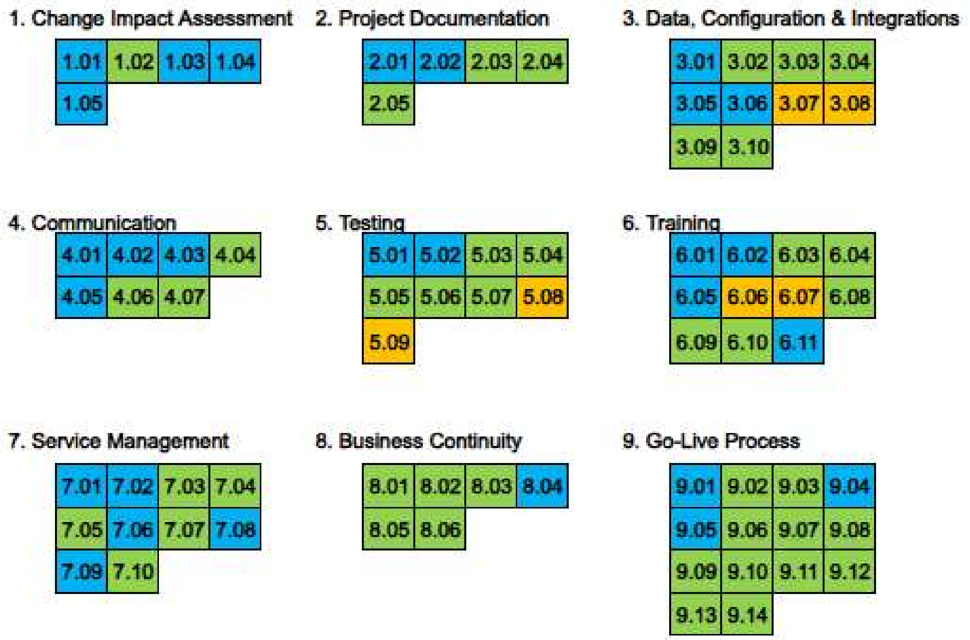
STRATEGIC CHANGE PORTFOLIO BUSINESS READINESS REPORT

1	**Purpose**
1.1	This report provides an overview of Business Readiness of projects delivered through the Strategic Change Portfolio. By exception, it will spotlight risks and remedial actions in relation to end-user ability to adopt the required changes necessary for service delivery and benefits realisation. It will avoid duplicate reporting on risks relating only to project delivery. As such, whilst there are some commonalities, Business Readiness RAG can be quite different to Project RAG status.
2	**Background**
2.1	To manage Business Readiness in the Change Portfolio, each project that requires or enables changed ways of working will produce an Implementation Readiness Checklist. This checklist will consist of categorised plain language questions which must be satisfactorily addressed before the project team can provide assurance to the Go / No-Go decision makers that the business changes required to be made by SFRS for a successful implementation have been completed.
2.2	A RAG rating and summary of each project's business readiness is provided and supported through an Implementation Checklist and Heatmap where available. The numbered boxes correspond to specific questions from the checklists, which are linked in Section 8: Appendices.
2.3	The projects referred to in this report are: • 3.1 - New Mobilising System Phase 1 (CAD – Computer Aided Dispatch) • 3.2 - Rostering (Roster) • 3.3 - Corporate Services Restructure • 3.4 - Electronic Safety and Assurance Management System (eSAMS)
3	**Main Report/Detail**
3.1	**New Mobilising System**
3.1.1	Computer Aided Dispatch (CAD) Go-Live Dates: ○ Edinburgh OC – 30th September 2026 ○ Dundee OC – 27th October 2026 ○ Johnstone OC – 24th November 2026 ○ Handover to BAU complete – 3rd December 2026 Business Readiness RAG: Green
3.1.2	Business Readiness Summary: • CAD configuration continues between OC SMEs and Motorola. SFRS decision making around business changes (mostly relating to harmonising mobilisation of special appliances) to be completed by 30th July, led by GC Jill Barber. • End-user training plans updated to account for delay between training and go-live with familiarisation exercises. Training has commenced in EOC, with DOC training commencing at end of July. • New risk identified as the CF33 devices supplied through the In-Vehicle Systems project will require an update before they can connect to CAD. The planned NMS pilot and migration of all MDTs (CF33 and legacy) prior to first go-live in EOC is dependent upon this. NMS and IVS teams working closely together to assure NMS go-live schedule. • Boomi-integration being tracked in Project Risk Register, integration remains as a risk.

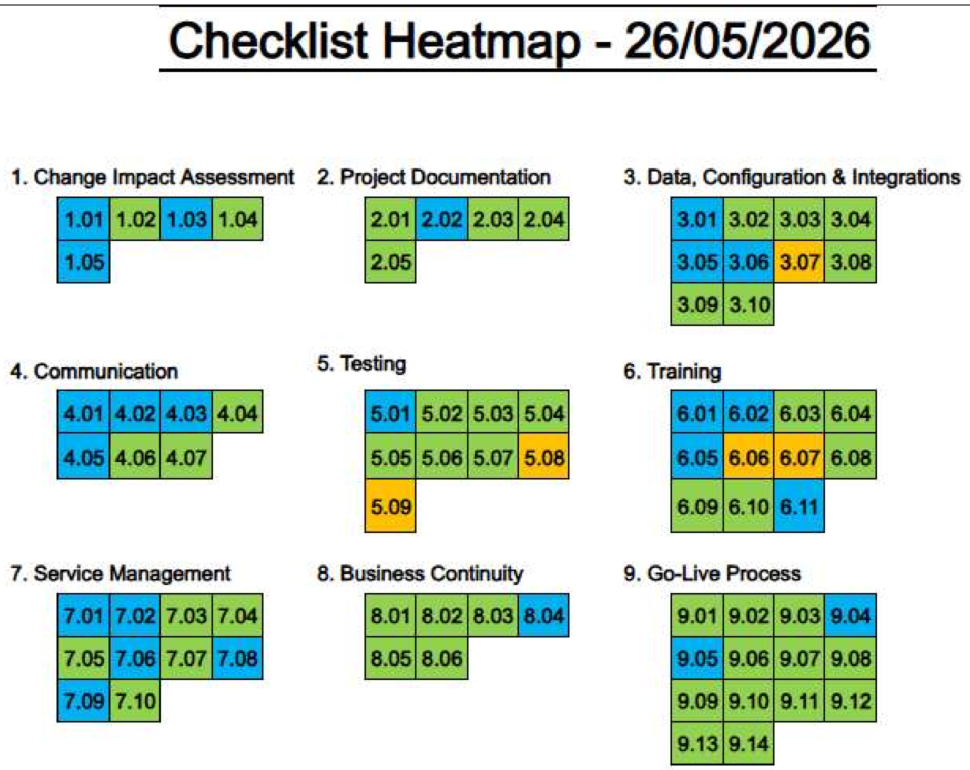
Action Required to maintain Go-Live	
Readiness Area	**Action**
Change Impact Assessment	Prepare detailed list of the changes that CAD will deliver for organisation and users, and impact assess. Decisions to be made by end of July
Integration	Technical dependency/risk raised due to IVS project requiring software update on new CF33 prior to NMS completing pilot and EOC go-live. CF33 updates to be prioritised for East and Pilot area, and progress to be monitored through regular dependency review meetings.

Legend	
	Complete
	On track for completion date
	Activity completion TBC / delayed, no current impact to Go-Live
	Activity completion delayed/ risk to Go-Live

Checklist Heatmap - 07/07/2026



	2026								
Date	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
% Blue	17%	18%	23%	31%	36%				



	2026								
Date	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
% Blue	17%	18%	23%	31%					

3.2 **Rostering (Roster)**

3.2.1 Go Live dates:
- All SDAs – TBD

3.2.2 Business Readiness RAG: n/a
- SFRS and TotalMobile stakeholders will meet in late July to confirm what Roster functionality will be achievable by 31st March 2027 – the point at which Kronos is no longer supported. This will inform whether SFRS elect to:
- Delay implementation of Roster until all functionality is ready, and risk loss of Rostering solution if Kronos fails, or;
- Go live with limited functionality of Roster by 31st March with many manual workarounds, though reduce risk associated with lack of Kronos support.
- An associated Change Request will follow, expected September 2027, which will baseline the new delivery plan.
- From that point, reporting a Readiness RAG and Implementation Heatmap for Business Readiness will be restarted.

3.2.3 Business Readiness Summary:
- Original Roster requirements slimmed down to a “Day 1 Solution”. All disputed requirements now agreed and will be delivered as part of the Rostering project. This will deliver a sustainable Rostering solution, albeit with reduced benefits immediately following implementation from the full original requirements.
- The associated delivery timeline from TotalMobile has development dates running into 2027, with clear implications for any Go-Live date for Roster in SFRS. An options paper has been progressed through governance, to be followed by a Change Request expected in August. Readiness RAG will remain undefined until the Change Request has been approved and associated dates are baselined.
- Project Team are in UAT with Central Staffing SMEs, testing functionality currently available. Both the 5W and FDO systems are progressing, though expectation is that the whole system will not be available for testing until late 2027.

	• Business Readiness activities effectively on hold whilst Day 1 Solution is in UAT. Project team and BCIM are working with Central Staffing to keep them updated on the situation, as well as escalate options on extending Kronos to ensure business continuity.
3.2.4	Availability & Payroll: • The Availability and Payroll modules of the Rostering project, which allow On-Call and Volunteer firefighters to note their availability and be paid hours worked, have been operationally live and in-use since 3rd February 2026. • The project team have provided hypercare support along with a team of super-users, and overall, the change has landed well with benefits due to be realised. • There is an outstanding issue regarding the responsibility for input of contractual information into the system. • This was a task previously carried out by both Business Support and Payroll teams; a duplication and clear process improvement, with Payroll retaining this responsibility post-implementation and Business Support input stood down. • Business Support colleagues were not effectively communicated with or supported during this change due to oversight on the significance of the business change, resulting in frustration and unclear responsibilities. • The Programme Manager is managing this ongoing discussion between the project team and Trade Unions / Business Support colleagues to reach a resolution. • Lessons have been learned regarding process changes with updated responsibilities and job descriptions.
3.3	**Corporate Services Restructure**
3.3.1	The proposed option was approved at SLT in February 2026 and changes will be implemented in phases:
3.3.2	Business Readiness RAG for remaining implementation: Green
3.3.3	Intended Phase 1 changes that are delayed, but will be implemented: • Update of Job Descriptions and associated variations to contracts. HoF JD's are now with relevant HoFs following consultation, final comments expected mid-July and then re-evaluation with Job Evaluation team is expected to conclude by end of July. • Digital, Data, and Technology Project Delivery resource under Javier Larios will remain in DDaT due to unforeseen capacity issues. The transition to Strategy & Change Function is now planned for September 2026. Uncertainties remain on the Capital / Resource funding availability for these posts. • Strategic Planning capability to be developed within Strategy and Change Function instead of the Strategic Planning Team migrating to S&C.
3.3.4	Phase 2: To be transitioned during 6-month period beginning 1st April 2026, aligning most appropriately with implementation of the DDaT Strategy. • Migration of the Performance Data Services Team to Digital and Technology Services Function.
3.3.5	Phase 3: To commence upon new Director of People, Communications & Engagement beginning at SFRS. Change unlikely to be implemented before Q2 26/27. • Migration of Communications & Engagement Function to People, Communications, and Engagement Directorate.
3.3.6	Business Readiness Summary: • Majority of Phase 1 moves have been completed successfully. • People colleagues remain on hand to support ongoing updates to Job Descriptions, and support Heads of Function with Phase 2 transitions. • "Wash-up" session planned to examine lessons that have been learned.

Action Required to maintain Go-Live	
Reference	**Action Needed**
WoW - HoF WoW - Teams	Complete updates to Job Descriptions and associated contract variations
WoW - Teams	Continue Comms & Engagement with teams and individuals that are yet to move, keeping them informed of intentions and providing a platform for questions and concerns.

Legend	
	Complete
	On track for completion date
	Activity completion delayed, no current impact to Go-Live
	Activity completion delayed, will impact Go-Live

CS Restructure - 8th July 2026

Date	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
% Blue	34%	64%	67%	67%	67%					

Strategic Alignment		
1	2	3
4		

Understanding Change Landscape		
5	6	7
8	9	

Change Impact Assessment		
10	11	12
13	14	

Ways of Working: Directors		
15	16	17

Ways of Working: Heads of Function		
18	19	20
21	22	23
24		

Ways of Working: Teams		
25	26	27
28	29	30
31		

Other										
32	33	34	35	36	37	38	39	40	41	42

CS Restructure - 8th June 2026

Date	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
% Blue	34%	64%	67%	67%						

Strategic Alignment		
1	2	3
4		

Understanding Change Landscape		
5	6	7
8	9	

Change Impact Assessment		
10	11	12
13	14	

Ways of Working: Directors		
15	16	17

Ways of Working: Heads of Function		
18	19	20
21	22	23
24		

Ways of Working: Teams		
25	26	27
28	29	30
31		

Other										
32	33	34	35	36	37	38	39	40	41	42

#29 refers to the stood down change of Strategic Planning Team.

3.4 **Electronic Safety and Assurance Management System**

3.4.1 Go Live dates: To be determined.

3.4.2 Business Readiness RAG: Awaiting baselined Go-Live date.

3.4.3 Business Readiness Summary:

- Proposed implementation date as per supplier timeline is 11th November 2026. Discussions to be held with Evotix to explore pre-implementation activities from supplier and SFRS, and what implementation in November would mean for SFRS. Clarity also sought on Evotix hypercare support.
- Work continues to progress with configuring Incident, Risk, and Audit forms to be compatible with Assure, the new system.
- Software demonstrations from Evotix for key system users planned for mid-July.
- Limited business change required to implement, most ways of working are not planned to change. A Change Impact Assessment is being completed as the forms are configured and any updated ways of working are identified.
- Decisions to be made on Go-Live date, either as Big Bang or phased. BCIM will take a draft implementation approach with decisions that need making to future eSAMS Project Board. When approved, an eSAMS checklist will be available for implementation readiness tracking at future CPPGs.
- At this point, there are no foreseen significant risks to business readiness.

Appendix D – Portfolio Risk Report

PORTFOLIO RISK REPORT

1. Purpose

1.1 The purpose of this report is to provide an overview and update on the Strategic Change Portfolio Risks.

2. Background

2.1 The following Risk Report is intended to provide insights into potential threats and exposures across our strategic change portfolio. The detail presented is intended to Identify concentrations of risk, highlight associated level of concern / risk appetite and enable proactive decisions to help mitigate emerging risks.

2.2 Report content is focused on the Portfolio Risk Register.

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.

3.2 **Alignment to Strategic Outcomes**

3.2.1 The table below identifies the alignment between the SFRS Strategy 2025-28, Strategic Outcomes and current Portfolio Risks.

Strategic Outcome	Portfolio Risks			Total
	RED	AMBER	GREEN	
Outcome 1: Through our work with communities and other organisations, the safety and wellbeing of the people of Scotland improves.		1		1
Outcome 2: We are an effective and trusted Fire and Rescue Service where our communities and people are safe.		2		2
Outcome 3: Our people feel valued and are supported by a culture that embraces diversity and inclusion, empowerment and accountability.		1		1
Outcome 4: Our organisational performance, productivity and resilience continually improves.	5	4		9
Outcome 5: We are more innovative and achieve sustained investment in our technology, equipment, estate and fleet, making us more effective and efficient.	1			1
	6	8		14

3.3 **Risk Appetite**

3.3.1 Following agreement of the Service's risk appetite statements an alignment to current Portfolio 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 ID	Risk Name	Risk Rating	Target Risk Rating	Risk Theme	Risk Appetite	RR Above or Within RA
PO012	Risk to Roster and Crewing of Appliances	20	4	Service Delivery	Minimalist	Above
PO001	Insufficient Funding	16	9	Financial	Minimalist	Above
PO006	Benefits Realisation	16	6	Financial	Open	Above
PO007	Agility of Decision-Making	16	6	Compliance	Cautious	Above
PO014	Failure to Adopt Lessons Learned	16	6	Service Delivery	Open	Above
PO003	Portfolio Resourcing	15	6	People	Open	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 ID	Risk Name	Risk Rating	Target Risk Rating	Risk Theme	Risk Appetite	RR Above or Within RA
PO002	Limited Depth of Portfolio Planning	12	6	Financial	Minimalist	Above
PO009	Internal Resistance to Change	12	4	People	Open	Above
PO011	Strategic Focus	12	4	Compliance	Cautious	Above
PO004	Mobilising Time for Resource	9	4	People	Open	Above
PO005	Reputational Risk	9	6	Political and Stakeholder Relationships	Cautious	Above
PO008	Loss of Staff Confidence	9	6	Compliance	Cautious	Above
PO010	Compliance with Governance	9	4	Compliance	Cautious	Above
PO013	Variance to Profiled Spend	9	4	Financial	Minimalist	Above

3.4 **Risk Spotlights**

3.4.1 The Strategic Planning and Change Committee and Change Portfolio Progress Group will consider risks for future spotlights and following these discussions, identify whether required levels of assurance on progress have been provided.

Risk spotlights for this reporting period are included in Appendix E:

- New Mobilising System – Boomi Interface Risk

3.5 **Significant Portfolio Risks**

3.5.1 In relation to the current period the Portfolio Risk Register captures 14 risks of which 6 are rated at 15 or above and coloured red within the table.

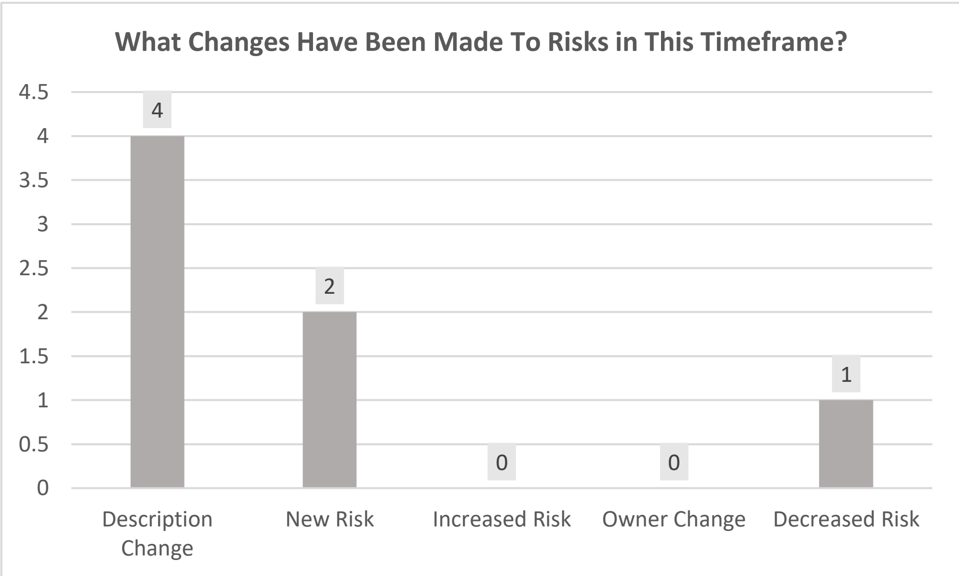
Probability	Negligible (1)	Low (2)	Medium (3)	High (4)	Very High (5)
Almost Certain (5)	0	0	1	1	0
Likely (4)	0	0	2	4	0
Possible (3)	0	0	5	1	0
Unlikely (2)	0	0	0	0	0
Rare (1)	0	0	0	0	0

Impact

3.5.2 In relation to all Portfolio risks the table below provides a summary of key themes identified:

Area of Risk	No of Risks	Risk Rating Range
Compliance	4	9-16 (1 at 15+)
Financial	4	9-16 (2 at 15+)
People	3	9-15 (1 at 15+)
Political and Stakeholder Relationships	1	9
Service Delivery	2	16 - 20 (2 at 15+)

3.5.3 In relation to all significant risks, rated 15 or above, a number of new risks have been added over the last three months. Significant changes to Risks are summarised below.



3.5.4 There are two new risks since the last report.

Risk ID	Description	Risk Rating	Date Updated
PO013	There is a risk that the profiled spend for the portfolio is not achieved within the financial year because of delays to key project deliverables resulting in additional cost pressures in following years.	9	29/06/26

PO014	There is a risk that the projects repeat previous ineffective ways of working because lessons are not learned from initiatives resulting in increased costs, delays and limited benefit realisation.	16	29/06/26

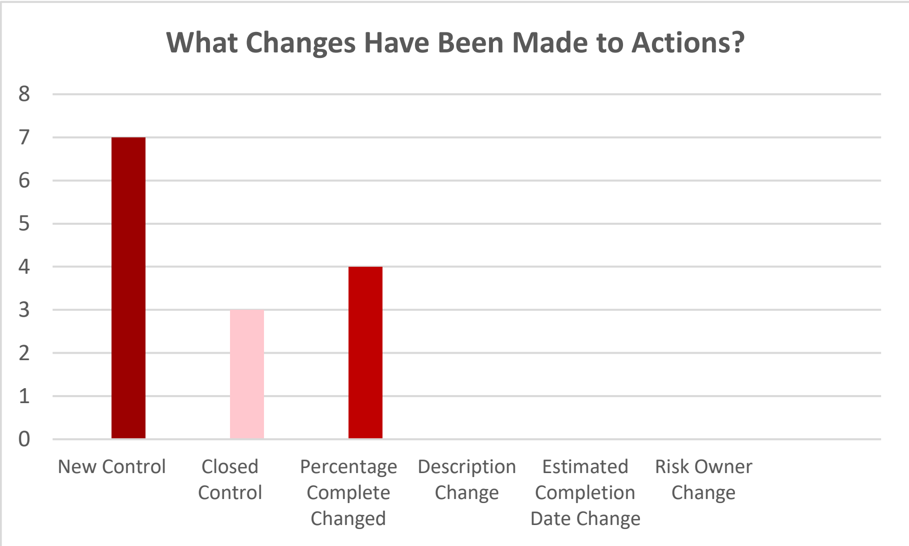
3.5.5 Separately, one risk has been identified where its rating has changed.

Risk ID	Comment	Date Updated
PO005	There is a risk of SFRS' reputation being damaged because of a public perception of ineffective or poorly managed delivery of change resulting in negative publicity and loss of confidence in SFRS	29/06/26

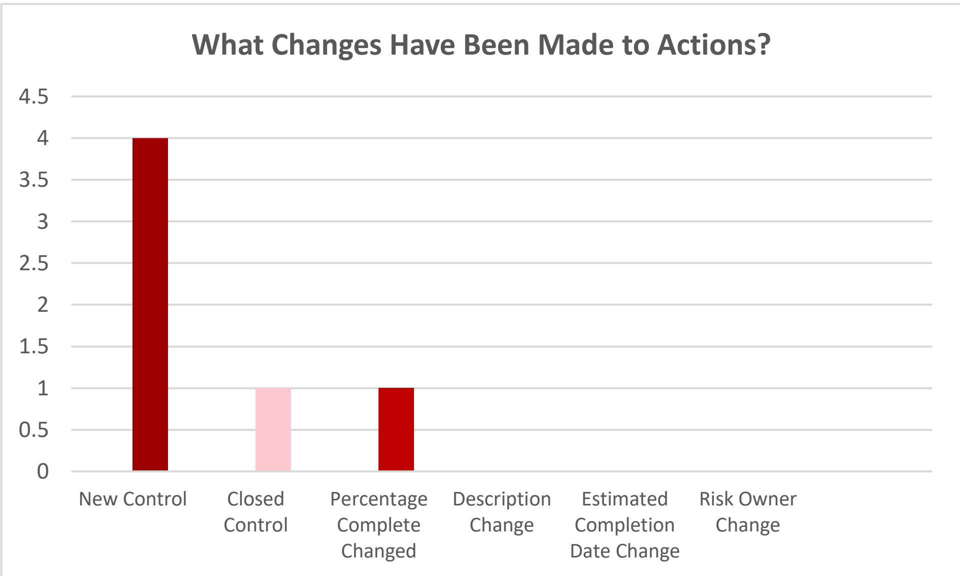
3.5.6 All risk descriptions have been reviewed and updated to ensure full alignment with the corporate wording of risks.

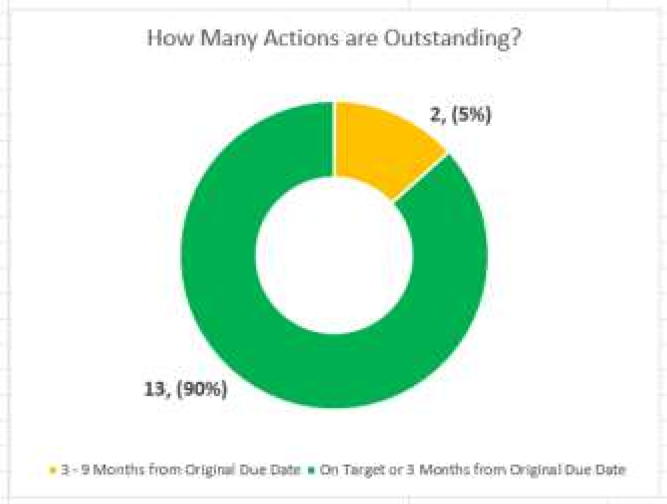
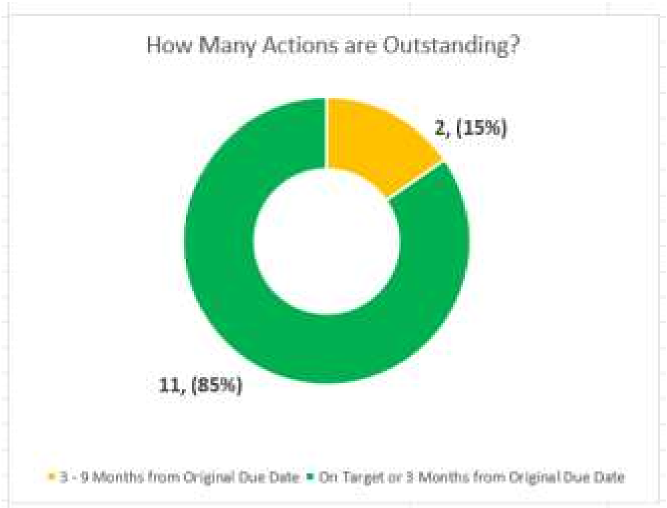
3.6 **Control Actions**

3.6.1 Following review, the following changes have been made to control actions rated 15 or above, over the last three months.



3.6.2 Following review, the following changes have been made to control actions rated below 15, over the last three months:



3.6.3	In relation to risks rated 15 or above, there are no control actions over 9 months from original due date: 
3.6.4	In relation to risks below a rating of 15, there are no control actions over 9 months from original due date: 

Appendix E – Issue Spotlight

Change Portfolio Progress Group – 20 July 2026

New Mobilising System – Boomi Interface Risk

Issue: Boomi solution was not delivered within the User Acceptance Testing window which ended on 2 July 2026.

Submitted by: Luisa Kemp

Background:
There is a risk to the first CAD go-live in September 2026 and the end November 2026 CAD implementation deadline. Interface between the CAD and other SFRS systems through Boomi is required to enable go-live. As the Boomi solution was not delivered during the User Acceptance Testing (UAT) window ending 2 July 2026, there will need to be an additional round of testing that could lead to delays in the CAD go-live. Whilst Boomi is often used as an interface between systems, it is not often used with mobilising systems. SFRS provided the necessary documentation and Boomi supplier assurance evidence to Telent for them to review in April. Digital and Technology colleagues are now required to work with Boomi and Motorola to implement Availability functionality by mid-September to maintain the first Go-Live date for CAD in September.
What risk appetite category and sub-category does the risk align to? (does it fall below, within or above the relevant risk appetite rating)?
Service Delivery, Minimalist; In relation to risk of failing to provide a safe and effective emergency response, SFRS has a Minimalist appetite.
Controls and mitigating actions (stating what actions are being taken if the residual/current risk assessment is operating above or below risk appetite).
DaTS colleagues have provided a delivery plan and delivery date for the necessary work which is currently 29 September. This is too late for the first Go-Live date of 30 September. All work will need to be completed by mid-September to maintain the current implementation schedule. Discussions are continuing with DaTS colleagues to try and align the Boomi work with the CAD go-live schedule.
External or other factors which might impact on the current risk assessment. (has internal or external audit provided a related report or has HMFSI undertaken a review in this area).
Should an additional test window be required then supplier availability will be critical to enable the successful completion of this.
Summary of Mitigating Actions Undertaken by Directorates
Risk previously highlighted to Change Portfolio Progress Group. Now an issue which is being presented to Enabling Infrastructure Programme Board on 14 July and Change Portfolio Progress Group on 20 July.

Appendix F – Portfolio Summary Spend Profile

During the 2025/26 financial year the strategic change portfolio has developed significantly including approval of the following:

- Self-contained Breathing Apparatus
- Safety and Assurance Management System (eSams)
- Service Management
- Corporate Business Solutions

A summary of the agreed business cases and associated annual profiling for the next three financial years is contained in the table below.

Initiative	2026/27 (£)	2027/28 (£)	2028/29 (£)	Notes
Service Delivery Review	0	0	0	
Safety and Assurance Management System	39,000	42,500	54,000	Resource
Self-Contained Breathing Apparatus	906,000	2,019,200	1,666,200	Resource
	4,174,000	11,640,000	330,000	Capital
Corporate Business Solutions	635,000	1,583,000	1,521,000	Resource
CivTech - Situational Awareness	45,000	45,000	0	Resource
CivTech – Contaminants	45,000	45,000	0	Capital
New Mobilising System	1,753,510	2,789,395	2,634,665	Resource
	2,745,363	868,396	0	Capital
Rostering	383,000	0	0	Resource
In-Vehicle Systems	420,169	511,511	541,456	Resource
	24,150	0	0	Capital
Organisational Culture and Leadership	320,000	0	0	Resource
Total Resource	4,501,679	8,250,606	7,632,321	
Total Capital	6,943,457	12,508,000	330,000	
Total Overall Investment	**11,445,136**	**20,758,606**	**7,962,321**	

The approved business cases for Self-Contained Breathing Apparatus and Corporate Business Solutions are outline. Costs will be refined following procurement and confirmed at Full Business Case stage. The split for Civtech is indicative – SFRS will contribute a total of £180,000 up to November 2027.

Budget allocations have been agreed for Financial Year 2026/27 including £272,000 for Service Delivery Review. It is anticipated that a business case(s) will be brought forward following the Board Decision in June seeking approval to access this funding for the next stages of the programme.

SCOTTISH FIRE AND RESCUE SERVICE

Strategic Planning and Change Committee

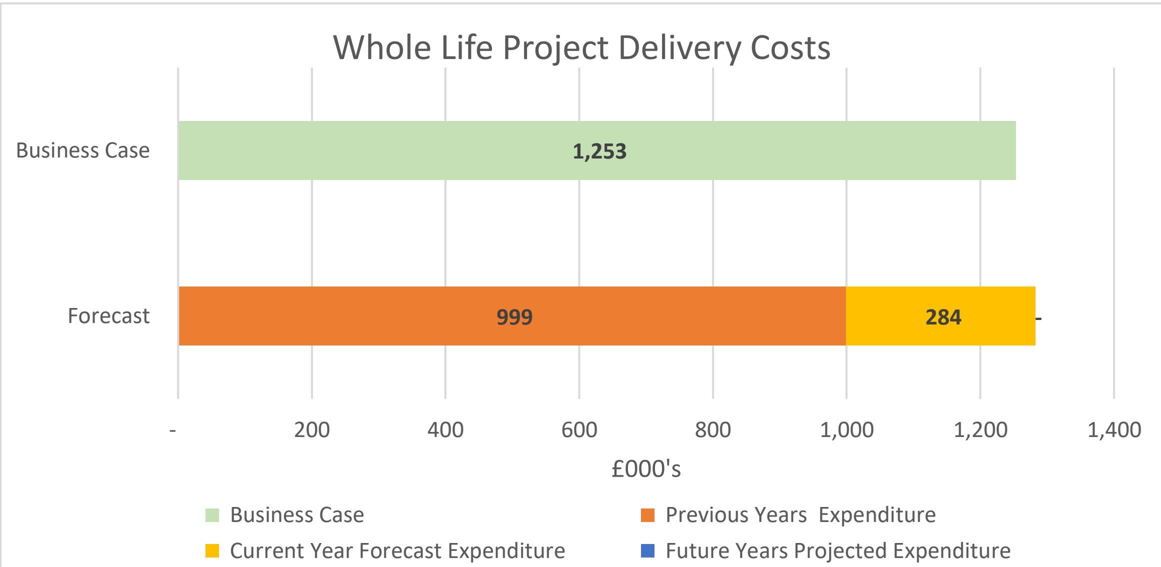
Report No: C/SPCC/17-27

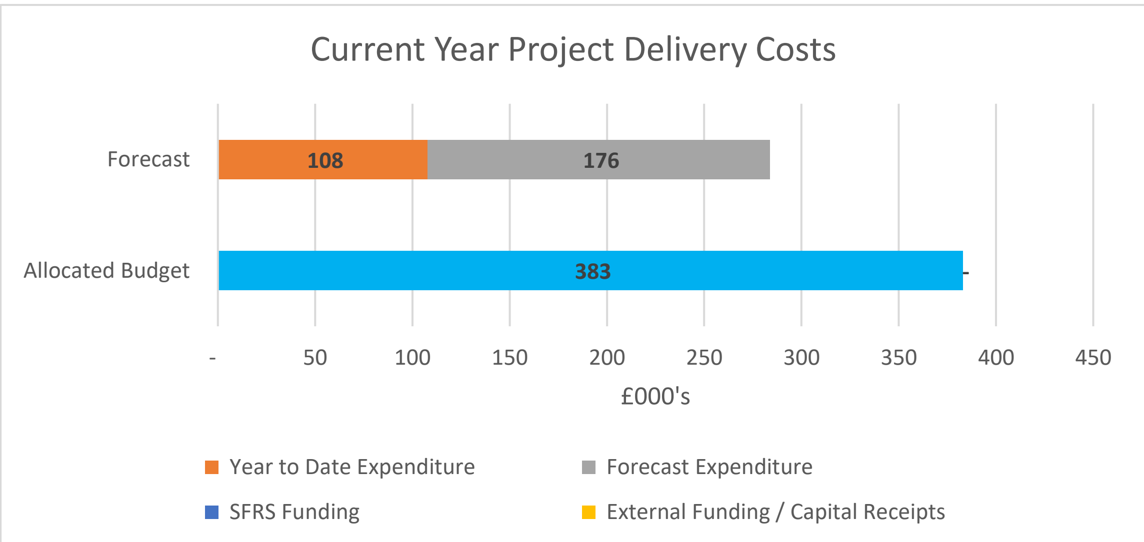
Agenda Item: 9.1

Report to:	**STRATEGIC PLANNING AND CHANGE COMMITTEE**							
Meeting Date:	**6 AUGUST 2026**							
Report Title:	**PORTFOLIO FINANCE AND PERFORMANCE REPORT – DATA FROM PORTFOLIO REPORT 2627 P3**							
Report Classification:	**For Scrutiny**	**SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to Board Standing Order 9**						
		A	B	C	D	E	F	G

1	**Purpose**
1.1	The purpose of this report is to provide a regular update to the Strategic Planning and Change Committee (SPCC) on the Key Performance Indicators (KPIs) of the Change Portfolio.
2	**Background**
2.1	Three KPIs were approved to be monitored, aligned to the revised Change Portfolio governance, namely:
2.1.1	Cost: • Costs from latest approved baselined business case measured against forecast completion costs. • Measure will be in £1,000s. • Target is no more than 5% overspend variance from baselined costs.
2.1.2	Time: • Baseline completion date contained within the latest approved project dossier, compared with latest thinking forecast (LTF). • Measure will be in time, i.e. months. • Target is no more than 10% variance from baselined duration.
2.1.3	Financial benefits: • Cashable benefits realised, measured in £1,000s. • Target is to track delivery of expected cashable benefits against the latest approved business case. • Benefit profiles will be agreed as part of business case approval and a benefit realisation plan will be derived for each change activity based on these. Tracking and Realisation milestones will be added to the Project Plan to define the benefit reporting period applicable for each. • Projects will report against approved business cases, where a change request is approved during the project lifecycle, KPI's will be reported against the revised / latest approved baseline.

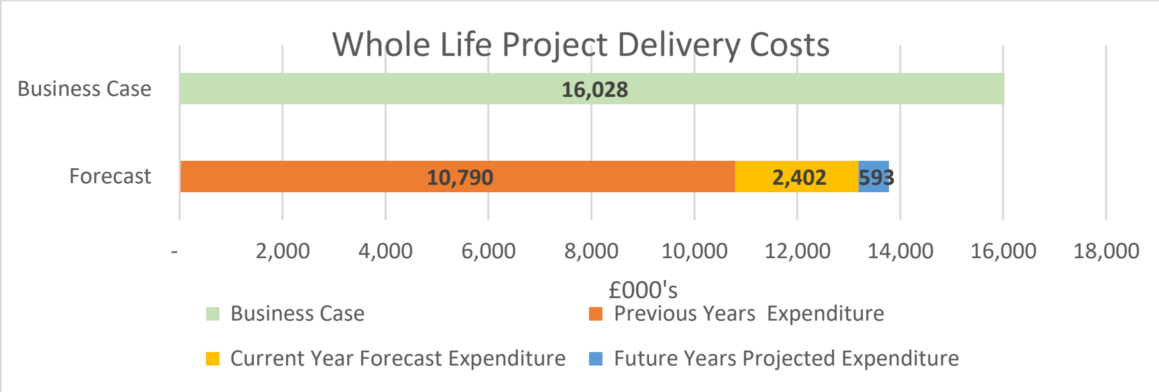
3	Main Report/Detail
3.1	Performance relating to cost, time and financial benefits is monitored in relation to discrete projects and programmes through associated project and programme boards and scrutinised monthly by the Change Portfolio Progress Group (CPPG).
3.2	Performance detailed in the following graphs covers project costs for projects from inception and includes data up to the end of period 03 of the 2026/27 financial year. A breakdown is shown for each project with a recognised business case.
3.3	Data depicted in the following section is utilising the Finance Portfolio Report format for 2026/27, period 03.
3.4	The report covers projects where there is an approved business case and are in formal governance.
3.5	**Enabling Infrastructure Programme**
3.5.1	**Rostering**

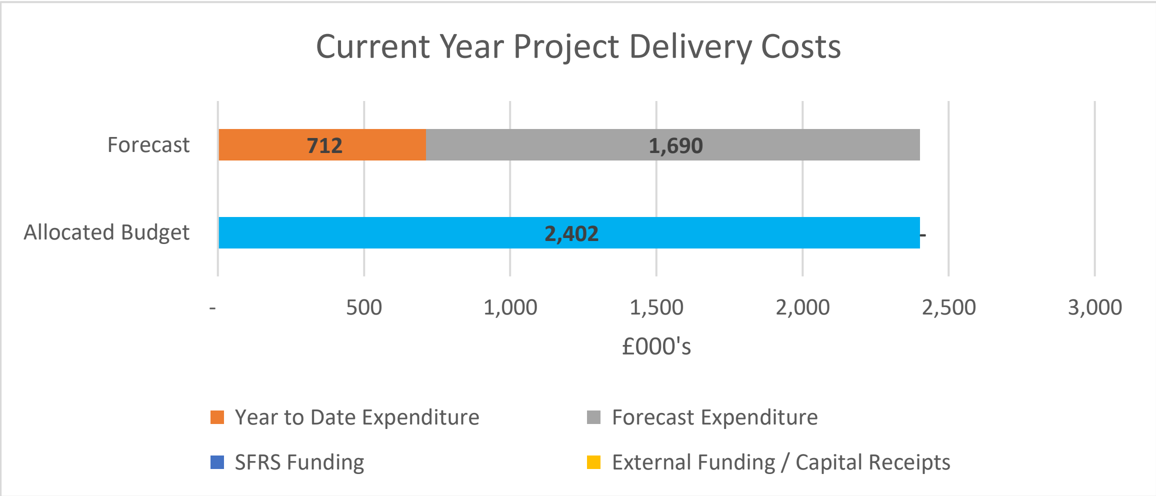




3.5.1.1 Rostering Cost RAG is Red for this reporting period. Whilst there is a forecast underspend against budget allocation within the current year due to difficulties around recruiting

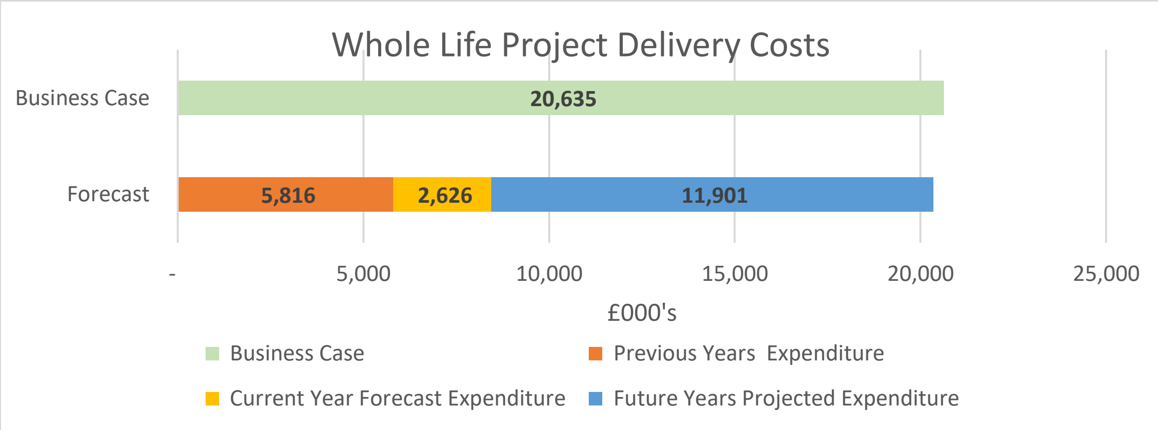
	approved project resources, the whole-life cost is forecast to exceed the approved business case by £0.030m. Change requests will be brought forward to the Strategic Leadership Team in August and September that will help to address this. These will seek approval for the extension of the current system contract, revision of the implementation timeline and associated costs.
3.5.1.2	Whilst current year project delivery costs are forecast to £0.284m against an allocated budget of £0.383m, a significant timeline extension is expected that will take the project into the latter half of 2027, with risk of increased costs and pressure on future financial years.
3.5.1.3	Previous Years Expenditure: the spend on the project in financial years 23/24 and 24/25 was £0.999m.
3.5.1.4	Existing benefit profiles validation is ongoing. Project Board approved removal of 18 Benefits Profiles from the Project Benefit Toolkit at June Project Board (04/06). Analysis and validation of the remaining 36 Benefits will continue. Once benefits have been agreed and baselined, ongoing progress monitoring will be implemented.
3.5.2	**New Mobilising System (NMS)**

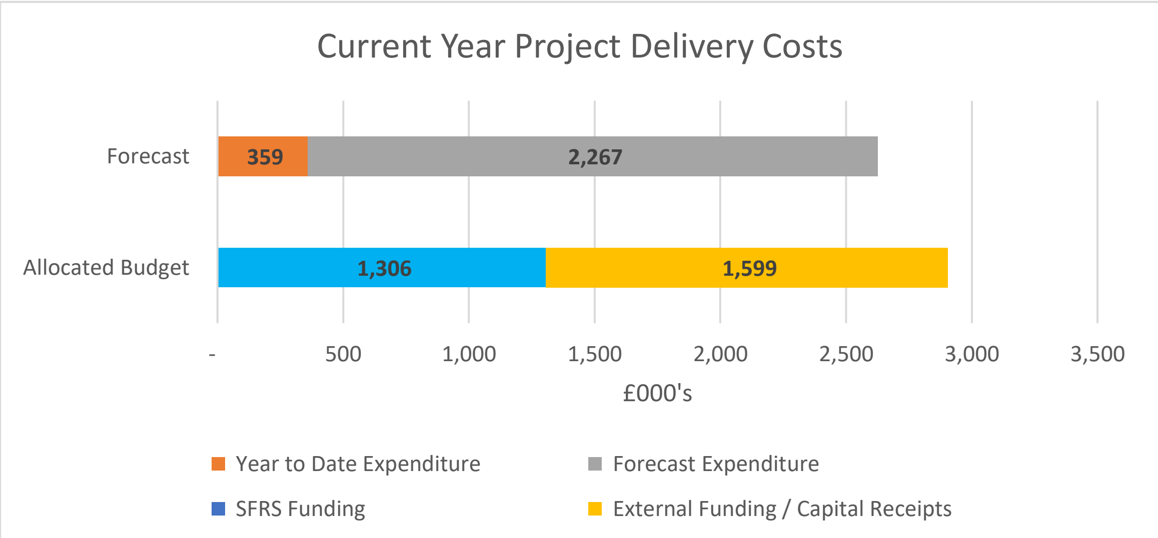




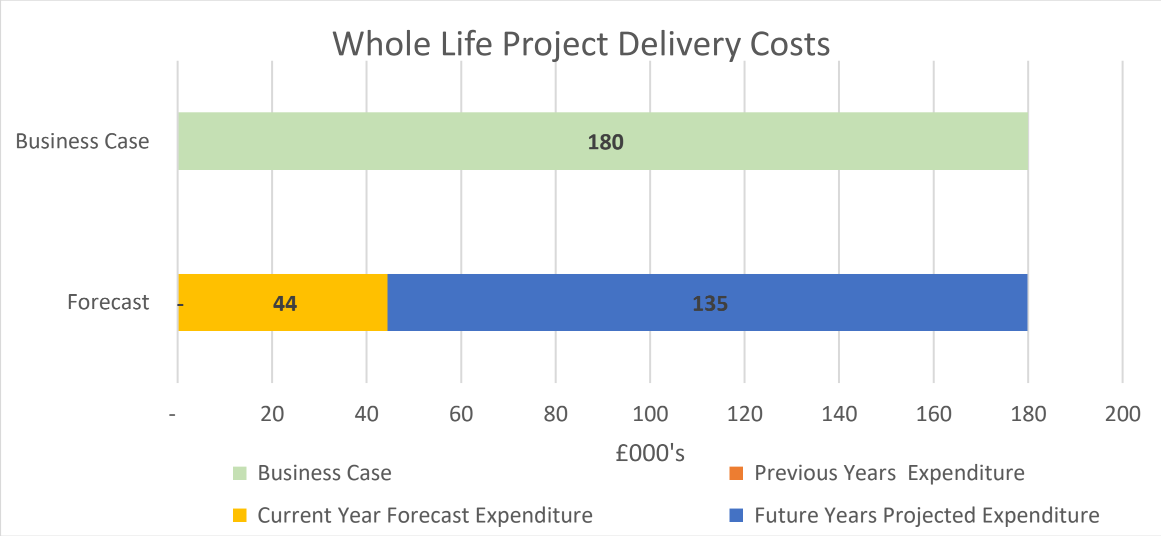
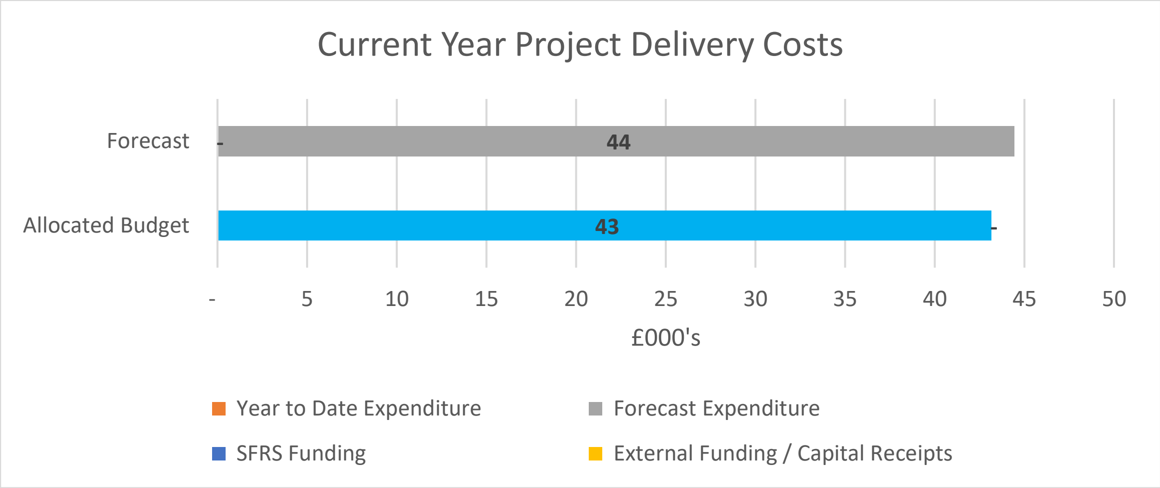
3.5.2.1	NMS Cost RAG is Green. both in-year and whole-life project costs remain within approved forecasts and tolerances.
3.5.2.2	Whole life project delivery costs: forecast to be £13.785m against the latest approved Business Case of £16.028m, an underspend of £2.243m is forecast against the approved Business Case.
3.5.2.3	Current year project delivery costs: forecast is £2.411m against an allocated budget of £2.402m, indicating a small overspend of £0.009m. Actuals for the year to date (YTD) are

	£0.712m, the remaining forecast of £1.699m is expected to be spent over the remaining months of the year.
3.5.2.4	Previous Years Expenditure: the spend on the project in financial years 23/24 and 24/25 was £10.790m.
3.5.2.5	Benefits: validation of project benefits presented in the original business case is complete. The Benefit Toolkit, containing detail of profiles and the realisation plan was approved at NMS Project Board on 6th Oct and submitted to the Digital Assurance Office Go-Live Gate review. Benefits captured relate to staff satisfaction, process simplification, improved system resilience & risk reduction. An interim Benefit Review was conducted in June. The resulting Benefit Report is now being reviewed by the Project Team and will be presented to Project Board in August. Preparation of Benefits anticipated from NMS Phase 2 is underway.
3.5.3	**Emergency Services Mobile Communications Programme/In-Vehicle Systems**

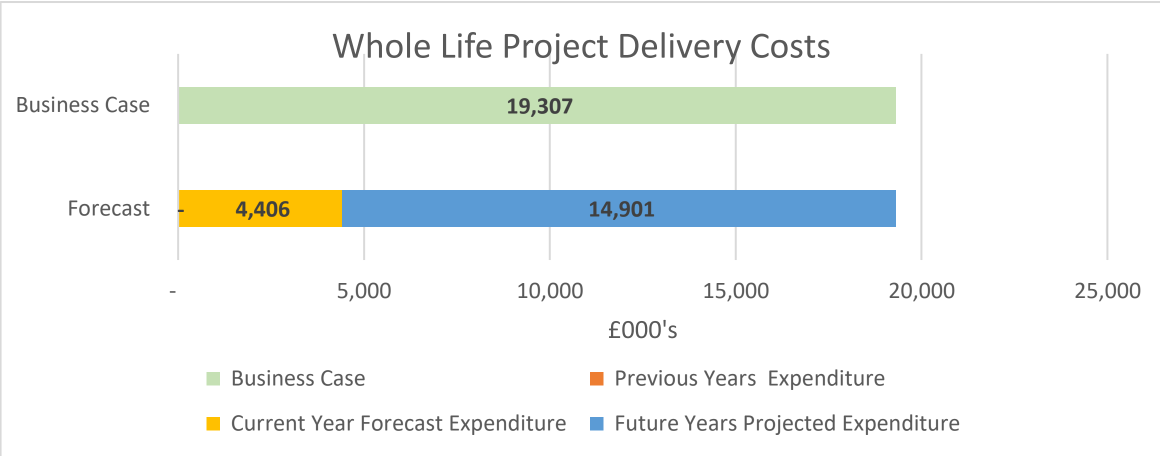


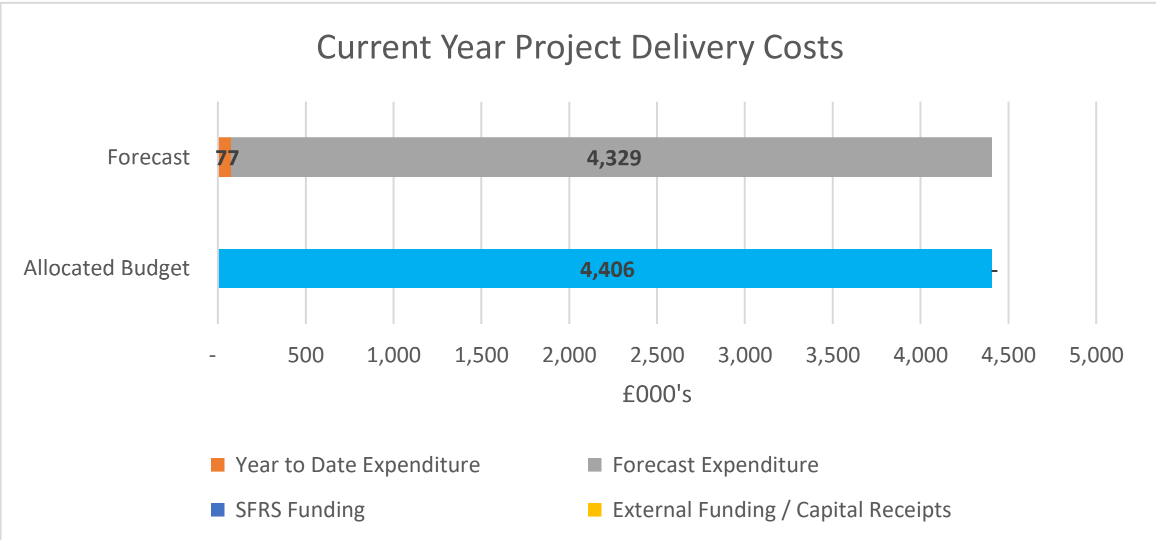


3.5.3.1	ESMCP Cost RAG is Green. The programme remains within its approved whole-life budget. In-Vehicle Systems is forecasting an overspend of £0.021m due to unexpected staff costs outside of business case provision. This is expected to be a one-off requirement and will be managed within the existing funding envelope. ESMCP is forecasting an underspend due to training model being utilised. It has been agreed that some of this will be re-purposed for ESN Data First Inverness Drivers and recruitment has been initiated.

3.5.3.2	Whole life project delivery costs: forecast to be £20.343m against the latest approved Business Case of £20.635m, an underspend of £0.292m is forecast against the approved Business Case.
3.5.3.3	Current year project delivery costs: forecast is £2.626m against a budget of £2.905m. Actuals for the year to date (YTD) are £0.359m, the remaining forecast of £2.267m is expected to be spent over the remaining months of the year. There is a net forecast underspend of £0.279m based on the provisional funding letter from Scottish Government. Actual funds will be granted following the October forecast.
3.5.3.4	Previous Years Expenditure: the spend on the project in financial years 23/24 and 24/25 was £5.816m.
3.5.3.5	Programme benefits have been identified, and it is proposed that benefit profiles are developed to support the realisation of these.
3.5.4	**Safety and Assurance Management System (eSams)**  
3.5.4.1	eSAMs Cost RAG is currently green. Costs remain within the approved business case and contract arrangements.
3.5.4.2	Whole life project delivery costs: forecast to be £0.180m against the latest approved Business Case of £0.180m.

3.5.4.3	Current year project delivery costs: forecast is £0.044m against an allocated budget of £0.043m, indicating a small overspend of £0.001m. There is no actual spend to report so far this year, the remaining forecast of £0.043m is expected to be spent over the remaining months of the year.
3.5.4.4	Previous Years Expenditure: there is no expenditure to report in prior financial years.
3.5.4.5	Initial Benefit Identification has taken place and was incorporated into the approved Full Business Case. Benefits identified include improved compliance, streamlined document management, improved process, increased efficiencies, better communication and enhanced employee engagement.
3.5.5	**Self Contained Breathing Apparatus (SCBA)**





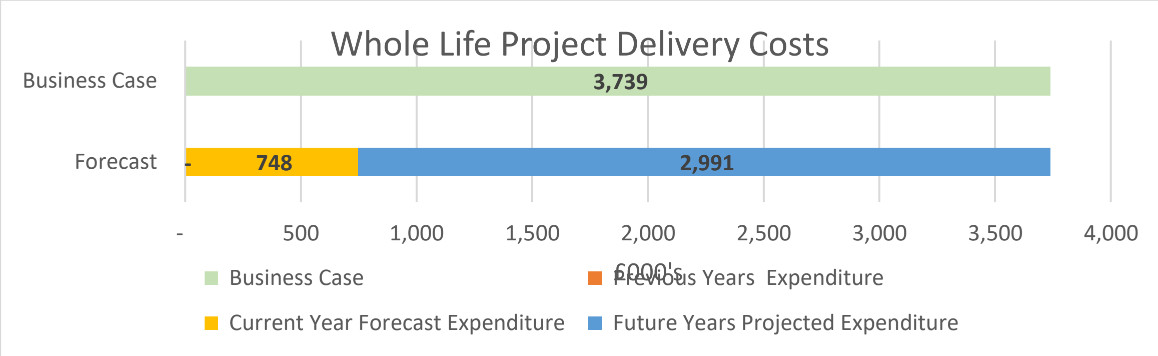
3.5.5.1	SCBA Cost RAG is currently green. Costs remain within expectations at this stage, with further review planned following supplier selection and confirmation of the baseline budget within the Full Business Case.
3.5.5.2	Whole life project delivery costs: forecast to be £19.307m matching the approved Outline Business Case of £19.307m.
3.5.5.3	Current year project delivery costs: forecast is £4.406m matching an allocated budget of £4.406m. Actuals for the year to date (YTD) are £0.077m, the remaining forecast of £4.329m is expected to be spent over the remaining months of the year following award of contract in October.

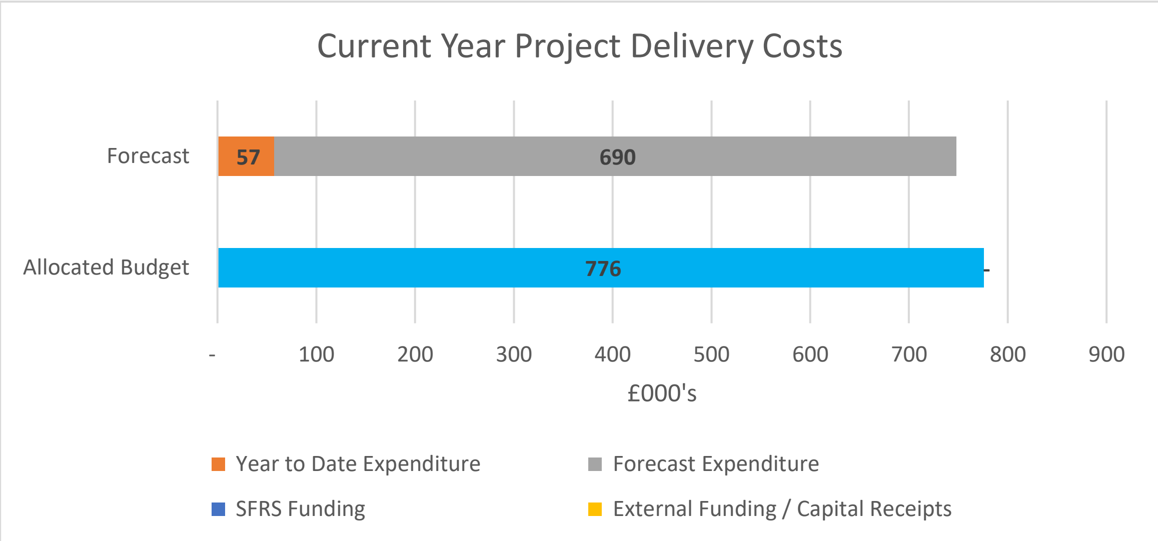
3.5.5.4 Previous Years Expenditure: this project was approved to progress in February 2026 and there is no expenditure to report in prior financial years.

3.5.5.5 Initial Benefit Identification has taken place. Workshops to determine detailed definition are underway. Benefits themes identified include enhanced Incident Commander situational awareness, improved firefighting resource efficiency, reduced response time, enhanced firefighter safety and improved post-event evaluation.

3.6 **Corporate Services Review Programme**

3.6.1 **Corporate Business Solutions Project**





3.6.1.1 CBS Cost RAG is currently green. Costs remain within expectations at this stage.

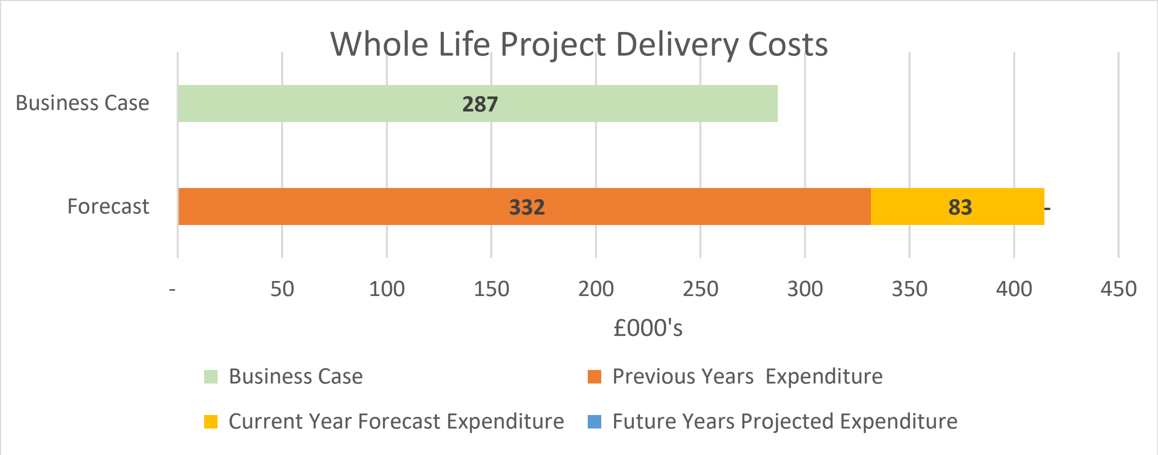
3.6.1.2 Whole life project delivery costs: forecast to be £3.739m matching the approved Outline Business Case of £3.739m.

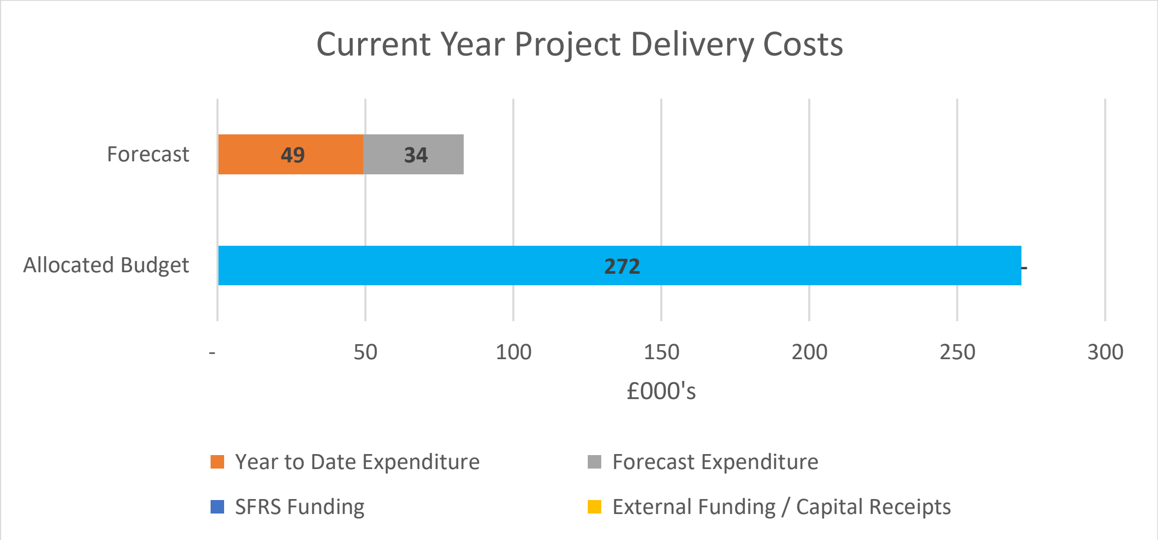
3.6.1.3 Current year project delivery costs: forecast is £0.747m against an allocated budget of £0.776m, indicating a small underspend of £0.029m. Actuals for the year to date (YTD) are £0.057m, the remaining forecast of £0.690m is expected to be spent over the remaining months of the year. A Full Business Case will be presented to SLT in September which will include solution and implementation costs which were not available at the time of the Outline Business Case.

3.6.1.4 Previous Years Expenditure: this project was approved to progress in February 2026 and there is no expenditure to report in prior financial years.

3.6.1.5 Initial Benefit Identification has taken place, and benefit profiles should be developed as part of the Full Business Case.

3.7 **Service Delivery Review Programme**





3.7.1 SDR Cost RAG for spend in this year is Green. Costs remain under control with no additional expenditure reported during the period. The consultation phase of the programme is coming to a close and figures reported relate to the delivery of this.

3.7.2 Whole life consultation phase delivery costs: forecast to be £0.415m against the latest approved Business Case of £0.287m, an overspend of £0.128m is forecast against the approved Business Case. The overspend relates to WTFF (uniformed) staff that are working on the project and are being charged to it with no budget allocated to this (per direction from Change Portfolio Investment Group).

3.7.3 Current year project delivery costs: forecast is £0.083m against an allocated budget of £0.272m, indicating an underspend of £0.189m. Actuals for the year to date (YTD) are £0.049m, the remaining forecast of £0.034m is expected to be spent over the remaining months of the year. A business case will be developed for the implementation phase of the programme that will include phasing, resource and funding requirements and a benefits realisation plan.

3.7.4 Previous Years Expenditure: the spend on the project in financial years 23/24 and 24/25 was £0.332m.

3.7.5 Benefits: Benefit Profile development is underway. Monetary and Non-Monetary benefits have been mapped and allocated to each of the change options for further profiling in due course.

3.8 Project Cost Summary

3.8.1 The table below summarises the variance between current business case and forecast cost for all projects. NMS, ESMCP/IVS and eSAMs are all forecasting an underspend. Overall, when compared for Business Cases, there is a forecast underspend of £2.513m (4.01%), which is within the limit of the 5% overspend variance target.

3.8.2 It should be noted that projects and programmes without an approved business case (BC) are not included in this calculation, as no comparison can be established.

Project / Programme	Current BC Costs (£1,000s)	Forecast Cost (£1,000s)	Variation to BC (£1,000s)	Percentage Variation	Prev Month Trend	Curr Month Trend
Rostering	1253	1283	-30	-2.39%	↑	↑
New Mobilising System	16028	13785	2243	13.99%	↔	↑
ESMCP/IVS	20635	20343	292	1.42%	↓	↔
Safety and Assurance Management System	180	180	0	0.00%	-	↔
Self-Contained Breathing Apparatus	19307	19307	0	0.00%	-	↔
Corporate Business Solutions	3739	3739	0	0.00%	-	↔
Service Delivery Review	287	415	-128	-44.60%	↔	↑
Total	61429	58916	2513	4.01%	↑	↑

(Upward trend indicates movement away from BC Costs / Downward trend indicates movement towards BC Costs.)

3.9 Time

3.9.1 Completion time is green when compared to the 10% variance target, this is calculated using the current approved BC duration which takes into account previously approved change requests and not against the original BC duration. Data used in the calculation of the time KPI for 2026/27 Period 3 is provided below.

3.9.2 The revised timeline for Rostering is not yet known. Whilst the project currently has a small variation of 1 month against the approved business case, a significant extension is expected that will take the project into the latter half of 2027. Workshops with the solution supplier will be held in August to agree the revised implementation timeline. A change request will then come forward to SLT in September seeking approval for this.

Project/Programme	Original BC Duration (Months)	Current Approved BC / Duration (Months)	Forecast Duration	Variation to current approved BC	Percentage Variation
Rostering	57	57	58	1	0.02%
New Mobilising System	36	36	36	0	0.00%
ESMCP/IVS	40	112	112	0	0.00%
eSAMs	24	24	24	0	0.00%
Service Delivery Review					
Total	124	199	199	0	0.00%

SCBA and CBS excluded due to Full Business Cases not yet being agreed

4	**Recommendation**
4.1	The Strategic Planning and Change Committee are asked to scrutinise this report on the agreed KPIs.
5	**Key Strategic Implications**
5.1 5.1.1	**Risk Appetite and Alignment to Risk Registers** In relation to transformation and spend to save initiatives, SFRS has an Open appetite, looking to improve longer term financial sustainability, supported by robust business cases. All new intake projects and programmes have adopted the approved business change lifecycle and its associated artefacts, and business cases are required before projects are able to progress. Risk presented by projects and programmes without a financial baseline skewing KPIs will be reduced as such projects and programmes reach closure.
5.2 5.2.1	**Financial** There are no direct key financial implications arising from this report. Overall project spend remains within the target 5% variance and change requests are being progressed to address the reported variance for Rostering. The extension to the Rostering timeline is expected to take the project into next Financial Year with the potential for significant cost implications and additional pressure on future years funding. Change requests will be brought forward in August and September for Rostering and the full financial picture is expected to be known by the end of the second quarter of FY26/27.
5.3 5.3.1	**Environmental & Sustainability** There are no direct key environmental & sustainability implications arising from this report.
5.4 5.4.1	**Workforce** There are no direct key workforce implications arising from this report.
5.5 5.5.1	**Health & Safety** There are no direct key health and safety implications arising from this report.
5.6 5.6.1	**Health & Wellbeing** There are no direct health and wellbeing implications arising from this report.
5.7 5.7.1	**Training** There are no direct key training implications arising from this report.
5.8 5.8.1	**Timing** The report is a representation of projects at the end of June 2026. Change requests are anticipated for Rostering in August and September which will have financial and timing implications. Full Business Cases will come forward in September for Corporate Business Solutions and Self-Contained Breathing Apparatus which will confirm costs for these projects. Profiled spend across the portfolio is weighted towards the second half of the Financial Year which carries the risk that funds allocated are not spent within the agreed Financial leading to cost pressures in subsequent years. Monthly spend profiles have been included to support early identification of funding that may not be spent within the agreed Financial Year.
5.9 5.9.1	**Performance** Performance with respect to the KPIs presented in the report is monitored monthly.
5.10 5.10.1	**Communications & Engagement** There are no direct key communication and engagement implications arising from this report.

5.11 5.11.1	**Legal** There are no direct key legal implications arising from this report.
5.12 5.12.1	**Information Governance** DPIA completed: No. Report is provided for scrutiny
5.13 5.13.1	**Equalities** EHRIA completed: No. Report is provided for scrutiny.
5.14 5.14.1	**Service Delivery** There are no direct key Service Delivery implications arising from this report.
5.15 5.15.1	**Prevention** There are no direct key Prevention implications arising from this report.
	Core Brief
6.1	Not applicable

7	**Assurance (SFRS Board/Committee Meetings ONLY)**	
7.1	**Director:**	Mark McAteer, Director of Governance, Strategy and Change
7.2	**Level of Assurance:** **(Mark as appropriate)**	~~Substantial~~/**Reasonable**/~~Limited/Insufficient~~
7.3	**Rationale:**	The report is based upon the regular highlight reporting by each project and programme and the monitoring of progress across the portfolio. The financial information contained within this report utilises the Finance Portfolio Report for period 03
8	**Appendices/Further Reading**	

Prepared by:	Sean McCluskey, Reporting and Management Information Lead
Sponsored by:	Sarah O'Donnell, Deputy Chief Officer (Corporate Services) Andrew Watt, Deputy Chief Officer
Presented by:	Curtis Montgomery, Head of Strategy and Change

Links to Strategy and Corporate Values

This report provides a summary of the key performance indicators for the strategic change portfolio and links to Outcome 4 of SFRS strategy that our organisational performance, productivity and resilience will continually improve.

Governance Route for Report	Meeting Date	Report Classification	Meeting Approvals/Outcomes
Change Portfolio Progress Group	*Ex Committee*	*For Scrutiny*	
Strategic Planning and Change Committee	*06/08/2026*	*For Scrutiny*	

STRATEGIC PLANNING AND CHANGE COMMITTEE ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
5 NOVEMBER 2026 (Org 12 Nov)	• Chair's Welcome • Apologies • Consideration of and Decision on any Items to be taken in Private • Declaration of Interests • Minutes of Previous Meeting • Action Log • Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days • Review of Actions • Date of Next Meeting	**Standing/Regular Reports** **General Reports** •	**Standing/Regular Reports** **Change** • Portfolio Progress Report **Planning/Strategy** • **Finance** • Portfolio Finance and Performance Report Q1 **Audit/Inspections** • HMFSI Audit and Inspection Action Plan Update **Risk Spotlight:** •	**Standing/Regular Reports** **Change** • **General Reports** •	**Standing/Regular Reports** **Change** • **General Reports** •
		New Business •	**New Business** • Service Delivery Review Update (Timelines) •	**New Business** •	**New Business** •
4 FEBRUARY 2027	• Chair's Welcome • Apologies • Consideration of and Decision on any Items to be taken in Private • Declaration of Interests • Minutes of Previous Meeting • Action Log	**Standing/Regular Reports** **General Reports** •	**Standing/Regular Reports** **Change** • Portfolio Progress Report **Planning/Strategy** • **Finance** • Portfolio Finance and Performance Report Q2	**Standing/Regular Reports** **Change** • **General Reports** •	**Standing/Regular Reports** **Change** • **General Reports** •

STRATEGIC PLANNING AND CHANGE COMMITTEE ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
	• Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days • Review of Actions • Date of Next Meeting		**Audit/Inspections** • HMFSI Audit and Inspection Action Plan Update **Risk Spotlight:** •		
		New Business •	**New Business** •	**New Business** •	**New Business** •

PUBLIC MEETING –STRATEGIC PLANNING AND CHANGE COMMITTEE

THURSDAY 6 AUGUST 2026

The following report(s) were submitted for information only.

SCOTTISH FIRE AND RESCUE SERVICE

Strategic Planning and Change Committee

Report No: C/SPCC/18-26

Agenda Item: N/A FIO

Report to:	**STRATEGIC PLANNING AND CHANGE COMMITTEE**							
Meeting Date:	**6 AUGUST 2026**							
Report Title:	**INTERNAL AUDIT DRAFT TERMS OF REFERENCE – CHANGE MANAGEMENT**							
Report Classification:	**For Information**	**SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to Board Standing Order 9**						
		A	B	C	D	E	F	G

1	**Purpose**
1.1	The purpose of this report is to provide the Strategic Planning and Change Committee (SPCC) with the Terms of Reference in relation to the Internal Audit Review on Change Management.
2	**Background**
2.1	Internal Audit is an independent and objective assurance and consulting activity designed to add value and improve the operations of SFRS. It helps senior management accomplish their objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.
2.2	The Audit and Risk Assurance Committee (ARAC) provide independent assurance to the Board and the Accountable Officer on the adequacy and effectiveness of the policies, procedures and systems relating to internal controls, risks management and governance. The adequacy of management responses to issues identified by audit activity falls within this remit and quarterly reports are provided to the Committee to fulfil this requirement.
2.3	The Relevant Responsible Officer(s) will agree Internal Audit assignment plans detailing areas for audit review, together with the final report and management responses. Agreed management actions will be monitored through the Internal Audit Follow Up Group, the Senior Management Board, SLT and ARAC.
2.4	The Director of Governance, Strategy and Change will provide a report to the Strategic Leadership Team (SLT) on draft Terms of Reference for each planned audit in advance of submission to ARAC.
3	**Main Report/Detail**
3.1	Aligned to the 2026/27 Internal Audit Plan it was agreed that internal audit, through BDO, would undertake an internal audit review in relation to Change Management.
3.2	The purpose of this review will be to conduct a check in audit on the performance and impact being delivered by the Strategy and Change function. Given the volume of change within the organisation, it is essential that the function is effective in the drive for organisational change. The review will consider the implementation and progress of embedding actions from the previous internal audit on change.

3.3	The scope of the review will cover: • Change Governance • Operational Processes • Stakeholder Engagement • Awareness and Training • Change Function • Action Completion
3.4	The proposed terms of reference is attached as Appendix A, which provides further detail on each of the areas to be covered. The document was prepared by BDO following discussion and agreement by Mark McAteer, as Audit Sponsor.
3.5	The document was then presented to and agreed by the Audit and Risk Assurance Committee on 16 July 2026, subject to proposed changes which have now been made.
3.6	The audit is due to commence on 31 August 2026, with 20 days allocated in relation to planning, fieldwork, review and reporting. BDO have outlined initial information required within the document, with further information to be identified as the audit is undertaken. An update on progress will be provided to SPCC at their meeting on 5 November 2026.
3.7	Additional key contacts will also be identified to ensure that stakeholders within Directorates, i.e. Heads of Function, are consulted and engaged as part of the audit process.
4	**Recommendation**
4.1	The Internal Audit terms of reference for Change Management is provided to the Strategic Planning and Change Committee for information.
5	**Key Strategic Implications**
5.1 5.1.1	**Risk Appetite and Alignment to Risk Registers** In relation to risk appetite the internal audit report aligns to our Compliance appetite and the sub-category of internal governance, including systems of control and data governance for which SFRS has a Cautious appetite.
5.1.2	Risk associated with either areas will be detailed within the final audit report produced and discussed in advance with the responsible owner.
5.2 5.2.1	**Financial** Financial implications arising from the outcome of the report will be managed by the relevant Directorate(s).
5.3 5.3.1	**Environmental & Sustainability** Any implications arising from the report will be managed by the relevant Directorate(s).
5.4 5.4.1	**Workforce** Any implications arising from the report will be managed by the relevant Directorate(s).
5.5 5.5.1	**Health & Safety** Any implications arising from the report will be managed by the relevant Directorate(s).
5.6 5.6.1	**Health & Wellbeing** Any implications arising from the report will be managed by the relevant Directorate(s).

5.7 5.7.1	**Training** Any implications arising from the report will be managed by the relevant Directorate(s).	
5.8 5.8.1	**Timing** The report is provided to the Strategic Planning and Change Committee in advance of the audit fieldwork due to commence on 31 August 2026.	
5.9 5.9.1	**Performance** Any performance implications arising from this report will be managed by the relevant Directorate(s).	
5.10 5.10.1	**Communications & Engagement** Any implications arising from the report will be managed initially through Governance and Compliance and by relevant Directorate(s).	
5.11 5.11.1	**Legal** Any implications arising from the report will be managed by the relevant Directorate(s).	
5.12 5.12.1	**Information Governance** DPIA completed – No. Any DPIA required will be undertaken by the relevant Directorate(s) as required.	
5.13 5.13.1	**Equalities** EHRIA completed – Not in relation to this report. The requirement to undertake an EHRIA will be undertaken by the relevant Directorate(s) as required.	
5.14 5.14.1	**Service Delivery** Any implications arising from the report will be managed by the relevant Directorate(s).	
5.15 5.15.1	**Prevention** Any implications arising from the report will be managed by the relevant Directorate(s).	
6	**Core Brief**	
6.1	Not applicable	
7	**Assurance (SFRS Board/Committee Meetings ONLY)**	
7.1	**Director:**	Mark McAteer, Director of Governance, Strategy and Change
7.2	**Level of Assurance: (Mark as appropriate)**	**Substantial**/~~Reasonable/Limited/Insufficient~~
7.2	**Rationale:**	The terms of reference has been reviewed and agreed by BDO, SLT and the Audit and Risk Assurance Committee.
8	**Appendices/Further Reading**	
8.1	Appendix A – Change Management - Terms of Reference.	

Prepared by:	David Johnston, Risk and Audit Manager
Sponsored by:	Mark McAteer, Director of Governance, Strategy and Change
Presented by:	Mark McAteer, Director of Governance, Strategy and Change

Links to Strategy and Corporate Values

Internal Audit forms part of the Services Governance arrangements and contributes to the Services 2025-2028 Strategy in relation to the following outcomes:

- Our organisational performance, productivity and resilience continually improves, 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**	**Report Classification**	**Meeting Approvals/Outcomes**
Audit and Risk Assurance Committee	*16/07/2026*	*For Scrutiny*	*Agreed*
Strategic Planning and Change Committee	*06/08/2026*	*For Information*	

SCOTTISH FIRE AND RESCUE SERVICE

CHANGE MANAGEMENT- TERMS OF REFERENCE - FINAL

JULY 2026

SIGN OFF			
ON BEHALF OF BDO LLP		ON BEHALF OF SCOTTISH FIRE AND RESCUE SERVICE	
SIGNATURE:	CLAIRE ROBERTSON	SIGNATURE:	MARK MCATEER
TITLE:	DIRECTOR	TITLE:	DIRECTOR OF GOVERNANCE, STRATEGY AND CHANGE
DATE:	16/07/2026	DATE:	16/07/2026

IDEAS | PEOPLE | TRUST

BACKGROUND

BACKGROUND

As part of the 2026–27 Internal Audit Plan, it was agreed that Internal Audit would review the Change Management arrangements within the Scottish Fire and Rescue Service. The review will focus on the structures, processes, and controls in place to support the effective governance, delivery, and embedding of change across the organisation.

The organisation is currently undergoing a significant period of organisational change, with the Strategy and Change Function transitioning into a broader Strategy and Change function. As part of this evolution, governance arrangements are being revised, including the move towards a single Change Board to provide more coordinated oversight of change activity, replacing the previous model of multiple programme-specific boards.

Alongside governance changes, the organisation is seeking to strengthen its overall approach to managing change, including clarifying roles and responsibilities, improving coordination across programmes, and enhancing the consistency of delivery. There is recognition that some key components of an effective change framework are not yet fully embedded, including mechanisms such as change networks or champions to support embedding and adoption across the organisation.

There is also an increasing focus on improving how change is managed and monitored across the organisation, including the need to take a more integrated, portfolio-wide view of performance rather than managing programmes in isolation. This includes strengthening oversight of delivery progress, risks, and outcomes, and ensuring that change initiatives are aligned and collectively managed to achieve organisational objectives.

Overall, while progress is being made to enhance Change Management capability, there remains a need to assess whether appropriate governance, processes, resourcing, and supporting mechanisms are in place and operating effectively to deliver change in a consistent, controlled, and sustainable manner.

PURPOSE OF THE REVIEW

The purpose of this review will be to conduct a check in audit on the performance and impact being delivered by the Strategy and Change function. Given the volume of change within the organisation, it is essential that the function is effective in the drive for organisational change. The review will consider the implementation and progress of embedding actions from the previous internal audit on change. Note that engagement will be undertaken with oversight from the Strategic Planning and Change Committee

MANAGEMENT COMMENTS

Feedback from SLT and management incorporated.

SUMMARY SCOPE AND APPROACH

The following areas will be covered as part of the scope for this review:

- Change Governance
- Operational Processes
- Stakeholder Engagement
- Awareness And Training
- Change Function
- Action Completion

Interviews/documentation review will be undertaken to understand the process and design of control arrangements for controls for the areas under scope. Detailed testing through walkthroughs will be carried out, along with a review of evidence, periodic updates and follow up meetings as required.

A closing meeting will take place to discuss findings and agree actions. We will then produce a draft report that will be provided to management for confirmation of their management actions before issuing a final report.

EXCLUSIONS/LIMITATIONS OF SCOPE

The scope of the review is limited to the areas documented under the scope and approach. All other areas are considered outside of the scope of this review.

Our work is inherently limited by sample testing and therefore will not provide assurance over all change management related matters within the organisation. We are reliant on the honest representation by staff and timely provision of information as part of this review.

Link to Institute of Internal Auditors' (IIA) Topical Requirements

In accordance with the IIA's International Professional Practices Framework, we are required to consider the relevance of the Topical Requirements in our risk assessment.

For this review, we do not deem any of the Topical Requirements as applicable.

DETAILED SCOPE, RISKS & APPROACH - PART 1

The table below and on the following pages outlines the areas which will be covered as part of this review, the key inherent risks associated with the areas under review and our high-level approach to test the design and operational effectiveness (where applicable) of the controls in place to mitigate the risks outlined:

SCOPE AREA	KEY RISKS	APPROACH
CHANGE GOVERNANCE	1. Change governance may not be clearly defined or operating effectively, resulting in weak oversight, inconsistent decision-making, and ineffective prioritisation of change initiatives.	• Review and assess the governance structures in place for overseeing change, including Boards and Committees. Assess whether there is effective integration within the wider governance framework. • Confirm that governance arrangements are clearly defined, including roles, reporting lines, and escalation processes. • Evaluate whether governance forums receive appropriate information and provide effective challenge and oversight of programmes, projects and overarching performance. • For a sample of change initiatives, evaluate whether the roles and responsibilities are clearly defined and applied.
OPERATIONAL PROCESSES	2. Change management processes and controls may not be clearly defined or consistently applied, resulting in ineffective management of projects, including risks to time, cost, quality, and delivery outcomes.	• Review and assess the change management processes and tools in place (e.g. planning, approvals, change control). Confirm whether there are defined processes for monitoring progress, risks, issues, and delivery milestones. • Assess whether the key stages of the change management process provide for a full understanding of costs and benefits, resource requirements, and strategic objective alignment before approval is given. • Review and assess whether approval and document requirements are clearly outlined. • Evaluate whether templates and processes ensure that cost, timelines, risks, and quality are actively and consistently managed and escalated where required. • Through engagement with end users assess whether templates and processes are being embedded within the organisation, and whether the approach taken is fit for purpose. • Review and assess whether management have incorporated the use of AI and emerging technologies within the change management processes. • Review and assess whether learnings from key project milestones are being recorded and incorporated within practices.
STAKEHOLDER ENGAGEMENT	3. Stakeholders and end users may not be effectively engaged or supported, resulting in resistance to change, misalignment with operational needs, and failure to embed change outcomes.	• Review and assess mechanisms for stakeholder engagement, including meetings, workshops, surveys, and communications. • Confirm whether stakeholder feedback is gathered and used to inform change delivery. • Review and assess whether the strategy and change function is providing effective business partnering support throughout the organisation.
AWARENESS AND TRAINING	4. Insufficient awareness, training, and capability in change management may result in inconsistent application of processes and reduced effectiveness of change delivery.	• Review and assess training and awareness initiatives supporting change management throughout the organisation. • Confirm whether staff involved in change activities throughout the organisation are equipped with the required knowledge and skills. • Evaluate whether guidance and support materials are available for those involved in change throughout the organisation. • Review and assess the rollout of change champions throughout the organisation.

DETAILED SCOPE, RISKS & APPROACH - PART 2

SCOPE AREA	KEY RISKS	APPROACH
CHANGE FUNCTION	5. The change function may not have an effective remit and roles and responsibilities to support the organisation to deliver projects and programmes.	• Review and assess the resourcing model for change delivery, including use of permanent and temporary staff. Confirm whether resource requirements and capability needs have been assessed by management. • Review and assess the remit of the strategy and change function. • Review and assess the process for assessing the strategy and change function's performance. • Review and assess delivery of the strategy and change function's business plan.
ACTION COMPLETION	6. Action is not taken to implement recommendations resulting in weaknesses in control and a failure to deliver effective organisation change.	• Review the recommendations from previous PMO and Change related audit reports, and review management updates on progress towards their implementation. • Review documentary evidence and conduct interviews to establish the effective completion of actions to implement the recommendations.

KEY CONTACTS, TIMELINE & LOCATION

KEY CONTACTS				
BDO LLP				
Claire Robertson	Director	Head of Internal Audit	T:07583 237 579	E:Claire.Robertson@bdo.co.uk
Sean Morrison	Internal Audit Associate Director	Engagement lead	E:sean.Morrison@bdo.co.uk	
SFRS				
Mark McAteer	Director of Governance, Strategy and Change	Audit Sponsor	E: Mark.Macateer@firescotland.gov.uk	
Curtis Montgomery	Head of Strategy and Change	Key Contact	E: Curtis.Montgomery@firescotland.gov.uk	
Strategy and Change Function personnel				
SLT, SROs and Heads of Function				
Strategic Planning and Change Committee (attendance at meeting planned)				
Internal audit will endeavour to engage with relevant stakeholders in relation to the scope of the review.				

The staff listed above will be contacted during the fieldwork to assist in completion of the assignment. All these staff will be contacted prior to fieldwork to agree the timing of our visit and should be issued with a copy of this terms of reference. It is important that staff involved with the assignment are notified. To assist us in planning the logistics of the assignment, including provision of documents and meeting organisation the above audit coordinator has been nominated.

PLANNED TIMELINE

AUDIT ACTIVITY	DATE
SCOPING MEETING	21/05/2026
TERMS OF REFERENCE AGREED	TBC
DOCUMENTATION REQUEST DEADLINE	31/08/2026
FIELDWORK COMMENCEMENT	31/08/2026
END OF FIELDWORK	02/10/2026
CLOSING MEETING	09/10/2026
ISSUE OF THE DRAFT REPORT	23/10/2026
RECEIPT OF MANAGEMENT RESPONSES	06/11/2026
ISSUE OF UPDATED FINAL DRAFT	09/11/2026
ISSUE OF FINAL REPORT	10/11/2026
AUDIT & RISK ASSURANCE COMMITTEE DATE	21/01/2027

By accepting this Terms of Reference document you are agreeing to the timing of this audit

LOCATION

We plan to perform this review via a combination of remote and on-site working as required as agreed with you. We will use a combination of conference calls, video conferencing facilities and emails. We will endeavour to limit the amount of time required of key colleagues.

ALLOCATION & FEES

ALLOCATION

This is a 20-day allocation, split as follows:

AREA	DAYS
Planning	*3*
Fieldwork	*13*
Reviewing and Reporting	*4*

FEES

ACTIVITY	DAYS	RATE (£)	COST (£)
Estimated Cost of Review	20	£576	£11,520

BUDGET & ASSUMPIONS

We will charge fees for this assignment in line with our agreed Engagement Letter, including any subsequent changes agreed with you. Our fees for this engagement are set at £11,520 (excluding VAT), this includes planning, delivery, report writing and management review. This fee represents a total of 20 days on a blended day rate of £576. See the table to the left-hand side for a full breakdown of the fees.

The fees are based upon our estimate of the time required to complete the engagement. These costs have been calculated on the assumption that we will receive all information outlined on this page by the dates specified and that we will be granted access to all key personnel.

The allocation outlined to the left-hand side above is based upon our estimate of the time required to complete the engagement outlined within this document. If the scope of work changes, we will communicate with management any predicted over-or-underspend, before invoicing. In addition, we assume for the purposes of estimating the number of days of audit work that there is one control environment, and that we will be providing assurance over controls in this environment. If this is not the case, our estimate of audit day allocation may not be accurate.

TIMING CHANGES AND CANCELLATION

In accepting this Terms of Reference document, you are agreeing to the timing of this audit specified in this document. We will make every effort to accommodate timing changes or cancellation of the audit however any changes within 3 weeks of the start of the fieldwork may result in fees being charged in respect of the audit. Changes with more than 3 weeks’ notice will be accommodated at no extra charge.

ACCESS TO INFORMATION & COLLEAGUES

Any unreasonable delay in gaining access to required information or key colleagues will place audit timings at risk and may result in additional fees to you. Any such charges would be notified to you and agreed at the time the issue is identified.

APPENDIX A: DOCUMENTATION REQUEST

Outlined below and on the following page is an initial information request relating to this audit. Timely receipt of this information is critical to ensure that the objectives of the audit are met and that the work is completed on time. We have provided an overview of what we require from you. If you can please ensure to present the requested documentation as soon as possible from the 31st of August 2026 that would be most appreciated. We have tried to be specific wherever possible; however, please do contact us as soon as possible if you are unsure about any of the information required. Please note that this is an initial request and is not exhaustive – further information requiring your attention (including meetings) will be required at the time of our fieldwork.

INITIAL DOCUMENTATION REQUEST LIST	SCOPE AREA
Change governance framework / policy	Change Governance
Key templates for change management	Operational Processes
List of change initiatives in progress	Operational Processes
Training materials and awareness related to change management	Awareness and Training
Strategy and change function remit	Roles and Responsibilities
Change Board remit	Governance
Resource assessment for strategy and change function	Roles and Responsibilities
Performance reports (related to Change Management) for the last 6 months to date to the Board/sub-Committees	Management Oversight

FOR MORE INFORMATION:

CLAIRE ROBERTSON, HEAD OF RISK ADVISORY SERVICES – SCOTLAND

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