

E. Jackman

CLERK TO THE AUTHORITY

To: The Chair and Members of the People

Committee

(see below)

SERVICE HEADQUARTERS

THE KNOWLE

CLYST ST GEORGE

EXETER DEVON EX3 0NW

 Your ref :
 Date :
 20 July 2023
 Telephone :
 01392 872200

 Our ref :
 DSFRA/PC/SS
 Please ask for :
 Sam Sharman
 Fax :
 01392 872300

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PEOPLE COMMITTEE (Devon & Somerset Fire & Rescue Authority)

Friday, 28th July, 2023

A meeting of the People Committee will be held on the above date, <u>commencing at</u>

10.00 am in Committee Room A, Somerset House, Devon & Somerset Fire &

Rescue Service Headquarters to consider the following matters.

E. Jackman Clerk to the Authority

AGENDA

PLEASE REFER TO THE NOTES AT THE END OF THE AGENDA LISTING SHEETS

- 1 Apologies
- 2 <u>Minutes</u> (Pages 1 8)

Of the previous meeting held on 26 April 2023 (attached).

3 <u>Items Requiring Urgent Attention</u>

Items which, in the opinion of the Chair, should be considered at the meeting as matters of urgency.

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PART 1 - OPEN COMMITTEE

4 Performance Monitoring Report 2023-24: Quarter 1 (Pages 9 - 32)

Report of the Director of Finance & Corporate Services (Treasurer) (PC/23/8) attached.

5 <u>2023 People Survey Results Overview</u> (Pages 33 - 46)

Report of the Director of Finance & Corporate Services (Treasurer) (PC/23/9) attached.

6 <u>His Majesty's Inspectorate of Constabulary & Fire & Rescue Services</u> (HMICFRS) Cause of Concern and Areas for Improvement Action Plan (Pages 47 - 58)

Report of the Chief Fire Officer (PC/2310) attached.

7 People & Culture Update (Pages 59 - 62)

Report of the Chief Fire Officer (PC/23/11) attached.

MEMBERS ARE REQUESTED TO SIGN THE ATTENDANCE REGISTER

Membership:-

Councillors Clayton (Chair), Trail BEM (Vice-Chair), Atkinson, Biederman, Kendall, Peart and Tolchard

NOTES

1. Access to Information

Any person wishing to inspect any minutes, reports or lists of background papers relating to any item on this agenda should contact the person listed in the "Please ask for" section at the top of this agenda.

2. Reporting of Meetings

Any person attending a meeting may report (film, photograph or make an audio recording) on any part of the meeting which is open to the public – unless there is good reason not to do so, as directed by the Chair - and use any communication method, including the internet and social media (Facebook, Twitter etc.), to publish, post or otherwise share the report. The Authority accepts no liability for the content or accuracy of any such report, which should not be construed as representing the official, Authority record of the meeting. Similarly, any views expressed in such reports should not be interpreted as representing the views of the Authority.

Flash photography is not permitted and any filming must be done as unobtrusively as possible from a single fixed position without the use of any additional lighting; focusing only on those actively participating in the meeting and having regard also to the wishes of any member of the public present who may not wish to be filmed. As a matter of courtesy, anyone wishing to film proceedings is asked to advise the Chair or the Democratic Services Officer in attendance so that all those present may be made aware that is happening.

3. Declarations of Interests at meetings (Authority Members only)

If you are present at a meeting and you are aware that you have either a disclosable pecuniary interest, personal interest or non-registerable interest in any matter being considered or to be considered at the meeting then, unless you have a current and relevant dispensation in relation to the matter, you must:

- (i) disclose at that meeting, by no later than commencement of consideration of the item in which you have the interest or, if later, the time at which the interest becomes apparent to you, the existence of and for anything other than a "sensitive" interest the nature of that interest; and then
- (ii) withdraw from the room or chamber during consideration of the item in which you have the relevant interest.

If the interest is sensitive (as agreed with the Monitoring Officer), you need not disclose the nature of the interest but merely that you have an interest of a sensitive nature. You must still follow (i) and (ii) above.

Where a dispensation has been granted to you either by the Authority or its Monitoring Officer in relation to any relevant interest, then you must act in accordance with any terms and conditions associated with that dispensation.

Where you declare at a meeting a disclosable pecuniary or personal interest that you have not previously included in your Register of Interests then you must, within 28 days of the date of the meeting at which the declaration was made, ensure that your Register is updated to include details of the interest so declared.

NOTES (Continued)

4. Part 2 Reports

Members are reminded that any Part 2 reports as circulated with the agenda for this meeting contain exempt information and should therefore be treated accordingly. They should not be disclosed or passed on to any other person(s). Members are also reminded of the need to dispose of such reports carefully and are therefore invited to return them to the Committee Secretary at the conclusion of the meeting for disposal.

5. Substitute Members (Committee Meetings only)

Members are reminded that, in accordance with Standing Orders, the Clerk (or his representative) must be advised of any substitution prior to the start of the meeting. Members are also reminded that substitutions are not permitted for full Authority meetings.

6. Other Attendance at Committees)

Any Authority Member wishing to attend, in accordance with Standing Orders, a meeting of a Committee of which they are not a Member should contact the Democratic Services Officer (see "please ask for" on the front page of this agenda) in advance of the meeting.

PEOPLE COMMITTEE

(Devon & Somerset Fire & Rescue Authority)

26 April 2023

Present:

Councillors Hannaford (Chair), Best, Clayton (Vice-Chair), Kendall, Peart, Thomas and Trail BEM

In attendance:

Councillors Coles (in person) and Cook-Woodman (via Teams)

* PC/22/15 Minutes

RESOLVED that the Minutes of the meeting held on 25 January 2023 be signed as a correct record.

* PC/22/16 Application for Retirement/Re-employment

The Committee considered a report of the Director of Finance, People & Estates (PC/23/3) setting out an application received in accordance with the Authority's approved Pay Policy Statement for 2023-24 for retirement and reemployment.

RESOLVED that the application for retirement and re-employment set out at paragraph 2.3 of report PC/23/3 be approved.

* PC/22/17 Performance Monitoring Report 2022-23: Quarter 4

The Committee received for information a report of the Director of Finance, People & Estates (PC/23/4) detailing performance as at Quarter 3 of 2022-23 against those Key Performance Indicators agreed by the Committee for measuring progress against the following three strategic priorities as approved by the Authority:

- 3(a). Ensure that the workforce is highly trained and has the capability and capacity to deliver services professionally, safely and effectively;
- 3(b). Increase the diversity of the workforce to better reflect the communities we serve, promoting inclusion and developing strong and effective leaders who ensure that we have a fair place to work where our organisational values are a lived experience; and
- 3(c). Recognise and maximise the value of all employees, particularly the commitment of on-call firefighters, improving recruitment and retention.

In particular, the report provided information on performance against each of the following key measures:

- operational core competence skills (beathing apparatus; incident command; water rescue; safety when working at heights or in confined spaces; maritime; driving; and casualty care);
- health and safety (accidents [including near misses]; personal injuries; vehicle incidents (together with the correlation to appliance mobilisation) and reporting against the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR));
- sickness and absence (including mental health) for wholetime, on-call, support, Control and casual staff, by type of sickness and details of the health and wellbeing support offered by the Service. The report also provided comparisons with national fire service data and featured benchmarking for sickness absence against comparable, neighbouring fire and rescue services:
- fitness testing (including support offered for red and amber groups) and a review of testing to explore a more inclusive, role-related functional fitness test for operational staff;
- diversity, with a particular emphasis on the work being undertaken on retention and promoting inclusion by developing strong leadership living the Service's values;
- promoting inclusion, developing strong leaders, living Service values and being a fair place to work;
- strategic workforce planning including details of staff turnover in all categories of the workforce; and
- employee engagement.

The Committee noted and welcomed the point that there were no areas below the 90% minimum threshold on performance against operational core competency skills albeit that performance against Working at Height and in Confined Spaces was at amber (93% overall). This was due to the legacy of recording against two different systems, a matter which could not be resolved until 2025 when the existing legacy position would expire and requalification would be required. It was requested, however, that the term "no action required" in the column headed "Impact and action taken" under paragraph 2.6 of the report be replaced in future as this could be perceive to mean that the Service was not striving to achieve more. The Area Manager (Training and Development) responded that this would be replaced by a commentary on the mitigating action taken in future. It was also confirmed that pilots were being undertaken in conjunction with the Estates Department for the local delivery of training to staff.

Reference was made to performance on health and safety issues which was showing:

- a slight decrease in the rolling 12 month trend on accidents in 2022/23 overall albeit with an increase from 55 to 68 accidents in quarter 4 (January to March 2023);
- there were 21 near misses in quarter 4 of 2022-23, a 50% increase (7 events) on the previous quarter but this was welcomed as it enabled organisational learning to achieve improvements in the longer term;
- personal injuries remained low generally with the rolling 12-month trend showing a reduction from a high of 11 in May 2022 to 5 in February 2023:
- vehicle incidents increased in quarter 4 of 2022-23 by one incident from 36 to 37 although the decreasing long-term trend remained;
- RIDDOR had remained with a decreasing trend over the last five years.
 All dangerous occurrence events were investigated with the lessons learned communicated to staff.

The average number of days/shifts lost due to sickness absence had increased slightly from 8.37 in 2021-22 to 9.4 in 2022-23 (April 2022 to February 2023). The average number of days sickness absence over the rolling 12 months from March 2022 to February 2023 showed a more stable trend in both long and short term certificated absence since July 2022, although short term uncertificated absence had increased from 1.5 days on average to 2.8 days. 53% of all short term absence was due to colds/flue with musculoskeletal coming in second and mental health third. Both musculoskeletal and mental health issues lead to longer periods of absence than colds/flu, however.

The Committee extended its appreciation for the performance on fitness testing which was at 99% now with 1549 out of 1560 staff having passed. It was noted that every effort was made with the 11 individuals who had not passed to bring them up to the required fitness standard. It was further noted that work was being undertaken in conjunction with the National Fire Chiefs' Council to review the fitness standards to ensure a more inclusive approach in future.

The annual measures for Diversity showed there had been a slight decrease in the number of female staff employed from 14.6 % in 2021 to 14.4% in 2022. There had, however, been an increase in the percentage of ethnic minority staff employed from 2.8% to 3.5% in 2022. The figures for Diversity were set out in more depth in a separate report to the Committee (Minute PC/22/18 below refers). The Chair expressed concern that the number of women and LGBT and ethnic minority staff within the Service was still too low. The Diversity Manager undertook to report in more depth at the next meeting on the actions being taken to improve performance in this area.

The Service had implemented a Strategic Workforce Planning Group to look more closely at overall establishment levels month on month. The Group received regular updates on sickness absence data, recruitment and selection processes and development programmes underway in order to keep informed and be proactive in identifying trends at an earlier stage going forwards. The data showed that in 2022-23, the leavers were split with:

- 94 On Call leavers,
- 67 support staff; and
- 36 wholetime.

There were also:

- 93 On Call starters;
- 36 support staff starters; and
- 23 wholetime starters.

The figures continued to indicate that the Service was losing more staff than it was recruiting but noted that there had been a recruitment freeze instigated during part of the 2022-23 financial year. A new Human Resources Systems project was underway which would provide greater visibility of people management data including structure, performance and sickness absence.

It was also noted that a new, annual staff survey had been launched recently which it was envisaged would provide an updated picture, the results of which would be reported to a future meeting of the Committee.

* PC/22/18 Workforce & Recruitment Diversity Report 2022

The Committee received for information a report of the Director of Finance, People & Estates (PC/23/5) on Workforce & Diversity Recruitment in 2022 submitted in accordance with the provisions set out within Section 149 of the Equalities Act 2010. This Act provided for public bodies to publish equality information pertaining to the makeup of its workforce on an annual basis and covering all the protected characteristics including gender, disability, ethnic group, religion and sexual orientation.

The key findings identified in the report were:

- Female representation in operational roles (On Call and Wholetime) remained low at 6.5% and below the national fire sector benchmark of 8%;
- There was a reduction in female starters in the On Call which, at 8, was 2 less than in 2021 although the overall number of operational posts occupied by women increased to the highest ever at 110;
- There had been a decrease in the number of applications submitted by women for operational roles;
- The percentage of applicants from minority ethnic backgrounds was 7.8% which was close to the figure of 8% representation in the community;

- Representation from people from minority ethnic backgrounds in the Service was 0.8% which was four times lower than in the communities of Devon and Somerset; and
- External application rates from Lesbian, Gay, Bi-sexual and Transgender (LGBT) people was 2.5% which was lower than the community average of 3.7%.

There was concern expressed in respect of some of the terminology used in this report such as "People of Colour". It was explained that the staff group engaged with in the Service had requested the use of this terminology specifically. The Deputy Chief Fire Officer suggested that the Chair should meet with the staff engagement group to hear their views on this matter at first hand.

Reference was made to the need to engage more with community groups such as at local PRIDE events, fairs, schools and colleges and so on to raise aware ness of the work of the Service and to promote the opportunities that may be available, albeit that recruitment was paused presently due to the budgetary restraints. The Deputy Chief Fire Officer undertook to work closely with the Human Resources and Community Safety teams to maximise opportunities for engagement with local communities.

* PC/22/19 People & Culture Update

The Committee received for information a report of the Deputy Chief Fire Officer (PC/23/6) setting out details of the work that had been undertaken within Devon and Somerset Fire and Rescue Service to address the Cause of Concern on culture and specifically how staff treat one another as raised within the report of His Majesty's Inspectorate of Constabulary & Fire & Rescue Services (HMICFRS). An action plan had been developed to address the cultural improvements needed (also subject to a separate report elsewhere on the agenda for this meeting). This also took into account the outcome of national recommendations made within the London Fire Brigade cultural review, the Metropolitan Police cultural review and the spotlight report published recently by HMICFRS.

The action taken to achieve cultural change to date included (amongst others):

- The establishment of a sponsorship programme "Our Time" in collaboration with Devon & Cornwall Constabulary, Dorset Constabulary and Devon County Council to remove barriers to increasing diversity and inclusion in the workforce, particularly in relation to progression for female staff;
- Membership of the Employers Network for Equality and Inclusion which provided guidance and support around the development of policies together with facilitating benchmarking through an assessment called TIDE. In 2018/19 the Service has achieved the Bronze Award, improving to the Silver Award in 2019/20 which has been maintained to 2022/23;

- The introduction of an intervention programme "Safe To" to foster psychological safety within the organisation so that staff feel included, safe to learn and safe to challenge;
- Implementation of a Respect and Fairness Toolkit to provide staff with options and the resources needed to deal with experiencing, witnessing or managing unwanted behaviour; and
- The implementation of the Core Code of Ethics with training to back this up.

The Committee was also apprised of the actions being taken directly to address the Cause of Concern highlighted by HMICFRS. 23 actions were established and the progress made included:

- The provision of two, new eLearning packages on Diversity and Inclusion, one for all staff and one for managers;
- The delivery of Values, Behaviours and Ethics training to all staff (with a 90% take up to date);
- The removal of all inappropriate material form Service premises; the development of a new Personal, Performance Development tool featuring mandatory questions on bullying, harassment and discrimination; and
- The communication of the general outcomes of discipline cases to staff for awareness.

The Committee endorsed and welcomed the progress made against the recommendations made by HMICFRS as set out within the report but asked for a red, amber, green status to be added to future reports to facilitate gauging progress.

NB. Minute PC/23/20 below also refers.

* PC/22/20

<u>His Majesty's Inspectorate of Constabulary & Fire & Rescue Services</u> (HMICFRS) Cause of Concern and Areas for Improvement Action Plan

The Committee received for information a report of the Deputy Chief Fire Officer (PC/23/7) outlining progress to date against the Action Plans developed to address both the Cause of Concern and Areas for Improvement identified following the most recent Service inspection by His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS).

In terms of the Cause of Concern and 14 Areas for Improvement identified by HMICFRS, 8 had been linked to the People Committee for tracking.

Seven of the actions within the Cause of Concern Action Plan were recorded currently as "In Progress – Off Track" due to:

 01a.03: 90% of individuals had completed the training presentation on values, behaviours and ethics. A decision needed to be made on the target completion level for all staff across the Service;

- 01a.06: This action had been delayed due to problems with the current PPD system and therefore was off track as its target completion date (28/02/2023) had now passed;
- 01a.07: This action had been changed to now include three charters instead of the four originally planned. These will be trainer/ trainee charter, customer service charter (external) and an internal charter between staff. Work is already being progressed on the trainee/ trainer and external charters, the internal charter will now be developed;
- 01a.08/ 01b.01: The first core brief on culture will form part of the next blog by the Assistant Chief Fire Officer and additional training will be delivered through Innovation Central. This action has been marked as off track as its target completion date (31/12/2022) has now passed.
- 01b.08: Support has been given from the Organisational Development department to incorporate the Freedom to Speak Up Guardian into an existing role. Due to the approach taken to establish this role, through consultation with a working group, the action has taken longer than expected to complete. The Service's Executive Board had agreed that the action will remain as 'Off Track' until the Freedom to Speak Up Guardian had been established; and
- 1b.11: This action had been completed but there was an issue with the
 policy management system and getting the policy approved. This
 action had been marked as off track as its target completion date
 (28/02/2023) had now passed.

It was noted that one action within the Areas for Improvement action plan was currently recorded as 'In Progress – Off Track'. This was because action 01a.06 'PPDs to be completed in line with policy and recorded on Workbench' (outlined as off track in the Cause of Concern update above) was also linked to HMI-3.4-202214 (PDR Process), which was now also showing as off track. One Area for Improvement, HMI-3.4-202215 (High Potential Staff) had been paused due to dependencies on the Area for Improvement around the selection and promotions process (HMI-3.4-202213).

NB. Minute PC/23/19 above also refers.

*DENOTES DELEGATED MATTER WITH POWER TO ACT

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Agenda Item 4

| REPORT REFERENCE NO. | PC/23/8 | | |
|---|---|--|--|
| MEETING | PEOPLE COMMITTEE | | |
| DATE OF MEETING | 28 JULY 2023 | | |
| SUBJECT OF REPORT | PERFORMANCE MONITORING REPORT 2023 – 2024: QUARTER 1 | | |
| LEAD OFFICER | DIRECTOR OF FINANCE & CORPORATE SERVICES (TREASURER) | | |
| RECOMMENDATIONS | That the report be noted. | | |
| EXECUTIVE SUMMARY | The strategic priorities against which this Committee is measuring performance are: | | |
| | 3(a) - Ensure that the workforce is highly trained and has the capability and capacity to deliver services professionally, safely and effectively; | | |
| | 3(b) - Increase the diversity of the workforce to better reflect the communities we serve, promoting inclusion and developing strong and effective leaders who ensure that we have a fair place to work where our organisational values are a lived experience; and | | |
| | 3(c) - Recognise and maximise the value of all employees, particularly the commitment of on-call firefighters, improving recruitment and retention. | | |
| | This report sets out the Services' performance against these strategic priorities for the period April – June 2023 (Quarter 1) in accordance with the agreed measures. A summary is also set out at Appendix A for ease of reference. | | |
| RESOURCE IMPLICATIONS | N/a | | |
| EQUALITY RISKS AND BENEFITS ANALYSIS | N/a | | |
| APPENDICES | Summary of Performance against Agreed Measures. Forward Plan | | |
| BACKGROUND PAPERS | N/a | | |

1. BACKGROUND AND INTRODUCTION

- 1.1. The Service's 'People' strategic policy objectives are:
 - 3(a) Ensure that the workforce is highly trained and has the capability and capacity to deliver services professionally, safely and effectively;
 - 3(b) Increase the diversity of the workforce to better reflect the communities we serve, promoting inclusion and developing strong and effective leaders who ensure that we have a fair place to work where our organisational values are a lived experience; and
 - 3(c) Recognise and maximise the value of all employees, particularly the commitment of on-call firefighters, improving recruitment and retention
- 1.2. The performance in quarter 1 of 2023-24 as measured against the agreed indicators is set out in this report for each of these policy objectives.

2. <u>PERFORMANCE MONITORING – STRATEGIC POLICY OBJECTIVE</u> 3(a)

Strategic Policy Objective 3(a) 'Ensure that the workforce is highly trained and has the capability and capacity to deliver services professionally, safely and effectively'.

Operational Core Competence Skills:

2.1. Operational Core Competence Skills:

The Core Competence Skills recognised by the service are Breathing apparatus (BA), Incident Command (ICS), Water Rescue, Working at Height (SHACS), Maritime, Driving and Casualty Care (CC).

- 2.2. The agreed (as per the October 2022 People Committee meeting, Minute PC/22/8 refers) Core Competency performance thresholds are:
 - 95% 100% Green
 - 90% 95% Amber
 - <90% Red
- 2.3. The performance in quarter 1 as measured against the revised core competencies is shown in the following table:

| Core Competence inc. subsections of competence. | Measure | Rationale | % | Impact and action taken |
|---|--|---|-----------------|---|
| Breathing Apparatus (BA) | < 90% + Risk based impact identified | 90% provides tolerance for course failures, personnel returning from long-term absence and non-attendance. | 97.8 % Green | Within tolerance for each location. No remedial action required. |
| Incident Command (ICS) Inc.: Operational, Tactical, Strategic and JESIP | < 90% + Risk based impact identified | Only people required to assume operational command have this skill. This relates to 700 members of staff. | 97.6 % Green | Within tolerance for each location. No remedial action required. |
| Water Rescue Inc.: Water Rescue 1st Responder Water Rescue Technician | < 90% + Risk based impact identified | A minimum of 2 trained people per appliance is required to enable a response. 1361 members of staff are competent across the various levels. | 96.8 % Green | Within tolerance for each location. No remedial action required |
| Working at Height and Confined Spaces (SHACS) Inc.: Level 1, | < 90% + Risk based impact identified | 90% provides tolerance for course failures, personnel returning from long-term absence and non-attendance. | 92 % | Within tolerance for each location. |
| 2, 3 | | SHACS competency is 92% across the three different levels. This does not impact service delivery and | | Monitoring attendance of planned training courses to ensure tolerance <90% is |
| | | therefore does not require intervention. | Green | maintained during Quarter 2. |

| Core Competence inc. subsections of competence. | Measure | Rationale | % | Impact and action taken |
|--|--|--|-----------------|--|
| Maritime Level 2 | < 90% + Risk based impact identified | 450 people, across 15 stations are required to maintain the Maritime Skill. | 98.2 % Green | Within tolerance for each location. No remedial action required. |
| Casualty Care (CC) Inc.: Level 1, 2 | < 60% + Risk based impact identified | Service policy states 60% of operational personnel trained to this standard. 60% is 839 people. Currently 1375 members of staff are trained in casualty care. | 98.4 % Green | Within tolerance for each location. No remedial action required. |
| Response Driving Inc.: Primary Response (PRDC) Fire Appliance (EFAD) Specialist Vehicles | < 90% + Risk based impact identified | 90% provides tolerance for course failures, personnel returning from long term absence and non-attendance. | 98.7 % Green | Within tolerance for each location. No remedial action required. |

Health & Safety:

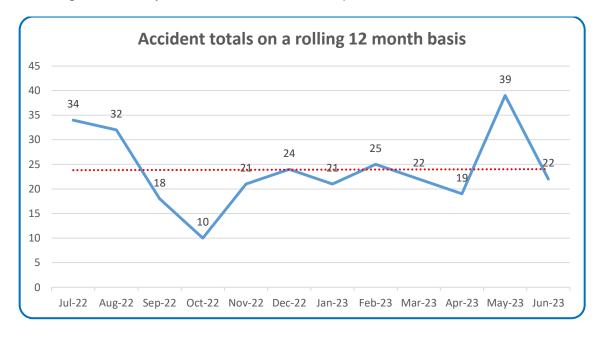
General:

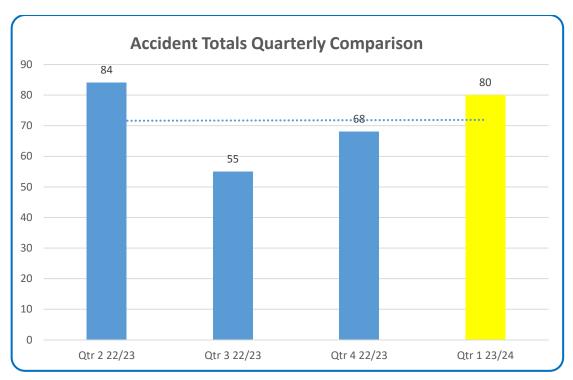
- 2.4. In support of staff safety, 93 premises audits took place through 2022/23. All Service locations were audited over the 12-month audit programme. The audit reviewed the management of health and safety across a broad area, this included but not limited to:
 - The management of PPE;
 - fire safety;
 - the training structures and compounds;

- machinery and equipment;
- breathing apparatus cleaning areas;
- general management of the facility including defect reporting; and
- first aid and food safety.
- 2.5. The audit contained 144 questions which sought to identify legislative compliance as well as good practice. The findings were generally positive, with the majority (74 locations) achieving compliant scores in 80-98% of the audit questions. Areas identified for improvement have been placed into action plans for the locations. The Health and Safety Team will monitor completion of the actions. The audits have been well received and have reinforced the continual drive with a positive safety culture.
- 2.6. Work continues to take place to reduce the risk from contaminants; this is structured through the project management process. The project will deliver a risk assessed and proportionate approach to dealing with the issues relating to fire contaminants as identified in the report by the University of Central Lancashire (UCLan report) and other scientific research into the physical and mental health risks associated with exposure to fire-related contaminants. This will identify procedures and control measures applicable to incidents and other work environments including vehicles etc.

Accidents

2.7. The overall trend for accidents over the last 12 months has plateaued. Accident rates fluctuate through the year, however the average over the period is 24 accidents per month. The quarter 1 accident numbers are up by 12 on the previous quarter and up 35 for the same quarter in 2022. It has been identified there's been an increase in vehicle related safety events. The Organisational Road Risk Group have increased their meetings to monthly in order to review and improve this area.

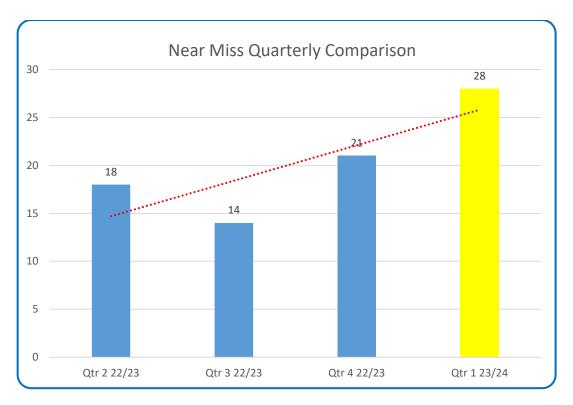




Near Miss:

- 2.8. There were 28 near misses in Quarter 1, a 33% (7 events) increase on reporting from the previous quarter. The benefits of near miss reporting continue to be communicated by the Health and Safety Team. The wider cultural work with the 'Safe to' campaign will help to influence improvements in this area.
- 2.9. The near miss reports during Quarter 1 are varied. One of note relates to the mirror arms folding back on the Medium Rescue Pump at speeds beyond 56mph. Other occurrences have been identified which has led to short term controls to be put in place whilst a solution was implemented.

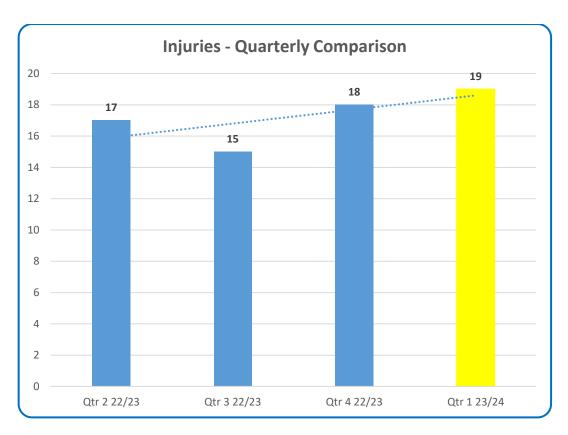




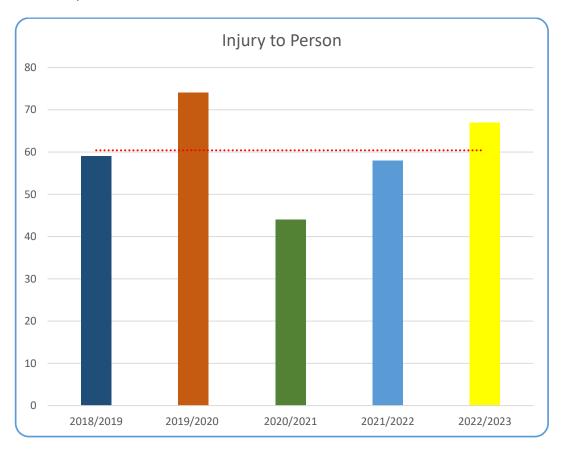
Personal Injuries:

- 2.10. The charts compare the Service's injury rates over a rolling 12-month period, as well as highlighting the Quarter 1 figures. The injury figures in general remain low, the trendline showing a slight increase over the 12-month period. Quarter 1 showed an increase of 1 injury when compared to the previous quarter, a 5.5% rise in injuries.
- 2.11. Injury rates remain low with very slight fluctuations through the reporting period. There is a spike in May but there is no trend identified within the incidents. Injury rates will continue to be monitored.



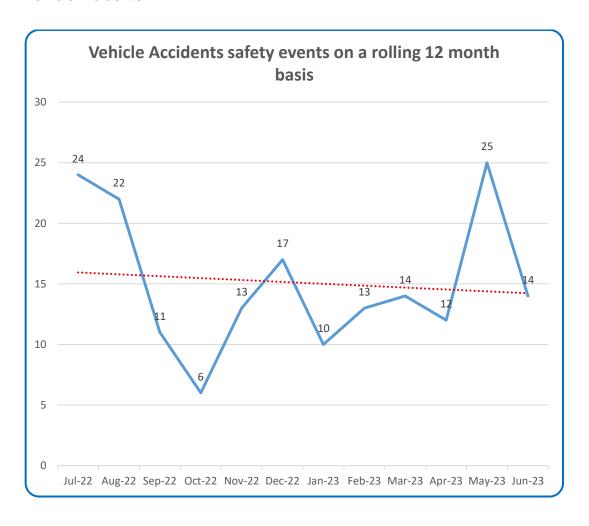


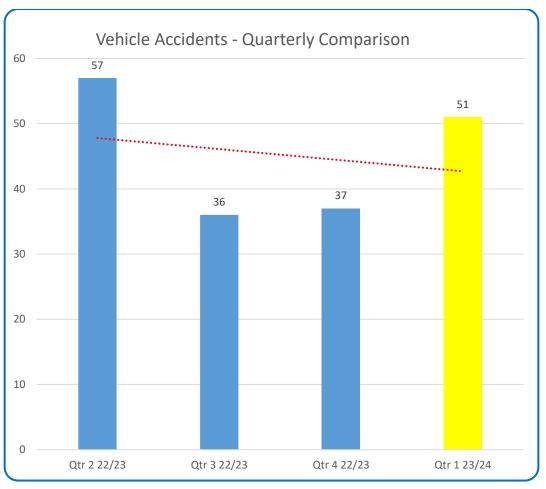
2.12. The annual trend over the last 5 financial years (2018/19 – 2022/23), however, has remained level:

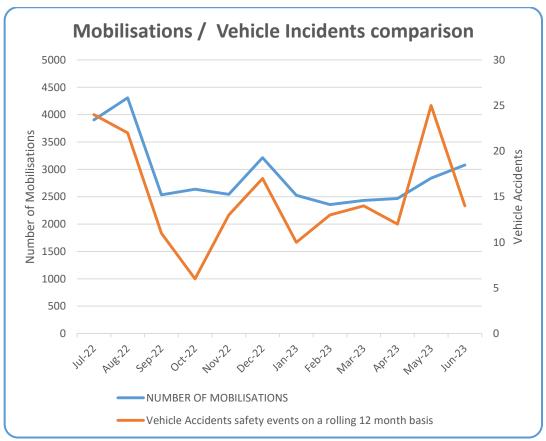


Vehicle Incidents:

- 2.13. Vehicle related incidents increased in quarter 1, with a 38% (14 incidents) increase on the previous quarter. Vehicle related accidents are primarily during non-blue light activity, the majority related to slow speed manoeuvring, for example, clipping hedges and banks on tight lanes, or another vehicle in congested streets, as well as when manoeuvring at the incident.
- 2.14. The Organisational Road Risk group is meeting monthly due to the spike in vehicle related safety events. It has been observed from the 2022 data that vehicle incidents increase from April through to July, and then reduce August to October. One theory is that we see more incidents whilst the hedges are left to grow, and that the reduced incident rates occur around the time farmers and councils are cutting the hedges again in August and September. An additional cut in May / June could support a reduction in vehicle incidents.

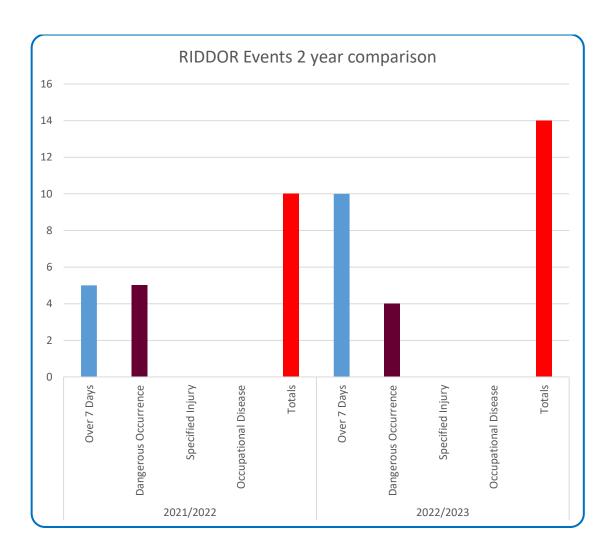


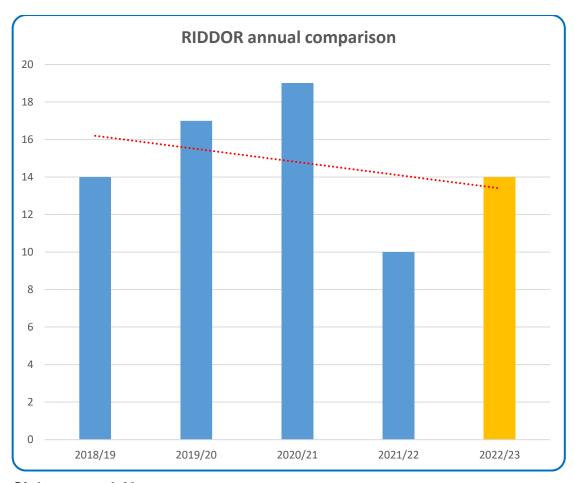




Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR):

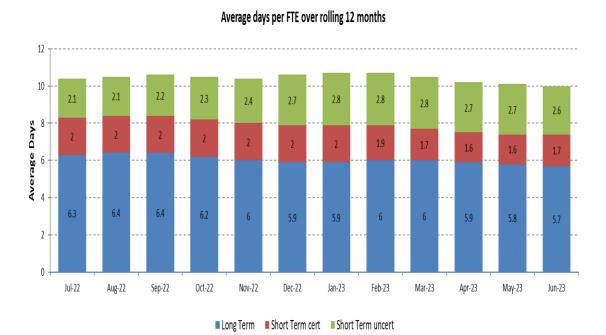
- 2.15. The RIDDOR trend line over the last 5 years indicated a decline in RIDDOR reports. During the COVID-19 Pandemic there was a reduction in RIDDOR reportable events, mostly a reduction in 'Over 7-day injury' related events. The 'Dangerous occurrence' events are predominantly related to Breathing Apparatus failures. All have been investigated with the lessons learnt communicated.
- 2.16. There have been 2 reported RIDDOR incidents during this reporting period (Quarter 1). An 'Over 7-day injury' where a firefighter's leg swelled up following a fitness test and a 'Dangerous Occurrence', which was a BA set failure during hot fire training.





Sickness and Absence

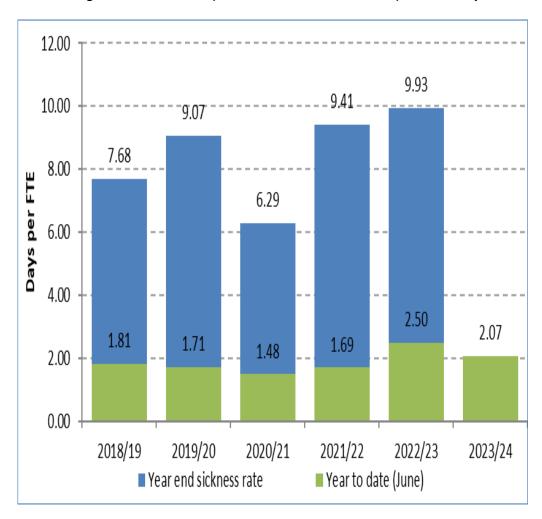
2.17. Total sickness absence average days have marginally decreased since Quarter 4 with long-term sickness (28 days or more), being at its lowest in over 12 months. Short term uncertified absence, mainly caused by cold/flu, has remained high since December.



Page 20

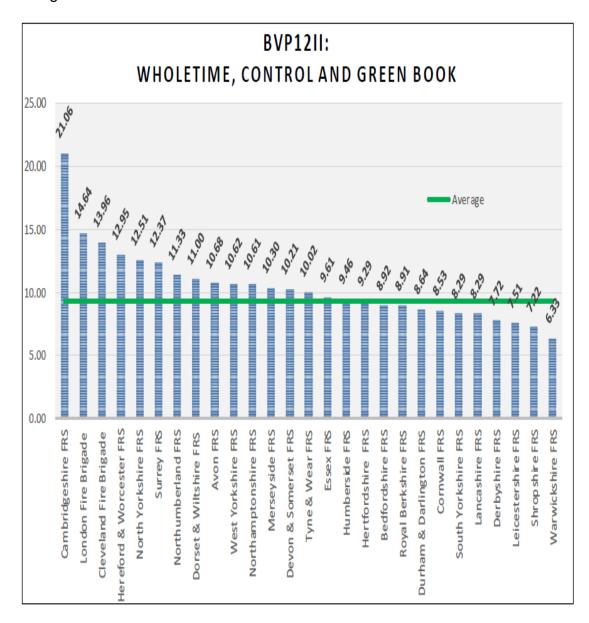
Annual comparison (average days lost) year on year per FTE

2.18. The Service average days lost for the period April to June at 2.07 has seen a slight decrease compared to 2.5 for the same period last year.



National Fire Service Data

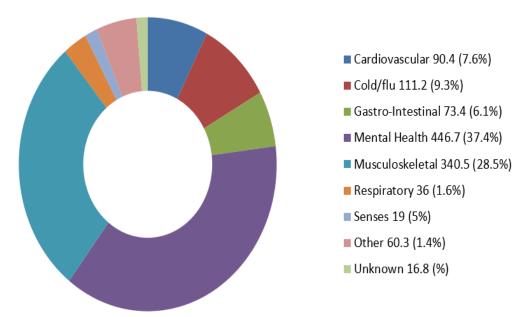
2.19. The Cleveland National Fire Service report for Quarter 4 indicates that for the 2022-23 year, the national average of shift days lost stood at 9.41 days per employee – this was based on the data submission of 27 eligible brigades:



Shift days lost by sickness type

2.20. In the year to date 'mental health' and 'musculoskeletal' are the top sickness absence reasons across all staff groups. 'Cold/flu' has significantly reduced since the last quarter. The highest number of absences is caused by mental health (37%), with musculoskeletal second (28%).



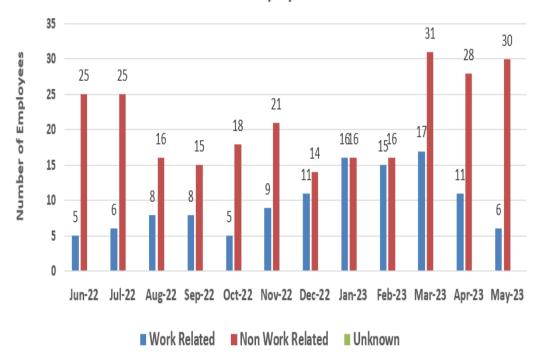


- 2.21. Understanding our top reasons for absence allows us to establish and maintain interventions which directly address those, for example our physio provision for musculoskeletal injuries and counselling service for mental health issues.
- 2.22. Musculoskeletal injuries are the main cause for absence in our station based Wholetime and On Call staff groups (39-45% of shifts lost). Mental health is a very close second in our station based Wholetime staff group (38%).
- 2.23. Since November there has been a slight increase in the number of absences due to musculoskeletal injuries in our operational staff groups, although the number is lower than in this 12-month period compared to the period before that. There has been a healthy uptake of physiotherapy sessions in line with this. The number of musculoskeletal absences as a result of an injury on duty varies month on month around 5-10%.

Mental Health

2.24. The graph below shows stress related sickness reported over the last 12 months for work related and non-work-related sickness absence. It shows a steep increase in the number of non-work-related absences and a reassuring decrease of work-related absences towards the end of the period.

Stress Related Sickness Number of Employees



2.25. Where stress is, or is likely to, affect performance at work a Personal Stress Assessments (PSA) can be undertaken to identify means to support the employee as an early intervention. Referrals for Counselling sessions have a steady uptake.

Health and Wellbeing Support

- 2.26. Since the Service started a partnership with Benenden Health in July 2022, there has been a reduction in participating members from 94 to 78. It is most likely a result of the cost-of-living crisis, and other factors which may affect a family's financial situation, leading to families reviewing their monthly spending and setting different priorities. Further awareness raising of the benefits across the Service will be undertaken.
- 2.27. From July 2022 to June 2023, those scheme members who accessed a benefit were 64% for 24-hour GP advice line, 27% for diagnostic consultation & tests and 9% physiotherapy.
- 2.28. The current wellbeing network which includes trained Staff Supporters and Mental Health First Aiders is being rebranded and supported to develop into a Wellbeing Champions network. This will pro-actively support the health and wellbeing agenda across the Service.

- 2.29. All employers have a duty under the Care Act 2014/Equality Act to make 'reasonable adjustments' in the workplace to enable a carer to keep working. In line with this, and to increase the support already available to employees who are carers, the Service will be joining the Carer Friendly Employer scheme. This will involve encouraging open conversations between employees and line managers/HR/Occupational Health about a person's caring role. In addition, existing policies will be reviewed to ensure they cover carer needs sufficiently including information on requesting flexible working/carers leave. Guides and toolkits will also be provided.
- 2.30. The Service works closely with the Firefighters Charity to anticipate stress related issues, engaging in workshops and providing access to resources. Teams and departments dealing with significant change in staffing and structure are supported by the welfare team with targeted initiatives.
- 2.31. Health and Wellbeing information has now been fully embedded within the induction packs and sessions. This will embed the awareness of support from the start of employment with the Service.

Fitness Testing

| | Total Number | Percentage |
|-------------------------|--------------|------------|
| Number requiring test | 1558 | 100% |
| Number Passed | 1538 | 98% |
| Red & Amber (additional | 20 | 2% |
| support) | | |

2.32. The 2023/24 fitness testing period has now begun. Currently 1538 members of staff have met the fitness standards whilst 20 did not. Of those 20, 2 failed to reach the required standard and the remainder are classed as Red for a variety of other reasons (long term absence etc.)

Supporting the Red & Amber groups

- 2.33. The Red and Amber (Fail) group equates to 2 individuals who did not meet the required fitness standards and now require additional support. These members of staff are subject to a 3-month retest period and receive a development plan, including a fitness and nutrition plan and ongoing additional support from the fitness instructor.
- 2.34. At 6 months, if staff are still unable to achieve the required standard, then a capability process is started, working with the HR business partners.

3. PERFORMANCE MONITORING – STRATEGIC POLICY OBJECTIVE 3(b)

Strategic Policy Objective 3(b) - 'Increase the diversity of the workforce to better reflect the communities we serve, promoting inclusion and developing strong and effective leaders who ensure that we have a fair place to work where our organisational values are a lived experience.'

Diversity:

3.1. This is an annual measure looking to see a year-on-year improvement in addition to the separate Diversity and Recruitment annual report. The next report will be April 2024.

Promoting Inclusion, developing strong leaders, living the values, a fair place to work:

- 3.2. Progress against actions related to both this data and other findings in the People Pillar of the HMICFRS report are being reported to this Committee separately to this performance report.
- 3.3. With the appointment of a Speak Up Guardian and Deputy Guardians, the Service is providing additional ways for staff to highlight and address issues quicker and in a confidential way. It will give staff reassurance of support and finding appropriate solutions whilst providing the feeling of psychological safety.
- 3.4. The Service is active in Women in the Fire Service (WFS), the national group campaigning and highlighting diversity issues at a national level. The Vice Chair of WFS, a Regional Representative and Local Representative are DSFRS employees. WFS run an annual training and development weekend in June each year and the Service supported five women to attend.
- 3.5. Throughout June, awareness raising events have been happening for Pride month, including webinars, social media posts and staff communications. Teams attended Tavistock and Exmouth Pride with a team to engage with the community. The feedback from their attendance was very positive. Various other locations (Taunton, Torbay, Plymouth, Barnstaple) will have their Pride events at the end of July, in August and September.
- 3.6. Early June, a team, in collaboration with SWAST, attended the Respect Festival in Exeter for a multi-cultural experience and to provide prevention guidance. Armed Forces Day in Plymouth also saw a team attend.
- 3.7. New induction sessions have been implemented for On Call, Professional, Control and Wholetime staff which now include the setting of expectations of behaviour, values and ethics.

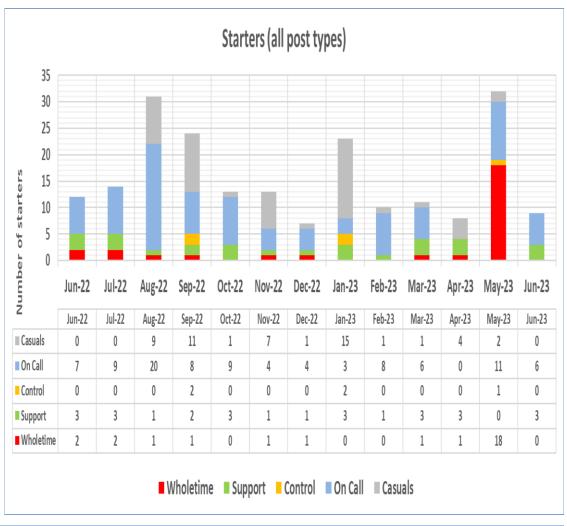
- 3.8. The Menopause working group has, after 5 years of successful action, changed its name and remit to 'Women's Health in the Workplace'. To ensure balance and focus, a 'Men's Health in the Workplace' group has been initiated at the same time.
- 3.9. Following collaboration with and renewed guidance from the National Fire Chiefs Council, the Equality Risk & Benefit Analysis procedure has been reviewed and updated to ensure new initiatives, policies and projects continue to be assessed on their impact on community and staff groups in according to societal norms and community insights. Training on the new procedure has started to be rolled out across teams most likely to develop new policies and projects, but it will ultimately cover most managers in the Service.
- 3.10. The most recent Leading Conversations events included a session to further discuss and explore values, ethics and behaviours to support managers in leading their teams with psychological safety in mind. A session to introduce our new customer charter saw the Service adopt a standardised inclusive approach to customer service, whether this is internally e.g., staff, teams and departments, or externally e.g., members of the public and businesses. A session on Positive Action highlighted representation of groups within the Service and the need the level the playing field when it comes to access to employment and progression opportunities.
 - 3.11. Our Time sponsorship programme continues until the end of September 2023. This programme is in line with a national drive to move towards a diverse workforce and inclusion within the Fire and Rescue Service. It is recognised that certain initiatives can positively affect the gender balance of senior leadership teams and Sponsorship is one of the initiatives mentioned specifically by the Government Equalities Office as being effective for this purpose. Sponsorship models help people build relationships with senior leaders who will advocate on their behalf and create opportunities capable of propelling their career forward.
 - 3.12. The programme, facilitated in collaboration with Devon & Cornwall Constabulary, Dorset Police, Dorset & Wiltshire Fire & Rescue, and Devon County Council, is designed for women in middle management positions who are looking to develop their leadership skills and to progress. It pairs seven women with identified talent and potential with sponsors at senior management level, either female or male, for a minimum of 12 months. The sponsors provide mentoring and coaching, and advocate for and use their influence to help women access the networks, contacts and opportunities needed to progress to the next stage in their careers.
 - 3.13. Cross organisational Action Learning Sets, with both mixed groups and groups specifically for women or managing diverse teams, have been completed in the last six months or are just coming to an end before the summer leave period. These groups see staff from different organisations come together to discuss work related matters and find solutions through a group coaching approach.

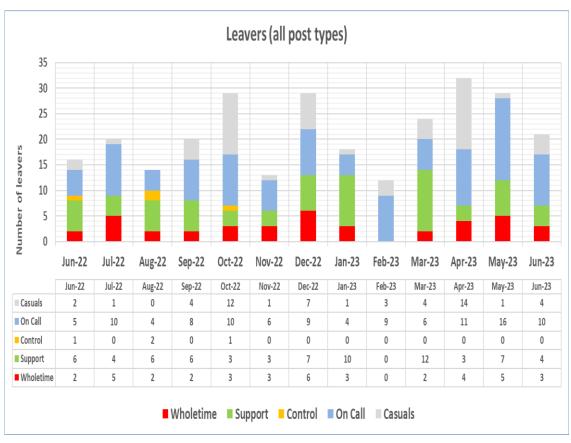
Update on Strategic Workforce Planning

- 3.14. On a monthly basis, the People Services team provide the following information to the Strategic Workforce Planning group:
 - Current position on the overall establishment to provide an overview of current establishment figures, starters and leavers for staff groups;
 - Sickness absence data, including long term and short-term sickness and an overview of restricted duties cases;
 - Updates on recruitment and selection processes, including information on uniformed positions to give clear indication on where current vacancies are, and the overall effect on workforce numbers; and.
 - Development Programme updates to outline and inform the number of individuals progressing through assessment centres in order to be ready to apply for promotion into crew, watch, station manager roles as and when they become vacant.
- 3.15. This data enables the Service to workforce plan effectively in a proactive way, giving assurance on overall establishment numbers and enabling us to identify trends more easily going forward.
- 3.16. The following iterations of the data presented will start to inform the Committee on trends that are relevant to workforce planning.

Turnover

- 3.17. The impact of restricting recruitment activity over the last year has meant that staff numbers are dropping overall in comparison to earlier years. The Service will need to monitor this closely in terms of what can be effectively delivered with reduced resourcing in place.
- 3.18. The graphs overleaf show the last 12 months of starter and leaver activity and indicate that the biggest retention issue overall is within the on-call workforce.





Page 29

People Services Systems Project

3.19. The project to implement a new HR system is currently underway. The initial blueprinting and test build milestones have been achieved and the testing of the core HR module is planned from mid-July to mid-August, with a 'Go-Live' date planned for mid-September. The move to this system is expected to provide managers with greater visibility of people management data within their teams, including structure, performance, sickness and other absences. Phase 2 of the project (early 2024) will include the introduction of an integrated recruitment module and help to better inform workforce planning at an organisational level. Project benefits include improvements to a number of processes and enable more efficient working practices, but a high level of effort and time will continue to need to be invested to make this implementation a success.

4. <u>PERFORMANCE MONITORING – STRATEGIC POLICY OBJECTIVE</u> 3(c)

Strategic Policy Objective 3c) 'Recognise and maximise the value of all employees, particularly the commitment of on-call firefighters, improving recruitment and retention.'

Recruitment & Retention

4.1. Reported above within the update on Strategic Workforce Planning.

Employee Engagement

4.2. A new annual staff survey was launched in April 2023, and a summary of response rates and results are presented in a separate paper at todays committee.

SHAYNE SCOTT

Director of Finance & Corporate Services (Treasurer)

APPENDIX A TO REPORT PC/23/8

SUMMARY OF PERFORMANCE AGAINST INDICATORS

Quarterly Reporting:

| Target area: | Agreed performance measure: | Q2 (2022- 23) | Q3 (2022- 23) | Q4 (2022- 23) | Q1 (2023- 24) | Trend |
|---|--------------------------------|--|--|--|--|----------|
| Firefighter Competence | 90% (as of October 2022) | 1 of 7 core compete ncies below 95% | 1 of 7 core compete ncies below 90% | 0 of 7 core compete ncies below 90% | 0 of 7 core compete ncies below 90% | — |
| Accidents | Decrease | 84 | 55 | 68 | 80 | 1 |
| Near Miss- | Monitor | 18 | 14 | 21 | 28 | |
| Personal injuries | Decrease | 17 | 15 | 18 | 19 | |
| Vehicle Accidents | Decrease | 57 | 36 | 37 | 51 | 1 |
| Short term (average days per person, per month) | Decrease | 4.1 | 4.5 | 4.7 | 4.3 | |
| Long term (average days per person, per month) | Decrease | 6.4 | 6.0 | 6.0 | 5.8 | |
| Stress related absence (average number of people per month) | Decrease | 24.3 | 26 | 37 | 37.5 | |

APPENDIX B TO REPORT PC/23/8

People Committee Performance Reporting Forward Plan

| Meeting scheduled | Reporting on | Subjects |
|-------------------|--------------|--|
| April 2023 | Quarter 4 | Performance Monitoring report including financial year data: • RIDDOR reporting, • Workforce planning • Diversity |
| July 2023 | Quarter 1 | Performance Monitoring report including financial year data: • National FRS Sickness comparisons • National FRS H&S comparisons, |
| September 2023 | Quarter 2 | Performance Monitoring report including 6 - monthly data: • Workforce planning • People survey action plan update |
| January 2024 | Quarter 3 | Performance Monitoring report including Calendar Year data: • Fitness testing, • Grievance, Capability & Disciplinary |

Agenda Item 5

| REPORT REFERENCE NO. | PC/23/9 | |
|--------------------------------------|--|--|
| MEETING | PEOPLE COMMITTEE | |
| DATE OF MEETING | 28 JULY 2023 | |
| SUBJECT OF REPORT | 2023 PEOPLE SURVEY RESULTS OVERVIEW | |
| LEAD OFFICER | DIRECTOR OF FINANCE & CORPORATE SERVIICES (TREASURER) | |
| RECOMMENDATIONS | That the report be noted. | |
| EXECUTIVE SUMMARY | This report highlighting the purpose, methodology and high level findings of the People Survey undertaken in 2023. A results summary overview is also set out in Appendix A. | |
| RESOURCE IMPLICATIONS | N/a | |
| EQUALITY RISKS AND BENEFITS ANALYSIS | N/a | |
| APPENDICES | iDeck presentation slides summarising all survey responses overview | |
| BACKGROUND PAPERS | n/a | |

1. <u>INTRODUCTION AND AIMS</u>

1.1. The People Survey gives our workforce (including volunteers) the opportunity to tell us how they feel within their role in Devon and Somerset Fire and Rescue Service (hereinafter referred to as "the Service"), encouraging open and honest feedback with a confidential survey. To use this feedback at all levels of the service to influence our priorities, decision making and objectives to achieve the workplace the Service aspires to.

Aims:

- use, and demonstrate how we use, the people survey results to shape future plans and strategy within Devon and Somerset Fire and Rescue Service
- use, and demonstrate how we use, the people survey results to develop action plans and objectives to address issues that come out of the people survey, managing expectation about timeframe
- continue to learn and build trust within our workforce with timely surveys.

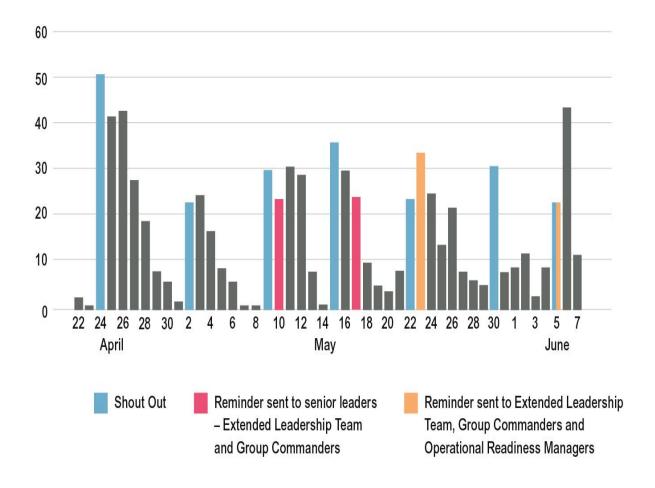
2. METHODOLOGY

- 2.1. The survey was live between 24 April and 7 June. The survey was designed to enable staff to easily complete and share their honest opinions. It was responsive so would be accessible on any device. No paper copies were requested.
- 2.2. The survey was managed and facilitated internally by the Communications and Engagement Team. The survey was developed using the team's survey software tool (Snap).
- 2.3. The survey was made up of a series of questions focused around the themes of the People Strategy with an additional question asking whether people would recommend the Service. The questions were not compulsory so there may be a different number of responses for some questions. Each theme comprised of a number of personalised statements where respondents were asked to rate their level of agreement/disagreement. At the end of each of the themes an openended question allowed respondents to put forward any further views/comments.
- 2.4. The questions had a five-point scale: strongly agree, agree, neutral, disagree and strongly disagree. This is an industry recognised LIKERT scale.

- 2.5. There were also questions which identified directorate, department, group, length of service which were compulsory. Optional demographic questions followed to help identify whether there are particular groups within our Service where we should focus or prioritise. Asking directorate and department was asked for the first time this year to enable departments to deliver action planning.
- 2.6. The results have been shared with industry experts People Insight who have created a dashboard to help understand the responses. The dashboard has been shared with our Extended Leadership Team, as well as Group Commanders, Operational Resource Managers (ORMs) and nominated managers across all departments.

3. PROMOTION OF THE SURVEY

- 3.1. The Service aimed to generate a high response rate from all our staff. Historically the response rates from operational staff, specifically on-call, has been low. To address this, we regularly monitored the response rates from different staff groups and then targeted communications to encourage a higher response rate.
- 3.2. The Service implemented a focused approach to our communications and promoted the survey using the following channels:
 - Shout Out internal newsletter;
 - Viva Engage internal social media channel;
 - Leader blogs;
 - Service intranet homepage with a banner at the top of the page for the duration;
 - The survey was responsive to devices so that it could be easily accessed from a mobile phone or tablet so that it could be shared through station what's app groups;
 - Emails to Extended Leadership Team, Group Commanders (GCs) and Operational Readiness Managers (ORMs) requesting support and promotion of the survey with operational and support staff across the Service;
 - Posters sent to every station and displayed at Service Headquarters with a QR code to scan; and
 - Link on DS Connect for ease of access to operational staff (received 45 clicks) – which was made live on 21 April 2023.
- 3.3. The Service monitored the impact of our communication, and the chart below shows the increase in responses each time specific communications were issued.



4. **PROFILE OF RESPONDENTS**

- 4.1. 813 people completed the survey which is 44% of the workforce. This number of responses is above the industry recognised confidence rating of 95% confidence with a 2.5% margin of error. This compares with 845 responses for the 2017 survey when paper copies were handed out. However, the establishment for the organisation was higher during this time. In 2021, a health check survey was issued which saw 619 responses, which was 32% of the workforce, so there is improvement in engagement.
- 4.2. The survey asked people to select their role. This question was multiple choice as it was recognised many of the workforce have multiple roles:

| Role | Number selected |
|-----------------------------------|-----------------|
| Uniformed – Wholetime duty system | 711 |
| Uniformed – On-call duty system | 674 |
| Uniformed – Control | 45 |
| Support staff | 520 |
| Other | 33 |

5. KEY FOCUS AREAS

5.1. An overview of the results can be found in slides set out at Appendix A of this report. From these results 5 key focus areas emerged.

Inclusion of thought

5.2. Opinions and ideas being valued and receiving feedback on input is an area highlighted by the responses. Questions which indicated this include 'I will be asked for my opinion to give input before decisions and made' (39% agreement, 30% disagreement) and 'I feel my ideas and opinions are valued and I have the opportunity to share them' (59% agreement, 18% disagreement). Although the question about feedback from my line manager saw 70% agreement, understanding about strategy and Service vision is referenced in the free text comments.

Bullying and harassment, and reporting this

5.3. The survey asked whether respondents had witnessed or experienced bullying or harassment in the last 12 months. 68% answered no, 10% prefer not to say and 22% said yes. Of this, 67% experienced it themselves. 62% reported what they had witnessed or experienced. 31% said they felt there was a satisfactory outcome.

Trust in leadership

5.4. The question 'I trust our leadership team to make decisions that support me and my colleagues' had 43% agreement and 39% disagreement, with 28% neutral. This is a decrease from when the same question was asked in 2021 where 56% answered in agreement. Senior management demonstrating our Service values is consistently lower than line managers displaying the values, with honesty and working together being the least favourable responses.

Support staff

- 5.5. The survey consistently shows that people who have identified that they work as 'uniformed wholetime duty system' or 'support staff' are less likely to answer favourably to the questions asked.
- 5.6. The largest difference is within the Learning and Development theme, with support staff 11% less likely to answer in agreement on average. The question where this is most notable is 'I understand how to progress in the organisation if I want to', compared to the whole workforce average of 50% agreement, 34% support staff agreed, compared with 69% on-call, 55% wholetime and 53% control.

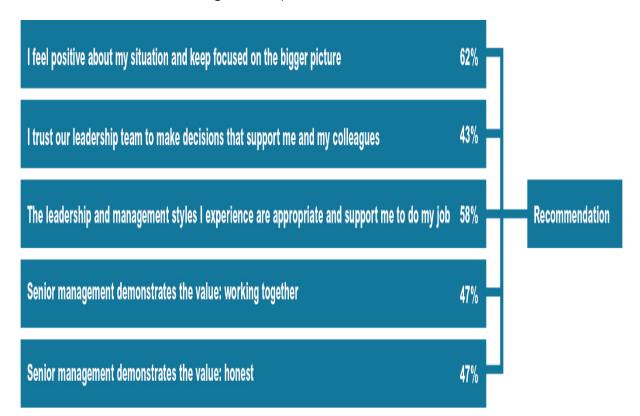
Working well together (high negative)

5.7. The average responses for each theme of the People Survey show that 'ways of working' has the lowest agreement, and highest disagreement rates. Within this section, the question 'I feel that different parts of the Service are working well together has a disagreement score of 31% and agreement of 41%.

5.8. Less than half (47%) agree that senior management (Executive Board, Service Leadership Team and Group Commanders) demonstrate the value 'working together', with 26% disagreeing.

6. <u>RECOMMENDATION SCORE AND KEY DRIVERS</u>

- 6.1. 58% of the people who completed the survey agreed or strongly agreed that they are happy in their work and would recommend the Service as an employer. This changes to 50% when looking at support staff, 58% for wholetime and 68% for on-call and control.
- 6.2. The key drivers the questions which are most likely to impact whether people answer that they would recommend the Service are focused on leadership and management.
- 6.3. The questions include how senior leaders demonstrate our values 'honest' and 'working together' (both 47% agreement, both 28% neutral and 25% and 26% respectively disagreement), trust in our leadership team to make decisions that support me and my colleagues (43% agreement, 28% neutral and 29% disagreement), and leadership and management styles being appropriate to support people to do their job to the best of their ability (58% agreement, 19% neutral and 23% disagreement).
- 6.4. The key drivers change also include the question 'I feel positive about my situation and keep focused on the bigger picture', with 62% agreement, 23% neutral and 15% disagreement).



- 6.5. The key drivers remain the same for on-call and wholetime colleagues. When looking at support staff, the senior management demonstrating the value: respectful replaces the question about leadership and management styles being appropriate and supportive.
- 6.6. The key drivers for respondents who have identified as working in Control is split between leadership and inclusion, values and ethics, with questions about ideas and opinions being valued and the culture of the Service replacing the questions about senior management demonstrating the values.

7. NEXT STEPS

- 7.1. The Service Leadership Team (SLT) is currently working with their teams to review the results, discuss the themes and issues / opportunities flagged, with a view to create and drive forward key actions.
- 7.2. The Service will present an action plan and any appropriate information regarding the progress on the survey at the next People Committee.

SHAYNE SCOTT

Director of Finance & Corporate Services (Treasurer)



Devon and Somerset Fire and Rescue Service People Survey 2023

Page 41

Survey closed: 7 June 2023

Responses: 813

Response rate: n/a

Partial results: Excluded

Comparator: Survey Overall



What is our Recommendation score?



The Recommendation score is 58%, which is in line when compared with the norms for Survey Overall



Items comprising the Recommendation score



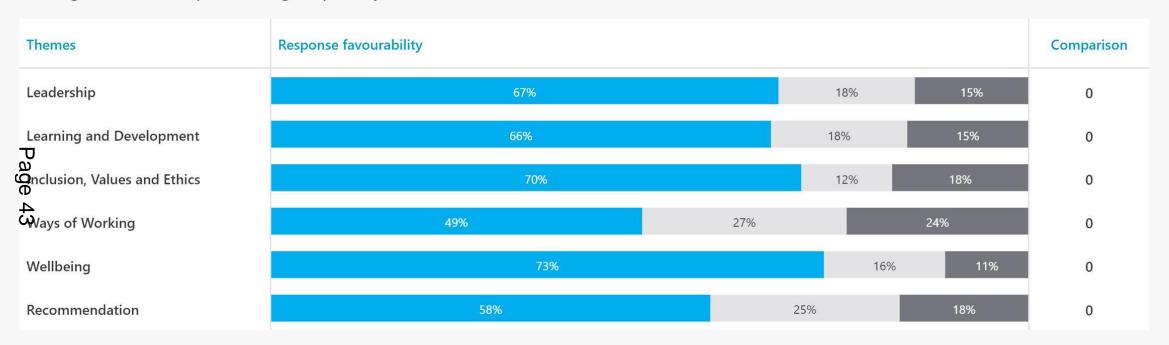
Your score Survey Overall norm

Page 42

What are our Theme scores?



Average scores for questions grouped by a common theme







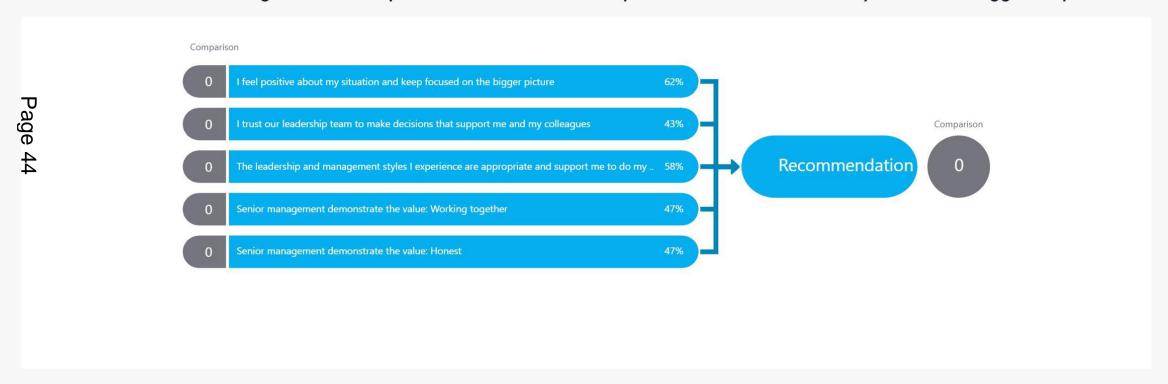


What is driving our Recommendation score?



Key drivers

These 5 items have the strongest relationship with Recommendation. Improvements in these are likely to have the biggest impact.



Some items have a stronger relationship with Recommendation. These items provide a good focus for action as improvements in these are likely to drive improvements in Recommendation

What are our highest scoring questions?



These 5 items are the highest scoring in the survey

| lm | pact | Question | Theme | Response favourability | Comparison |
|------|------|---|------------------------------|-------------------------|------------|
| | | I have a good understanding of our values and ethics and of the behaviours which are expected of me | Inclusion, Values and Ethics | 95% 4% <mark>1</mark> % | 0 |
| Page | | If I see something that I feel is wrong, I'm aware of how to challenge or report it | Inclusion, Values and Ethics | 90% 8% 2% | 0 |
| 45 | | My line manager demonstrates the value: Respectful | Leadership | 89% 6% <mark>5</mark> % | 0 |
| | | I know how to access support in relation to my mental health or where to signpost colleagues | Wellbeing | 89% 9% 2% | 0 |
| | | My team share and learn from our experiences, successes and mistakes | Learning and Development | 87% 8% 6% | 0 |









What are our lowest scoring questions?



These 5 items are the lowest scoring in the survey

| Impact | Question | Theme | Response favourability | | Comparison | |
|--------|--|------------------------------|------------------------|-----|------------|---|
| | If you experienced or witnessed bullying or harassment, was the outcome satisfactory? | Inclusion, Values and Ethics | 31% | 69% | | 0 |
| Page | If you experienced or witnessed bullying or harassment, did you experience it yourself? | Inclusion, Values and Ethics | 33% | 67% | | 0 |
| 46 | I will be asked for my opinion to give input before decisions are made | Ways of Working | 39% | 31% | 30% | 0 |
| | I feel that different parts of the Service are working well together to deliver our services | Ways of Working | 41% | 28% | 31% | 0 |
| | The Service is aware of, and invests in, developments in technology and future innovation to help improve and sustain operational efficiency and effectiveness | Ways of Working | 41% | 32% | 27% | 0 |







Agenda Item 6

| REPORT REFERENCE NO. | PC/23/10 |
|----------------------|--|
| MEETING | PEOPLE COMMITTEE |
| DATE OF MEETING | 28 JULY 2023 |
| SUBJECT OF REPORT | HIS MAJESTY'S INSPECTORATE OF CONSTABULARY & FIRE & RESCUE SERVICES (HMICFRS) CAUSE OF CONCERN AND AREAS FOR IMPROVEMENT ACTION PLAN UPDATE |
| LEAD OFFICER | Chief Fire Officer |
| RECOMMENDATIONS | That the Committee reviews progress in delivery of the action plan. |
| EXECUTIVE SUMMARY | On Wednesday 27th July 2022, HMICFRS published the Devon & Somerset Fire & Rescue Service (DSFRS) 2022 inspection report. The inspection report identified one Cause of Concern and 14 Areas for Improvement (AFIs). Of these AFIs, eight have been linked to the People Committee. |
| | The paper appended to this report outlines the progress that has been made against the HMICFRS Cause of Concern and Areas for Improvement action plans since the last update to the committee in April 2023. The key highlights are that: |
| | Two actions within the Cause of Concern action plan are currently recorded as 'In Progress – Off Track'. This is due to the following factors: |
| | 01a.07: Expectations documents (charters). The toolkit for team charters (internal, staff to staff) has now been developed by the Organisational Development Team. This will be reviewed and then distributed across the Service by the 31/08/2023. The customer charter has now gone through final testing. Feedback will be incorporated into the final document ahead of sign off from the Senior Leadership Team. The HMI Team are awaiting an update on the trainee/ trainer charter. This action is off track as the target completion date (28/02/2023) has now passed. |
| | O1b.09: All recruitment and selection processes will include elements to assess applicants' cultural awareness and how this links to the Service Values. No update on progress against this action. |
| | 1 Area for Improvement, HMI-3.4-202215 (High Potential Staff), has been paused since March 2023 due to dependencies on the Area for Improvement around the selection and promotions process (HMI-3.4-202213). |

| RESOURCE IMPLICATIONS | Considered within the Action Plan where appropriate. | |
|--------------------------------------|--|--|
| EQUALITY RISKS AND BENEFITS ANALYSIS | Considered within the Action Plan where appropriate. | |
| APPENDICES | A. HMI People Committee Update | |
| BACKGROUND PAPERS | None | |



HMICFRS Action Plan People Committee Update

HMI Team

Devon & Somerset Fire & Rescue Service

July 2023

1. INTRODUCTION

- 1.1. On Wednesday 27th July 2022 HMICFRS published the DSFRS 2022 inspection report. The inspection report identified one Cause of Concern and 14 Areas for Improvement (AFIs).
- 1.2. This report provides an update on the Cause of Concern and Areas For Improvement action plans that have been produced following the inspection, which concluded in October 2021.

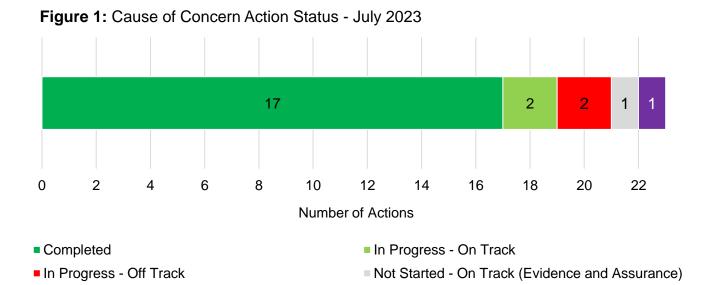
2. CAUSE OF CONCERN ACTION COMPLETION STATUS

2.1. The Cause of Concern is as follows:

No Longer Required

The service has shown a clear intent from the executive board to improve the culture of the service. However, more needs to be done throughout the organisation. We have found evidence of poor behaviours that are not in line with service values. Some staff didn't have the confidence to report these issues. By 31st August 2022, the service should develop an action plan to:

- Make sure that its values and behaviours are understood and demonstrated at all levels of the organisation.
- Make sure that staff are trained and supported to identify and challenge inappropriate behaviour when identified and that they have clear mechanisms in place to raise their concerns.
- 2.2. 23 actions have been established to address the Cause of Concern. Figure 1 below outlines the completion status of these actions.



Page 50

2.3. Table 1 below outlines the completion status of these actions in table view.

| Table 1: Summary of progress against the individual actions | | | | | | |
|---|--|---------------------------|----------------------------|-------------------|---------------|----------------------------------|
| Cause of C | Cause of Concern – Values and Behaviours | | | | | |
| Not started (on track) | Not started (off track) | In progress (on track) | In progress (off track) | Completed | Closed | Paused/ No Longer Required |
| 1 * (→ at 1) | 0 (→ at 0) | 2 (↓ from 4) | 2 (↓ from 7) | 17 († from 11) | 0 (→ at 0) | 1 (↑ from 0) |

^{*} Please note that the action which has not yet started is the evidence and assurance required once all other actions have been completed.

2.4. Table 2 outlines the individual actions in progress within the Cause of Concern action plan and their current status.

Table 2:

| Ref. | Description | Progress Update | Target Completion | Status |
|--------|---|---|----------------------|--------------------------|
| 01a.07 | Expectations documents x3 (charters) between: a. Trainers and recruits, b. Staff and clients/ customers/ partners (external), c. Staff and staff (internal) | The toolkit for team charters (internal, staff to staff) has now been developed by the Organisational Development Team. This will be reviewed and then distributed across the Service by the 31/08/2023. The customer charter has had final testing through Leading Conversations events. Feedback will now be incorporated into the final document ahead of sign off from the Senior Leadership Team. The HMI Team are awaiting an update on the trainee/ trainer charter. | 28/02/2023 | In Progress – Off Track |
| 01b.01 | Pre-recorded quarterly updates to all staff (leading conversations tone) on expectations to reinforce core brief, with CFO and DCFO. Followed up by | This action has been marked as 'no longer required' as it has been merged with action 01a.08 'Comms team to build a core brief on culture to be included in a regular programme of awareness (produced on a quarterly basis – sent to all stations and departments in advance | 31/12/2022 N/A | No Longer Required |

| Ref. | Description | Progress Update | Target Completion | Status |
|--------|---|---|---|-------------------------|
| | face-to-face engagement session (See 01b.02). | and discussed during station and department visits). | | |
| 01b.03 | Performance/ conflict training for managers. | The Area Manager for Service Delivery Resilience is currently reviewing the training that the Service has in place. Further conversations around what this will look like in the future are in progress. | 30/09/2023 | In Progress – On Track |
| 01b.04 | Biannual communication to the workforce on concluded disciplinaries including sanctions and rationale for those sanctions. | Due to the low rate of disciplinaries, and a need to ensure confidentiality, this will be changed to a 6 monthly communication. The next update will be communicated by August 2023. | 30/11/2022 31/05/2023 Revised Target Completion Date – 31/08/2023 | In Progress – On Track |
| 01b.09 | All recruitment and selection processes will include elements to assess applicants' cultural awareness and how this links to the Service Values. Internal processes, including promotional processes, will include questions and/or assessment to evidence cultural awareness and how applicants demonstrate and/or embed behaviours that link to the Service Values, Code of Ethics and NFCC leadership framework. | The HR department have been contacted for an update on this action as part of the revised selection and promotions process. | 30/06/2023 | In Progress – Off Track |
| | <u> </u> | Page 52 | | |

2.5. Table 3 outlines the individual actions within the Cause of Concern action plan that have been marked as completed.

Table 3:

| Ref. | Description | Update | Date completed |
|--------|--|--|---|
| 01a.01 | EDI e-learning to be repeated for all staff. | As at 12/04/2023 96% of the workforce has completed the elearning. | 09/02/2023 (Director of Finance, People and Estates) |
| 01a.02 | EDI eLearning to be an annual assessment and made a core skill on the competency dashboard. | The EDI e-learning modules have been made an annual required assessment and are a core skill on the competencies dashboard. | 26/10/2023 (Director of Finance, People and Estates) |
| 01a.03 | New training presentation on values, behaviours and ethics to be delivered to all staff and support to embed the expectations of the organisation (as part of the Safe To programme). | As at 17/07/2023, 95% of individuals have now undertaken this training. This means that the target for completion across the workforce has been reached. | 25/05/2023 (Head of People Services) |
| 01a.04 | All inappropriate material to be removed from Service premises. This includes inappropriate mugs, which was an issue highlighted by HMICFRS. | All inappropriate material has been removed from Service premises. | 30/09/2023 (Deputy Chief Fire Officer) |
| 01a.05 | Mandatory PPD questions to be introduced: Have you experienced or witnessed any bullying, harassment or unwanted behaviour since our last meeting? Have you seen any inappropriate material? | Mandatory PPD questions have now been introduced and added to the PPD system. | 20/09/2022 (Assistant Chief Fire Officer) |
| 01a.06 | PPDs to be completed in line with policy and recorded on Workbench. | A revised PPD process was launched to the Service in March 2023. This process is now being reviewed ahead of the lunch of PPDs for the next quarter. | 26/06/2023 (Chief Fire Officer) |

| Ref. | Description | Update | Date completed |
|--------|--|---|---|
| 01a.08 | Comms team to build a core brief on culture to be included in a regular programme of awareness (produced on a quarterly basis – sent to all stations and departments in advance and discussed during station and department visits). | The core brief has been informed by the Target Operating Model and outlines Service priorities moving forward. | 25/05/2023 (Chief Fire Officer) |
| 01b.02 | Senior Managers (SM and equivalent, and above) to attend a leading conversations presentation which will include input on expected behaviours, role modelling and accountability via an external trainer (follow up to quarterly process). | 138 people attended out of a possible 208 members of staff at SM/ Grade 7. The presentations from the event are available via Yammer for those unable to attend the event. | 03/01/2023 (Deputy Chief Fire Officer) |
| 01b.05 | Report to the Executive Board on grievance and disciplinary cases to include type of case, speed of completion and outcome (e.g. improve speed of investigations and reconsider the use of outside investigators). | Report presented to the Executive Board on 15/12/2022. | 13/01/2023 (Director of Finance, People and Estates) |
| 01b.06 | Every presentation to include a slide on values, expected behaviours and ethics. | The standard DSFRS presentation template now includes a slide on values, expected behaviours and ethics. | 27/02/2023 (Deputy Chief Fire Officer) |
| 01b.07 | Create and publish effective confidential reporting mechanisms which include several avenues for staff. To include, a confidential reporting line directly to the DCFO, direct to ACAS, HMICFRS confidential reporting line, and whistle blowing policy. | The confidential reporting line was launched on 01/02/2023 in a blog by the CFO. The reporting line is open to all members of staff and involves leaving a message via voicemail. In the blog, the CFO also outlined that the Service is also welcoming feedback on concerns via email or post. The Respect and Fairness Toolkit was also linked. | 06/03/2023 (Deputy Chief Fire Officer) |

| Ref. | Description | Update | Date completed |
|--------|--|--|---|
| 01b.08 | Establish 'Speak Up' guardians in each group and workplace that are accessible to all staff. Individuals will be interviewed and selected by senior staff (training allowance required). Individuals will support station visits and training/awareness. | Freedom to Speak Up Guardians have now been established and were launched in Service wide communications on Monday 22/05/2023. | 24/05/2023 (Assistant Chief Fire Officer) |
| 01b.10 | Equality, Diversity and Inclusion commission to be established. To include representation from representative bodies, staff support groups and key leaders. | The Equality, Diversity and Inclusion commission has been established. This includes representation from representative bodies, staff support groups and service leaders. | 30/09/2022 (Deputy Chief Fire Officer) |
| 01b.11 | Exit process to be formalised. This to include specific questions on cultural improvements. | The new exit policy is now live, including a link to a Microsoft Forms survey for individuals to complete once their resignation is acknowledged. The survey includes questions on values, behaviours, and ethics. | 01/06/2023 (Head of People Services) |
| 01b.12 | Revise induction process for all staff to include the setting of expectations of behaviour, values and ethics. | The induction process has been revised and now included training for the setting of expectations around values, ethics and behaviours. The first session to include this training was completed on 28/06/2023. | 28/06/2023 (Head of People Services) |
| 01b.13 | To identify where other services are doing well in the People Pillar and State of Fire Annual Review. Contact them to understand the areas of best practice that they have implemented and how this may improve our Service. | Best practice has been identified and reviewed with SLT leads, linking to current actions within the HMICFRS action plan. | 20/12/2022 (Deputy Chief Fire Officer) |

| Ref. | Description | Update | Date completed |
|--------|---|---|----------------|
| 01b.14 | To review best practice with our Service leads in order to enhance improvement plans. | Best practice has been identified and reviewed with SLT leads, linking to current actions within the HMICFRS action plan. | 12/01/2022 |

3. AREAS FOR IMPROVEMENT ACTION PLAN COMPLETION STATUS

3.1. Table 4 lists the Areas For Improvement linked to the People Committee and their individual implementation status.

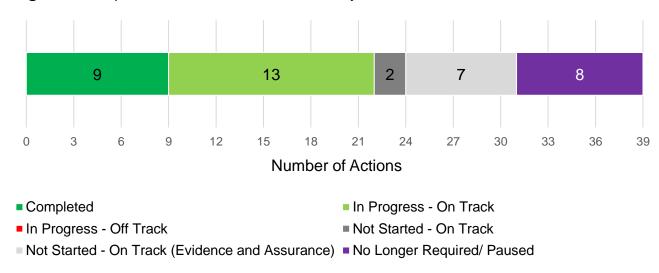
Table 4:

| Reference | Description | Target Completion | Status |
|--------------------|--|-------------------------------------|-------------------------|
| HMI-3.1- 202208 | The service should monitor secondary contracts to make sure working hours are not exceeded. | 31/01/2024 | In Progress – On Track |
| HMI-3.2- 202209 | The service should make sure its workforce plan takes full account of the necessary skills and capabilities to carry out the integrated risk management plan. | 30/09/2024 | In Progress – On Track |
| HMI-3.2- 202210 | The service should address the high number of staff in temporary promotion positions. | 30/09/2023 | In Progress – On Track |
| HMI-3.3- 202211 | The service should make sure that it has effective grievance procedures. It should identify and implement ways to improve staff confidence in the grievance process. | 31/01/2024 | In Progress – On Track |
| HMI-3.3- 202212 | The service should improve staff understanding of the purpose and benefits of positive action. | 30/09/2023 | In Progress – On Track |
| HMI-3.4- 202213 | The service should make sure its selection, development and promotion of staff is open and fair, and that feedback is available to staff. | 31/01/2025 | In Progress – On Track |
| HMI-3.4- 202214 | The service should improve all staff understanding and application of the performance development review process. | 30/04/2024 30/06/2023 | In Progress – On Track |

| Reference | Description | Target Completion | Status |
|--------------------|--|--|--------|
| HMI-3.4- 202215 | The service should put in place an open and fair process to identify, develop and support high-potential staff and aspiring leaders. | Review 30/06/2023 – awaiting an update from the Director of Service Delivery Support. | Paused |

3.2. Figure 2 below outlines the completion status of all actions designed to address the Areas For Improvement linked to the People Committee, as outlined above.

Figure 2: People Committee Action Status - July 2023



3.3. Table 5 below outlines the completion status of these actions in table view.

| Table 5: Summary of progress against the individual actions | | | | | | |
|---|-------------------------|---------------------------|----------------------------|-----------------|---------------|----------------------------------|
| Areas for Improvement (People Committee) | | | | | | |
| Not started (on track) | Not started (off track) | In progress (on track) | In progress (off track) | Completed | Closed | Paused/ No Longer Required |
| 9 * (↓ from 10) | 0 (→ at 0) | 13 (↓ from 18) | 0 (↓ from 1) | 9 († from 4) | 0 (→ at 0) | 8 († from 6) |

* Please note that seven of the actions which have not yet started are the evidence and assurance required once all other actions have been completed.

4. <u>ACTION DEADLINE EXTENSIONS</u>

4.1. Table 6 below outlines one improvement area which has had a deadline extension since the last report to the People Committee.

Table 6:

| HMI-3.4-202214 – PDR Process (Area for Improvement) In I | n Progress – On Track |
|--|-----------------------|

Reason for pause

Two actions linked to this improvement area have been pushed back to align with the roadmap for implementation of the PPD module within the new HR system. This includes one action around utilising this module for PPD conversations and one action which is the evidence and assurance required against this improvement area once all other actions have been completed.

5. PAUSED IMPROVEMENT AREAS

5.1. Table 7 below outlines one improvement area which has been paused since March 2023.

Table 7:

| Improvement Area | Status | |
|--|--------|--|
| HMI-3.4-202215 – High-Potential Staff (Area for Improvement) | Paused | |
| Reason for pause | | |

This improvement area has been paused until work has been completed on the revised selection and promotions process. ACFO Gerald Taylor has approved the pausing of this improvement area (HMI-3.4-202215) and all actions within it (initial target completion date 31 July 2023). The HMI Team is awaiting an update from the Director of Service Delivery Support on the status of this area for improvement moving forward.

Agenda Item 7

| REPORT REFERENCE NO. | PC/23/11 | |
|---|---|--|
| MEETING | PEOPLE COMMITTEE | |
| DATE OF MEETING | 28 JULY 2023 | |
| SUBJECT OF REPORT | PEOPLE AND CULTURE UPDATE | |
| LEAD OFFICER | Chief Fire Officer | |
| RECOMMENDATIONS | That the report be noted. | |
| EXECUTIVE SUMMARY | · | |
| RESOURCE IMPLICATIONS | Considered within the Action Plan where appropriate. | |
| EQUALITY RISKS AND BENEFITS ANALYSIS | Considered within the Action Plan where appropriate. | |
| APPENDICES | A. HMI Culture Recommendations People Committee Update | |
| BACKGROUND PAPERS | HMICFRS Report – Values and Culture in Fire and Rescue Services | |

APPENDIX A TO REPORT PC/23/11

1. <u>INTRODUCTION</u>

- 1.1. On Friday 31 March 2023, HMICFRS published a report into the values and culture in fire and rescue services. The report contains 35 recommendations, 1 specific for the police, 15 which require action at a national level and 19 which are specific for fire and rescue services.
- 1.2. This report provides an update on the action plan to address these recommendations.

2. <u>CULTURE RECOMMENDATIONS COMPLETION STATUS</u>

- 2.1. An update has been provided to HMICFRS, via their online document sharing platform, detailing the actions the Service has taken against each of the 19 recommendations for the fire and rescue sector.
- 2.2. Figure 1 below outlines current progress against addressing these recommendations (as at 17/07/2023), as reported to HMICFRS, with the colour coding as follows:
 - Blue (B): Closed (evidence has been reviewed by the HMICFRS Governance Board and the Executive Board has approved the closure)
 - Green (G): In Progress On-Track
 - Amber (A): In Progress (recommendation deadline not met)
 - Grey (GY): Not Started On-Track

Figure 1: HMICFRS Culture Recommendations Completion Status

| Recommendation 1 | Recommendation 3 | Recommendation 4 |
|--|--|--|
| Confidential Reporting (G) | Support for individuals (B) raising concerns | Handling of raised (A) concerns |
| | | |
| Recommendation 5 | Recommendation 9 | Recommendation 14 |
| How to raise concerns (B) (staff and public) | Background Checks (G) | Misconduct Allegations (GY) standard |
| | | |
| Recommendation 17 | Recommendation 18 | Recommendation 20 |
| Allegations of staff (B) gross misconduct | Support during ongoing (G) investigations | Fire Standards (B) |
| | | |
| Recommendation 21 | Recommendation 22 | Recommendation 23 |
| 360 Feedback (B) (ACFO and above) | 360 Feedback (G) (all managers) | Feedback from staff (B) |
| | | |
| Recommendation 24 | Recommendation 26 | Recommendation 27 |
| Monitoring and (G)Evaluating Feedback | Management and (G) Leadership Training | Equality Impact (B) Assessments |
| | | |
| Recommendation 28 | Recommendation 32 | Recommendation 33 |
| Equality and Diversity (B) Data | Diversity in succession (A) planning | Progression of non- (G) operational staff |
| | | |
| | Recommendation 34 | |
| | Core Code of Ethics (B) | |

3. <u>CULTURE RECOMMENDATIONS WHICH ARE 'IN PROGRESS' (DEADLINE NOT MET)</u>

3.1. Table 1 below outlines the recommendations which are currently marked as 'In Progress' where the recommendation deadline has not been met. Factors impacting the delivery of actions to address these recommendations are detailed in Table 2.

Table 1:

| DSFRS Ref. | Description | Status |
|-----------------------------------|----------------------------------|-------------|
| REC04 Handling of raised concerns | | In Progress |
| REC32 | Diversity in succession planning | In Progress |

4. CULTURE RECOMMENDATION ACTIONS WHICH ARE 'OFF TRACK'

4.1. Table 2 below outlines the individual actions within the culture recommendations action plan that are marked as 'In Progress – Off Track' and directly impact the completion of a recommendation.

Table 2:

| Action Ref. | Description | Factors impacting action delivery |
|-------------|---|---|
| REC04.02 | REC04 Evidence and Assurance (Handling of raised concerns) | The Head of Organisational Assurance will speak to the Chief Fire Officer around the expectations and consideration required to determine whether the Service should create a professional standards function. The action will remain marked as 'In Progress' until these conversations have taken place. |
| REC32.02 | REC32 Evidence and Assurance (Diversity in succession planning) | Evidence and assurance is off track as actions to address the recommendation have not been completed in line with the deadline of 01/06/2023. |