



# DEVON & SOMERSET FIRE & RESCUE AUTHORITY

**S.J. Sharman  
CLERK TO THE AUTHORITY**

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**To: The Chair and Members of the People  
Committee**  
  
**(see below)**

**SERVICE HEADQUARTERS  
THE KNOWLE  
CLYST ST GEORGE  
EXETER  
DEVON  
EX3 0NW**

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Your ref :  
Our ref : DSFRA/SJS/SB  
Website : [www.dsfire.gov.uk](http://www.dsfire.gov.uk)

Date : 16 January 2025  
Please ask for : Samantha Brown  
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**PEOPLE COMMITTEE**  
**(Devon & Somerset Fire & Rescue Authority)**

**Friday, 24th January, 2025**

A meeting of the People Committee will be held on the above date, **commencing at 10.00 am in Committee Room B, Somerset House, Devon & Somerset Fire & Rescue Service Headquarters, Clyt St George, Exeter** to consider the following matters.

S.J. Sharman  
Clerk to the Authority

**A G E N D A**

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

**1 Apologies**

**2 Minutes (Pages 1 - 6)**

Of the previous meeting 18 October 2024 attached.

**3 Items Requiring Urgent Attention**

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

## **PART 1 - OPEN COMMITTEE**

**4 Performance Monitoring Report 2024-25: Quarter 3 (Pages 7 - 38)**

Report of the Assistant Director of People (PC/25/1) attached.

**5 His Majesty's Inspectorate of Constabulary & Fire & Rescue Services: Action Plan Update (Pages 39 - 46)**

Report of the Chief Fire Officer (PC/25/2) attached.

### **MEMBERS ARE REQUESTED TO SIGN THE ATTENDANCE REGISTER**

**Membership:-**

Councillors Clayton (Chair), Atkinson, Carter, Coles, Kendall, Peart and Trail BEM (Vice-Chair)

## 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.

	<b>NOTES (Continued)</b>
<b>4.</b>	<p><b><u>Part 2 Reports</u></b></p> <p>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.</p>
<b>5.</b>	<p><b><u>Substitute Members (Committee Meetings only)</u></b></p> <p>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.</p>
<b>6.</b>	<p><b><u>Other Attendance at Committees )</u></b></p> <p>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.</p>

## PEOPLE COMMITTEE

(Devon & Somerset Fire & Rescue Authority)

18 October 2024

### Present:

Councillors Clayton (Chair), Atkinson, Coles, Peart and Kerley (vice Kendall)

### In attendance (Via Teams):

Councillor Carter

### Apologies:

Councillors Trail BEM

\* **PC/24/3**

### **Minutes**

**RESOLVED** that the Minutes of the meeting held 26 July 2024 be signed as a correct record.

\* **PC/24/4**

### **Performance Monitoring Report 2024-25: Quarter 2**

The Committee received for information a report of the Assistant Director of Corporate Services (PC/24/9) detailing performance as at Quarter 2 of 2024-25 against those Key Performance Indicators (KPI) 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:

- Health and Safety; Reporting of Injuries; Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR); Accidents; Near Miss reports; Personal Injuries; Vehicle Incidents.
- Operational Core Competence Skills (breathing apparatus; incident command; water rescue; safety when working at heights or in confined spaces (SHACS); maritime; driving casualty care; fitness).

- Sickness and Absence; Health and Wellbeing.
- Fitness testing.
- Diversity and Inclusion.
- Strategic workforce planning including details of staff turnover.
- Employee engagement (also reported elsewhere on the agenda for this meeting at item PC/24/5).
- An overview of the People Services Systems project.
- Launch of the New People Strategy.

During consideration of the report, and specifically health and safety related issues, it was noted that near miss reporting had decreased since the previous quarter in 2024-25 when compared to the same quarter in 2023-24. The Service aimed to continue improving near miss reporting and, following a review of this area, to establish a Key Performance Indicator (KPI). It was suggested that a way forward could be to monitor the percentage increase in near miss reporting per quarter. Representative Bodies, and other Fire & Rescue Services had been consulted in identifying this as a suitable measure. The Committee agreed that it was appropriate to have a measurable KPI in place, whereupon:

Councillor Coles **MOVED** (seconded by Councillor Peart):

“The Key Performance Indicator (KPI) to monitor the percentage increase in near miss reporting be set at 10% per quarter”.

Upon a vote, the motion was **CARRIED** unanimously.

The Committee was advised that the Service was anticipating an increase in Personal Injury reporting as this now captured an increased range of types of injury.

The Committee further noted the following key points:

- Working at Height and in Confined Spaces (SHACS) was showing as “Red” due to changes in the reporting systems. Until the Service transitioned across to the new consistent reporting approach, the measure was likely to remain “Red”, but an assurance was given that the Service was compliant with the older reporting standards and that the transition to the new standards was anticipated to be complete within the next 12 months. Maritime Level 2 competency was at “Amber” due to the associated issues with the Hot Villa at the Academy impacting the Service’s ability to deliver the training. It was anticipated that these issues would be resolved within the next quarter.
- There was a correction to the data in table under Fitness Testing on page 9 of the report circulated which should read “as of 20<sup>th</sup> September 2024, the number of staff passes totalled 1486”.

- A significant number of personal injuries reported were not occurring whilst staff were on duty but were related to incidents outside of the workplace. The Service was working to help staff look after themselves both in, and outside of, the workplace.
- The Service had identified that spikes in Mental Health cases (impacting staff absence) correlated with change programmes within the Service. The Service was revisiting how it communicates its change programmes, now and into the future, to support colleagues through the necessary changes to develop the Service.
- The Service's Occupational Health (OH) contract was due to end in 2026 and thoughts were turning towards defining what the Service expected from a future OH provider prior to a procurement process.
- An inclusive and accessible Firefighter recruitment programme was underway to meet needs identified through the Strategic Workforce Planning process. The Committee was apprised that diarised courses for On-call Firefighters to transfer to Whole Time Firefighters were at capacity. It was anticipated that the next external recruitment drive would also fulfil an at capacity intake.
- Wholetime staff attrition rates could be linked to historic recruitment drives with colleagues now reaching pensionable age and timing their departures with the instigation of the age discrimination pension remedies. Figures had been negatively impacted by the Service "holding" some vacancies whilst the Annualised Hours project was underway. In general, the Service was experiencing equal starters and leavers amongst its Wholetime Colleague cohort with most staff completing many years of service.

## **RESOLVED**

- (a). That the Key Performance Indicator (KPI) to monitor the percentage increase in near miss reporting be set at 10% per quarter; and
- (b). Subject to (a) above, the report be noted.

\* **PC/24/5**

### **People Survey Actions**

The Committee received for information a report of the Assistant Chief Fire Officer, (Service Delivery), (PC/24/10) which provided an overview of the action being taken by the Service in response to this year's People Survey.

The Committee was apprised that the percentage of all respondents who would recommend the Service had increased since 2023, however, the figure remained lower than that of other fire and rescue services analysed by People Insight. Unpicking that data further, it had been identified that there had been a reduction in the percentage of wholetime and on-call firefighters who would recommend the Service. This was partly attributed to the effects of the ongoing change programme being felt within the service (Minute PC/24/4 also refers). Five areas of focus had been identified from the 2023 survey, the following key points from which were:

- Inclusion of thought: there had been no significant change in the responses;
- Bullying and harassment: fewer colleagues were witnessing or experiencing bullying and harassment in their workplace;
- Trust in leadership: there had been a year-on-year decrease in respondents reporting that they trusted the Leadership Team to make decisions that supported them;
- Support staff: there was an increase in staff who would recommend the Service; and
- Working well together: there had been minimal change against this focus area.

The Committee expressed concern at the drop in trust in leadership from 43% in the previous survey to 33% in 2024. The Service concurred that this was disappointing and recognised that its programme of change had likely impacted this result, along with changes to the Executive Board and Leadership Team. Now that the Service is expected to enter a period of stability at Executive Board level, it was anticipated the results would be improved over future years. It would be key to be clear and direct in communicating the rationale behind future planned changes. The Service had identified an action plan to address these results as identified within paragraph 10.6 of the report.

\* **PC/24/6**

**His Majesty's Inspectorate of Constabulary & Fire & Rescue Services: Action Plan Update**

The Committee received for information a report of the Chief Fire Officer (PC/24/11) outlining progress to date against the Action Plans developed to address both His Majesty's Inspectorate of Constabulary & Fire & Rescue Service's (HMICFRS) Areas for Improvement (from the 2021/22 inspection report) and the subsequent national recommendations.

The Committee was advised that the HMICFRS' cause for concern and resulting action plan had been completed and this work had transitioned into the Service as business as usual.

Two of the eight identified areas for improvement (from the HMICFRS Inspection), delegated to this Committee, had been closed. Of the remaining six, three were currently marked as "In progress – Off track" as the Recruitment Policy had been dependent on the People Strategy, current recruitment controls, and the Safeguarding strategy (due to Disclosure & Barring Service (DBS) and Safer Recruitment). It was anticipated that the People Strategy would be out for consultation by 31/10/24 with a further update anticipated, from the People Services Team, to the next People Committee Meeting.

Of the Values and Culture HMICFRS recommendations, four remained open "On track"



The Standards of Behaviour recommendations were at varying stages of progress/completion since these had only recently been received and the Service was currently considering actions to address them.

The Committee noted that where action deadlines had been extended this had been to ensure they were realistic and achievable for the Service. The Service was now confident in achieving these actions as detailed in the report

**\*DENOTES DELEGATED MATTER WITH POWER TO ACT**

The Meeting started at 10.00 am and finished at 11.52 am

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# Agenda Item 4

<b>REPORT REFERENCE NO.</b>	PC/25/1
<b>MEETING</b>	PEOPLE COMMITTEE
<b>DATE OF MEETING</b>	24 JANUARY 2025
<b>SUBJECT OF REPORT</b>	PERFORMANCE MONITORING REPORT 2024 – 2025: QUARTER 3
<b>LEAD OFFICER</b>	Assistant Director (People)
<b>RECOMMENDATIONS</b>	<i>That the report be noted.</i>
<b>EXECUTIVE SUMMARY</b>	<p>The strategic priorities against which this Committee is measuring performance are:</p> <p>3(a) - Ensure that the workforce is highly trained and has the capability and capacity to deliver services professionally, safely and effectively;</p> <p>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</p> <p>3(c) - Recognise and maximise the value of all employees, particularly the commitment of on-call firefighters, improving recruitment and retention.</p> <p>This report sets out the Services' performance against these strategic priorities for the period October to December 2024 (Quarter 3) in accordance with the agreed measures. A summary is also set out at Appendix A for ease of reference.</p>
<b>RESOURCE IMPLICATIONS</b>	N/A
<b>EQUALITY RISKS AND BENEFITS ANALYSIS</b>	N/A
<b>APPENDICES</b>	<p>A. Summary of Performance against Agreed Measures.</p> <p>B. Forward Plan</p>
<b>BACKGROUND PAPERS</b>	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 3 of 2024-25 as measured against the agreed indicators is set out in this report for each of these policy objectives.

## 2. **PERFORMANCE MONITORING – STRATEGIC POLICY OBJECTIVE 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. The Core Competence Skills recognised by the Service are Breathing Apparatus (BA), Incident Command (ICS), Water Rescue, Working at Height (SHACS), Maritime, Driving, Casualty Care (CC) and fitness.

2.2. The newly 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 Service's performance against the core competencies as indicated at paragraph 2.7. overleaf are all green apart from SHACS which is red and Maritime which is amber.

2.4. At the end of Quarter 3 of 2024/25, overall SHACS competency stood at 86.7%. There is a significant difference, however, in the percentage of roles that are competent across the three levels of provision. The distinction between the different competency levels for SHACS is set out below:

- **Level 1** competency is the minimum level required for response personnel. Performance at the end of Quarter 3 of 2024/25 stood at 93.2% (854 of 916 roles competent);

- **Level 2** competency is an enhanced level of training that enables some stations to effect more complex rescues and support safe systems of work should a level 3 response be required. Performance at the end of Quarter 3 of 2024/25 stood at 73.3% (261 of 356 roles competent); and
- **Level 3** competency is a required skill for Technical Rescue Teams (TRT) who undertake the most complex rescues from height and confined spaces. Performance at the end of Quarter 3 of 2024/25 stood at 68.7% (57 of 83 roles competent).

- 2.5. The Academy has separated the old working at height qualification standards from the dashboard percentage figures and the transition will impact competence figures until all staff are fully migrated in the new training SHACS standard. The changeover has several staff showing as red as they have not yet started on the new standard but were competent in the old SHACS standard. Therefore, until these colleagues are re-assessed under the new SHACS, they will impact the overall competence levels as it is not possible to separate the data.
- 2.6. The advantage of having the new reporting system is it will contribute to more accurate reporting when staff are fully integrated and provide much easier access to competence standards for managers to manage performance.
- 2.7. Maritime remains in Amber for Quarter 3 at 94.7%. The Service anticipates that this competence will be back in the Green by Quarter 4. The drop experienced in recent quarters was due to a need to focus on ensuring the competency of firefighters in breathing apparatus following the challenge of the Hot Villa not being in service. With the reopening of the Hot Villa on the 16<sup>th</sup> January 2025, all the Academy instructors will be able to revert back to their normal training specialisms.

Core Competence inc. subsections of competence.	Measure	Rationale	%	Impact and action taken
<b>Breathing Apparatus (BA)</b>	< 90% + Risk based impact identified	90% provides tolerance for course failures, personnel returning from long-term absence and non-attendance.	<b>97.8 %</b>  <b>Green</b>	Within tolerance for each location. No remedial action required.
<b>Incident Command (ICS) Inc.:</b> 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.	<b>98.3%</b>  <b>Green</b>	Within tolerance for each location. No remedial action required.

<b>Core Competence inc. subsections of competence.</b>	<b>Measure</b>	<b>Rationale</b>	<b>%</b>	<b>Impact and action taken</b>
<b>Water Rescue Inc.:</b> Water Rescue 1st Responder Water Rescue Technician	< 90% + Risk based impact identified	<ul style="list-style-type: none"> <li>A minimum of 2 trained people per appliance is required to enable a response.</li> <li>1361 members of staff are competent across the various levels.</li> </ul>	<b>95.9%</b>  <b>Green</b>	Within tolerance for each location. No remedial action required.
<b>Working at Height and Confined Spaces (SHACS) Inc.:</b> Level 1, 2, 3	< 90% + Risk based impact identified	<ul style="list-style-type: none"> <li>90% provides tolerance for course failures, personnel returning from long-term absence and non-attendance.</li> </ul>	<b>86.7%</b>  <b>Red</b>	In Red SHACS level 3 has the lowest competence. Monitoring attendance of planned training courses will continue and further action planned to address this issue.
<b>Maritime Level 2</b>	< 90% + Risk based impact identified	<ul style="list-style-type: none"> <li>450 people, across 15 stations are required to maintain the Maritime Skill.</li> </ul>	<b>94.7%</b>  <b>Amber</b>	In Amber. Remedial action is to recommence courses at STC.
<b>Casualty Care (CC) Inc.</b> Level 1, 2	< 60% + Risk based impact identified	<ul style="list-style-type: none"> <li>Service policy states 60% of operational personnel trained to this standard.</li> <li>60% is 839 people. Currently 1375 members of staff are trained in casualty care.</li> </ul>	<b>97.0%</b>  <b>Green</b>	Within tolerance for each location. No remedial action required.

Core Competence inc. subsections of competence.	Measure	Rationale	%	Impact and action taken
Response Driving Primary Response (PRDC) Fire Appliance (EFAD) Specialist Vehicles	< 90% + Risk based impact identified	<ul style="list-style-type: none"> <li>90% provides tolerance for course failures, personnel returning from long term absence and non-attendance.</li> </ul>	<b>98.6%</b>  <b>Green</b>	Within tolerance for each location. No remedial action required.

### ***Fitness testing***

	As at 15 <sup>th</sup> Jan 2025	Percentage as of 15 <sup>th</sup> Jan 2025	As of end of October 2024	Percentage as of at the end October 2024
Number requiring test (in scope)	1474	100%	1489	100%
Number passed	1461	99%	1462	98%
Red - Failures	13	1%	27	2%

### ***Fitness details:***

- 2.8. The actual failures and staff off the run for this quarter are as follows:
- 11 individuals that are off the run due to failing a fitness test (11/13 on the dashboard)
  - 1 on secondment to HMI so not within the organisation to test but still shows as red (12/13 on the dashboard)
  - 1 on call, who also has a WT role in prevention so shows as red on the dashboard twice (13/13 on the dashboard)
- 2.9. There are 9 other staff members currently out of date, but these individuals have been or will be tested this month (there is usually a delay of 1-2- weeks for the dashboard to catch up with the fitness results entered due to the manual system). There are an additional 8 staff members who are long term absent.

- 2.10. Off the run for fitness by group is:
- Barnstaple - 1
  - Yeovil - 3
  - Exeter - 3
  - Taunton - 1
  - Plymouth - 1
  - Torquay - 2
- 2.11. The Red and Amber (Fail) group who did not meet the required fitness standards 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.
- 2.12. At 3 months, if staff are still unable to achieve the required standard, then a capability process is started, working with the HR business partners.

**Health & Safety (H&S):**

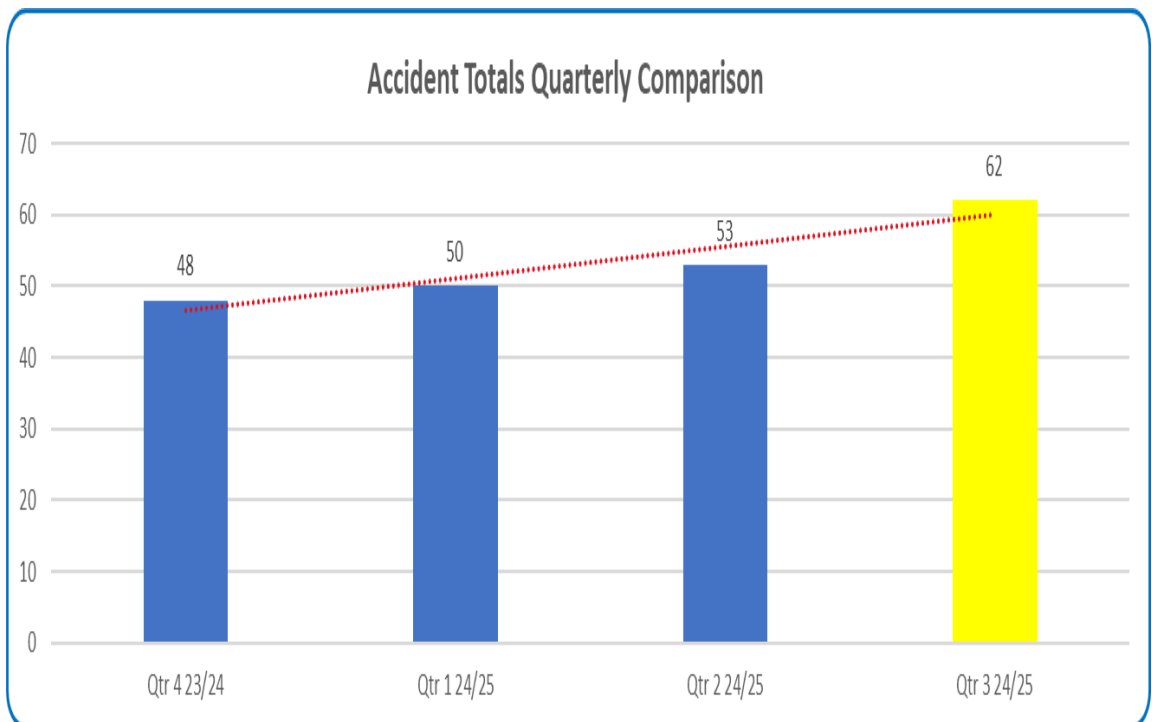
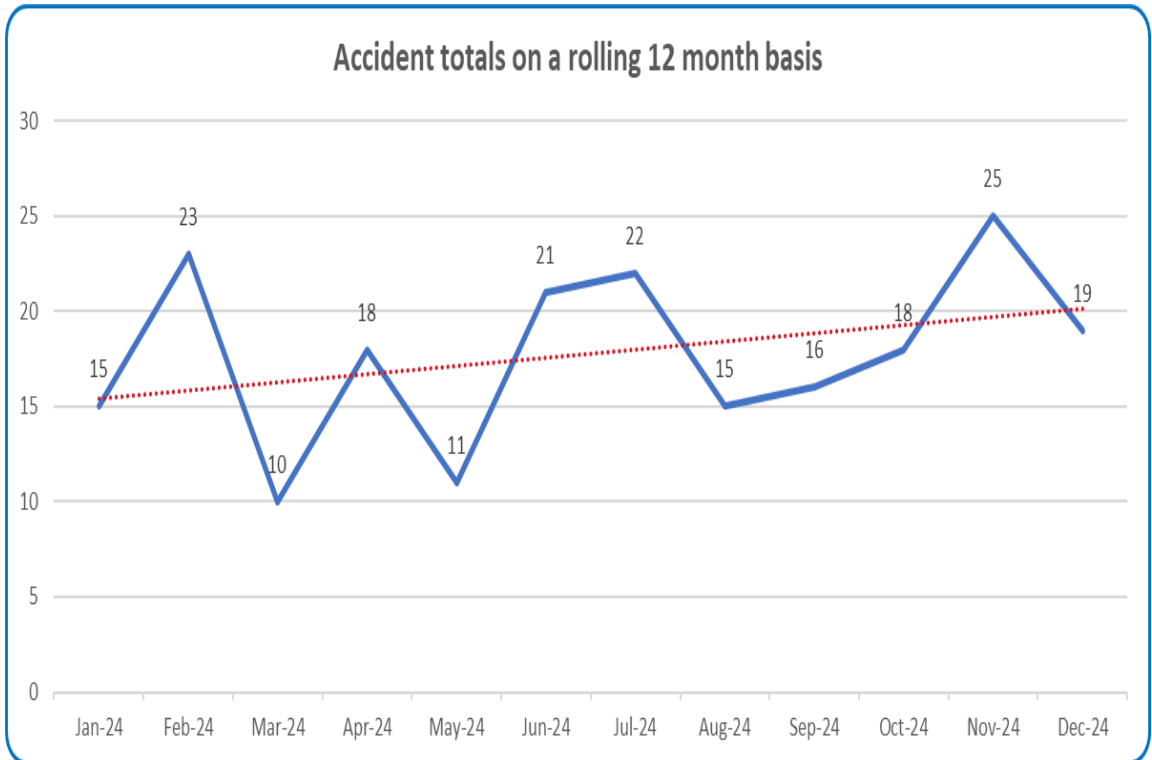
***General:***

- 2.13. To further promote the importance of health and safety in the Service, and support the drive for a positive safety culture, the Chief Fire Officer has taken up the position of chair for the Service's 'Strategic Safety Committee'.
- 2.14. Key learning from the internal investigation and from the Health and Safety Executive (HSE) into the firefighter collapse at the Academy has been shared nationally via the National Fire Chief Council.
- 2.15. Considerable work has been undertaken on the system used by the Service for Control of Substances Hazardous to Health (CoSHH) management. Due to contractual changes for the system, and a short timeline, one of the H&S Team was tasked with a priority to adjust the organisational structure and quantity of CoSHH assessments on the system. Over 3500 assessments had to be reviewed and reduced to under 500 assessments. The adjustments were completed in time and should improve the ease of CoSHH management for the organisation.

***Accidents:***

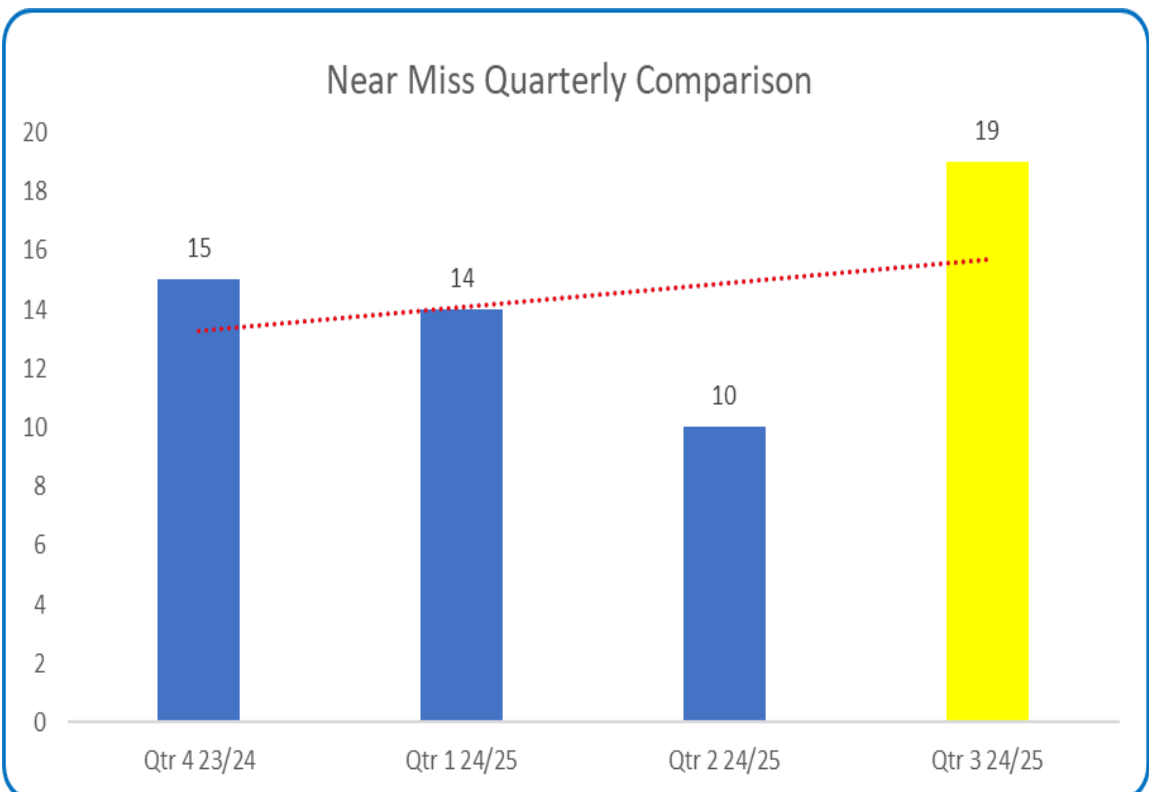
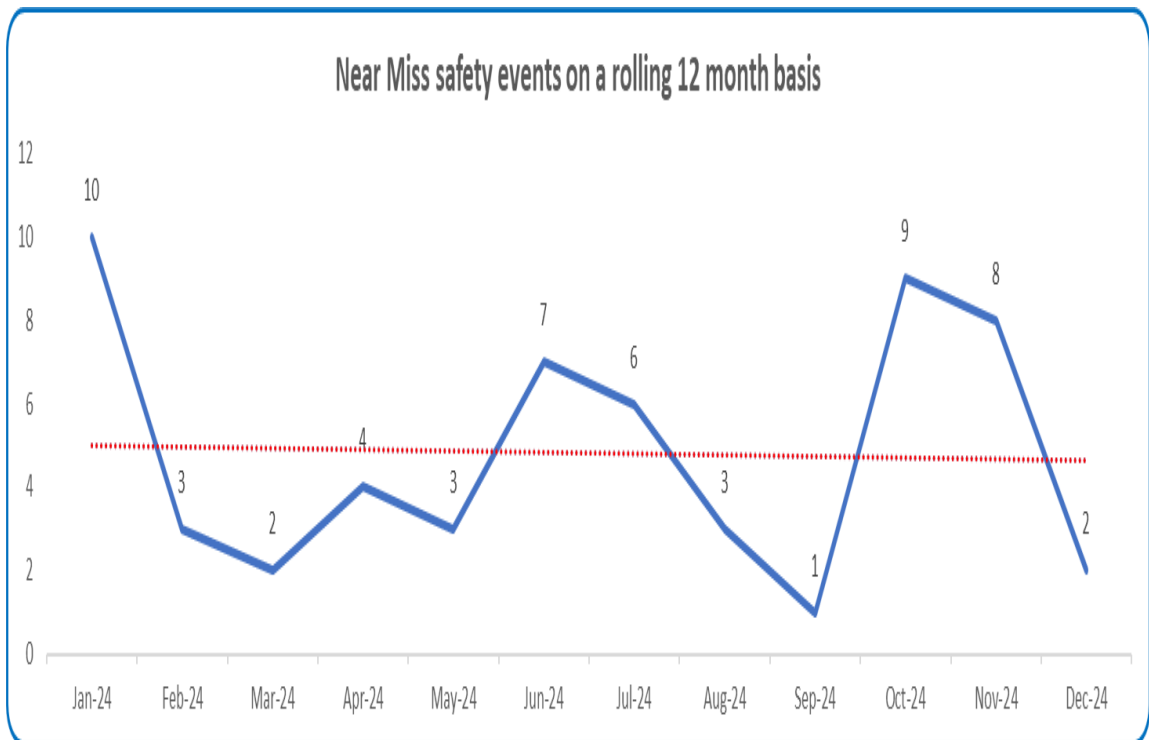
- 2.16. The overall trend for the rolling 12-month reporting period has moved from its usual downward trend to one that indicates an increasing trend in accidents. In Quarter 3 of 2024-25, accident numbers were up by 9 on the previous quarter and up 2 for the same quarter in 2023-24. During Quarter 3, there was one level 3 significant safety event, this related to a BA failure. The proportion of incidents are: 1 level 3, 25 level 2 and 36 level 1 safety events.





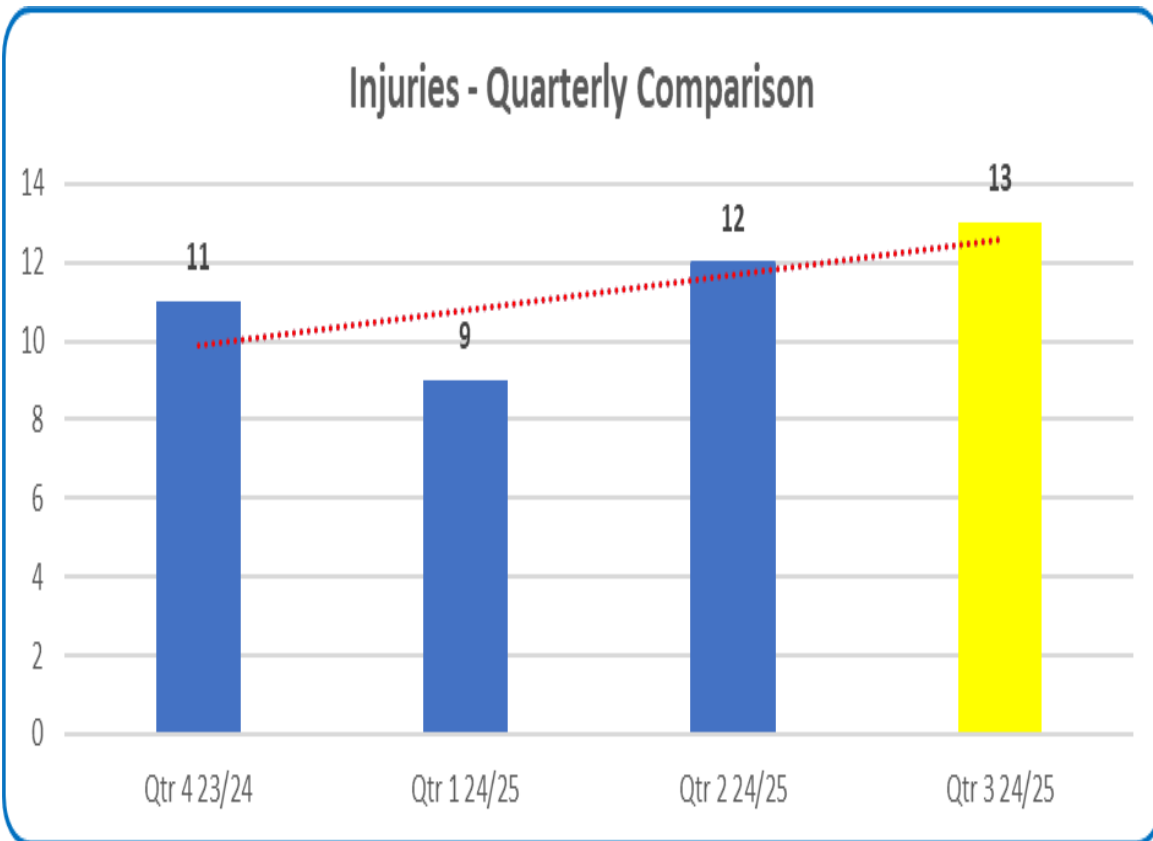
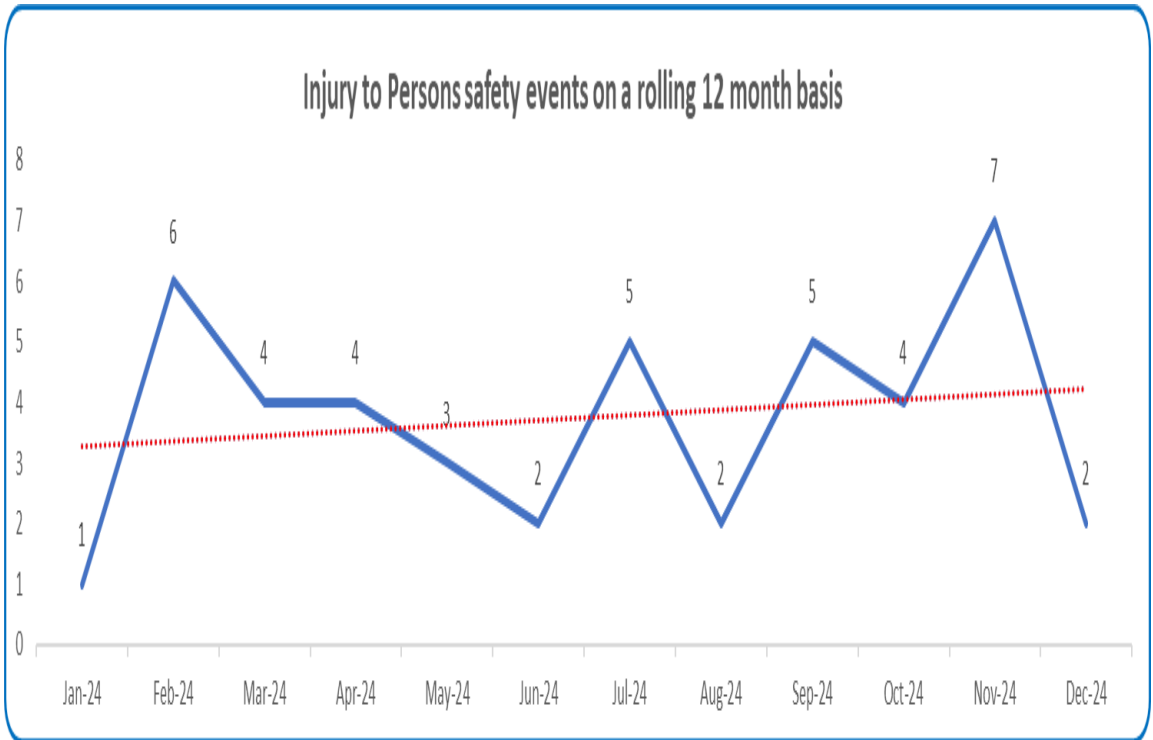
**Near Miss:**

2.17. There were 19 near miss reports in Quarter 3 2024, this is up 9 on the previous quarter, and up 7 on the same quarter in the previous year. A quarterly 10% increase in near miss reporting has been established as the Key Performance Indicator (KPI), item PC/24/4 refers. This quarter the increase has been 90% on the previous quarter. The benefits of near miss reporting continue to be communicated by the Health and Safety Team, the 90% increase is not due to any specific campaign but a general fluctuation of near miss incidents occurring.

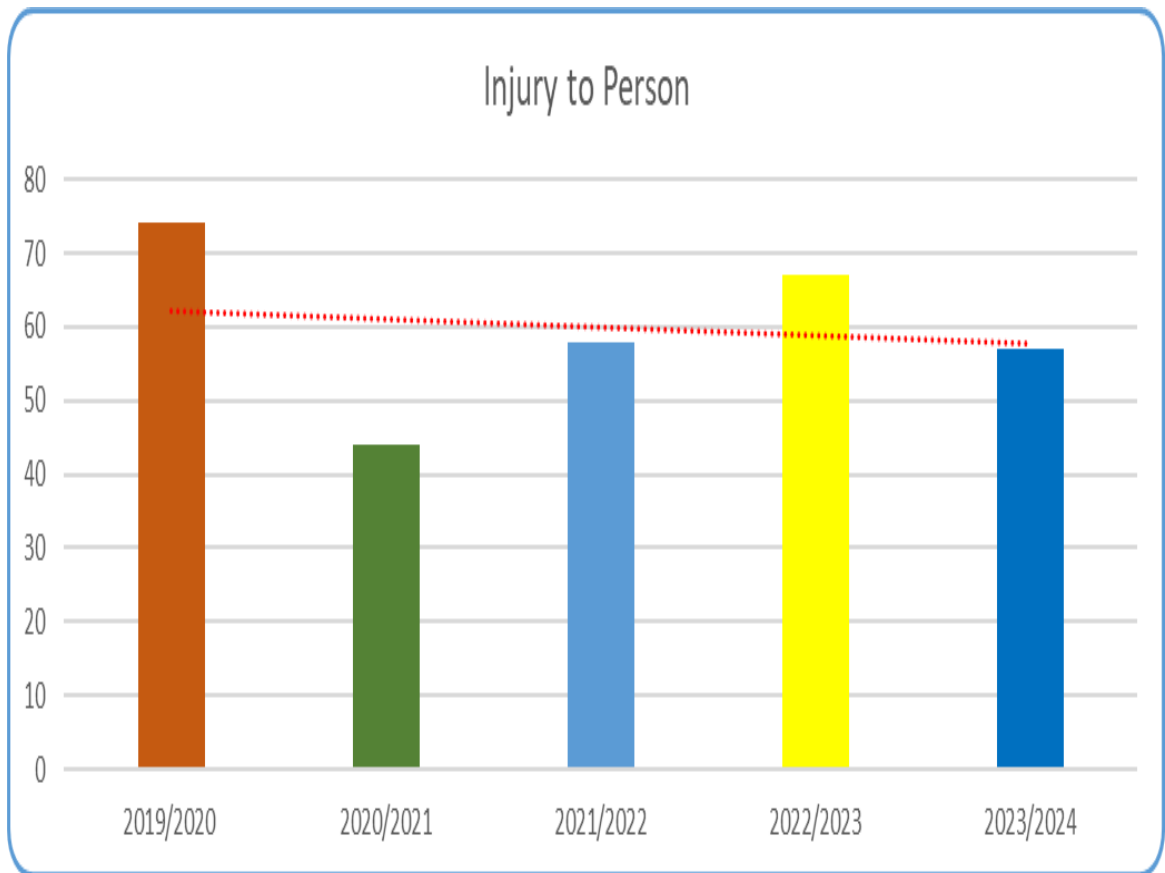


**Personal Injuries:**

2.18. During Quarter 3 of 2024-25, there were 13 injuries, a 8.33% (1 injury) increase on the previous quarter. Injury numbers in Quarter 3 are the same as for Quarter 3 of 2023-24. The injury figures in general remain low when compared to the size of the workforce and nature of the activities. The trendline shows a slight increase over the 12-month period.

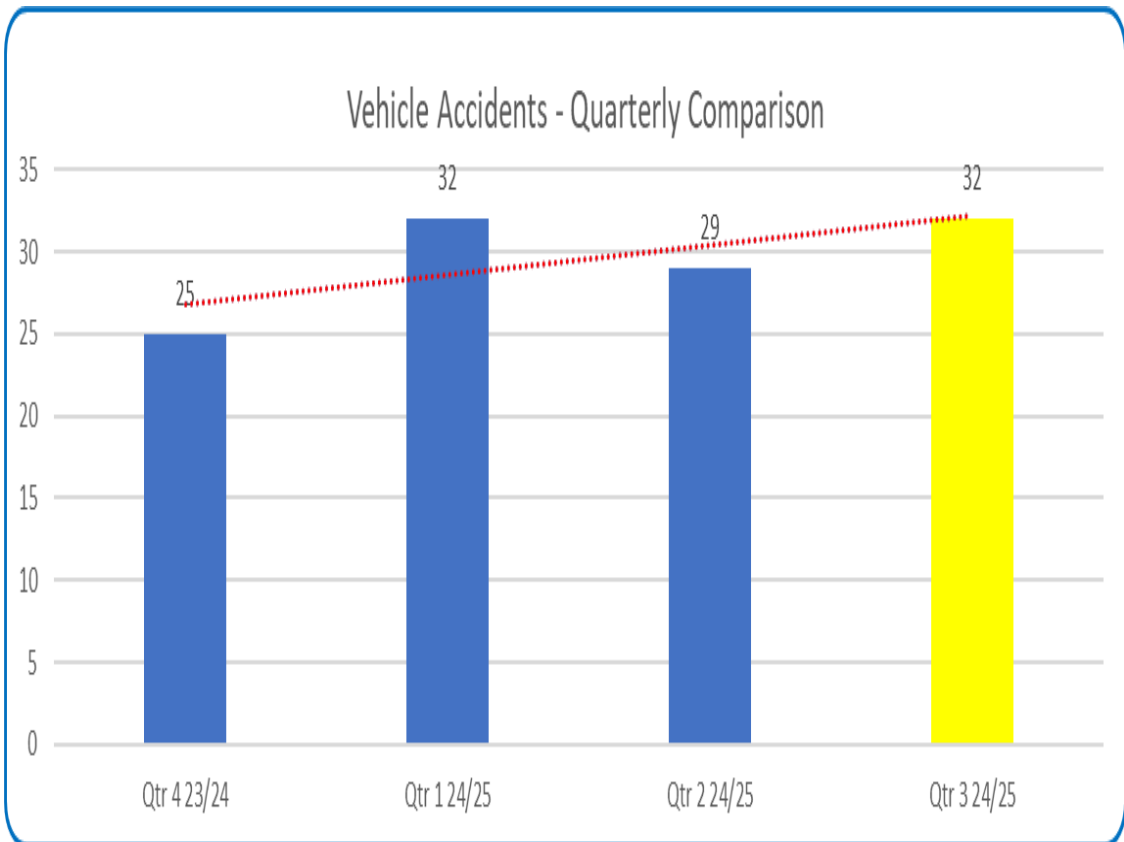
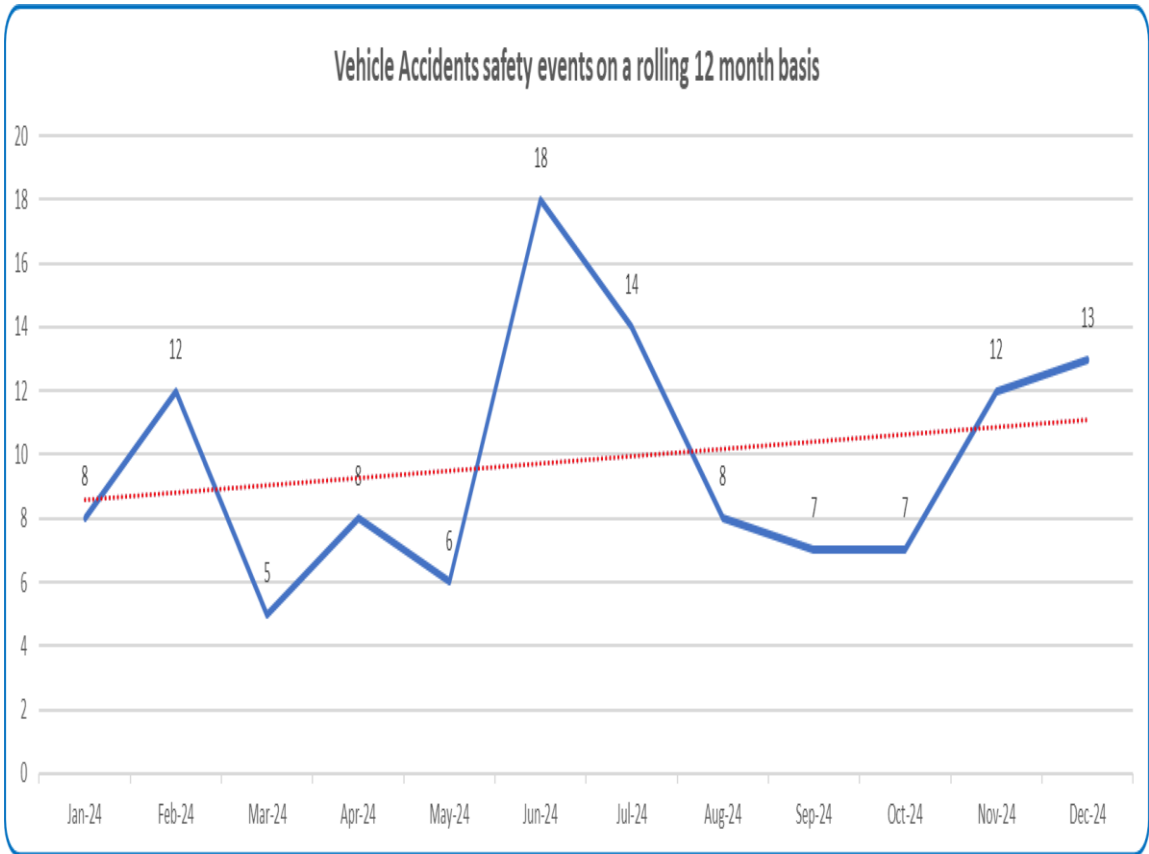


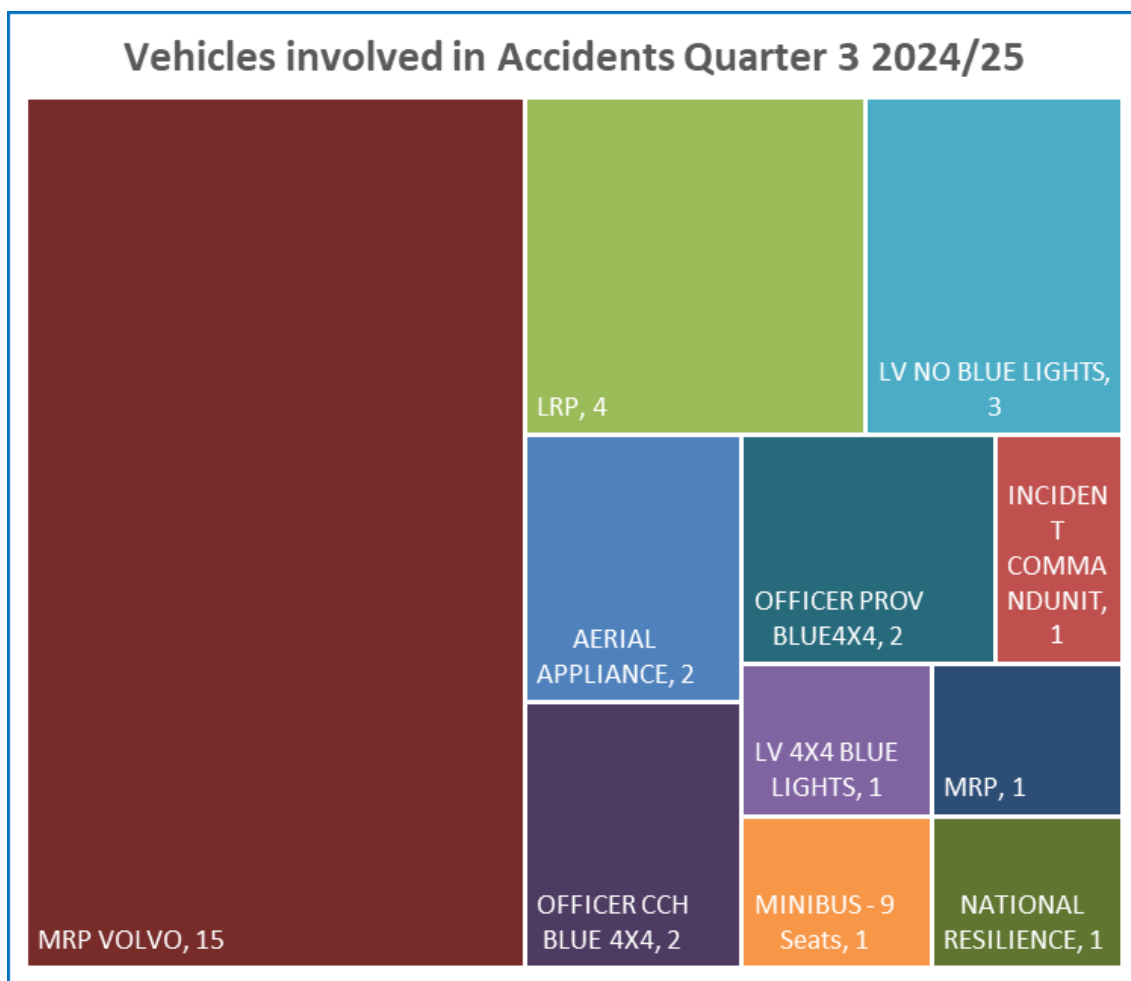
2.19. The annual trend over the last 5 financial years (2019/20 – 2023/24) indicates a slight reduction in injury related safety events.



**Vehicle Incidents:**

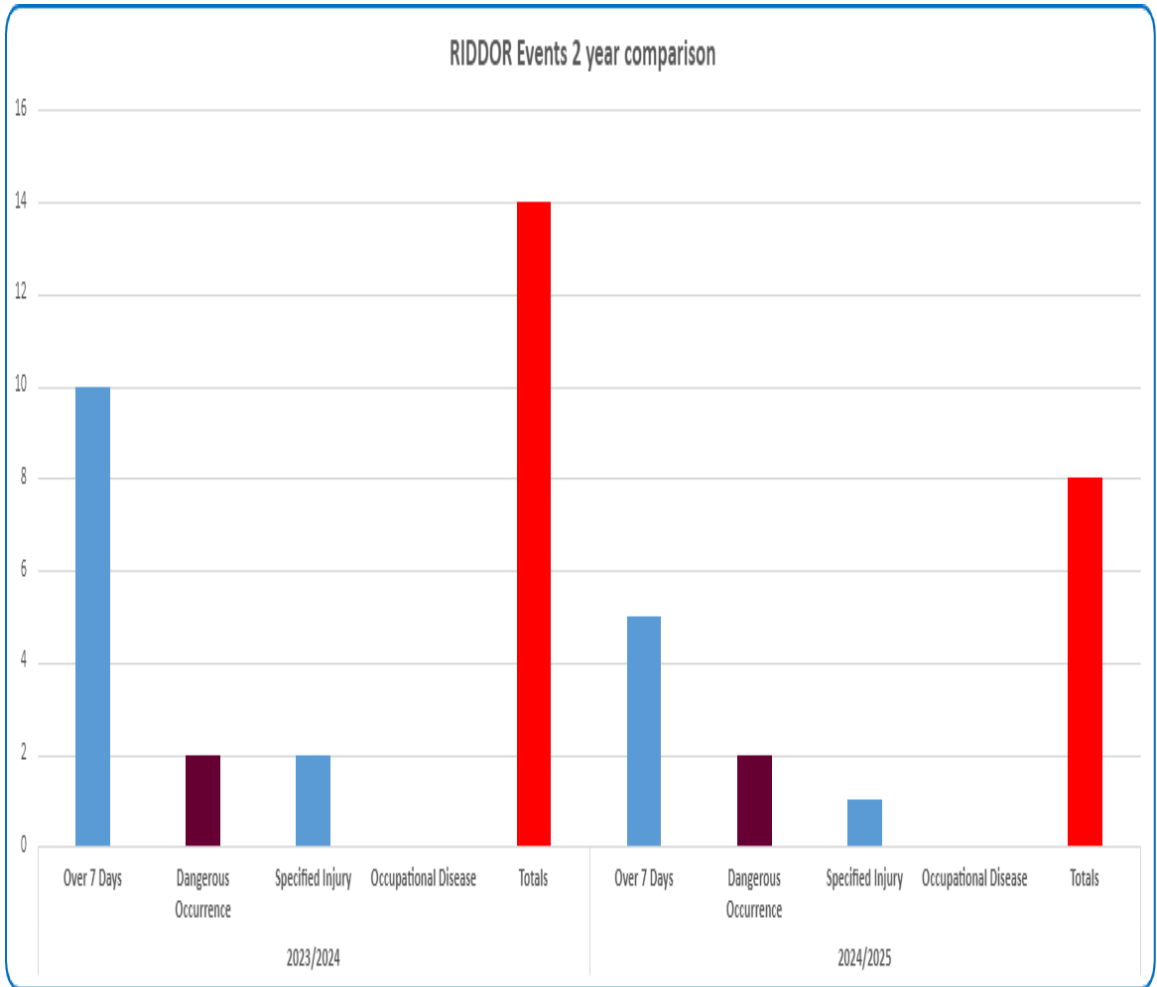
- 2.20. There were 32 vehicle incidents in Quarter 3 of 2024-25, this is an increase of 3 (10%) on the previous quarter. There were 8,047 mobilisations in Quarter 3, of this 0.39% resulted in a vehicle related safety event. This is a slight increase on the previous quarter (0.37%). Vehicle related accidents 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. The Vehicles Involved chart overleaf indicates that Medium Rescue Pumps (MRP) are more frequently involved in accidents.
- 2.21. The Organisational Road Risk group meets monthly. The group are working to increase proactive communications to raise awareness of the areas where vehicle accidents are occurring, whilst also providing supporting advice and guidance where required through useful SharePoint pages.





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

- 2.22. There were 2 reported RIDDOR incidents during Quarter 3, an 'over 7 day' injury and a 'Dangerous Occurrence'. The Dangerous Occurrence was a result of a Breathing Apparatus (BA) failure whilst in an irrespirable atmosphere. The BA incident is under investigation.
- 2.23. The 2-year comparison below provides a comparison of RIDDOR reporting by RIDDOR type for this year compared against the final total for last year.

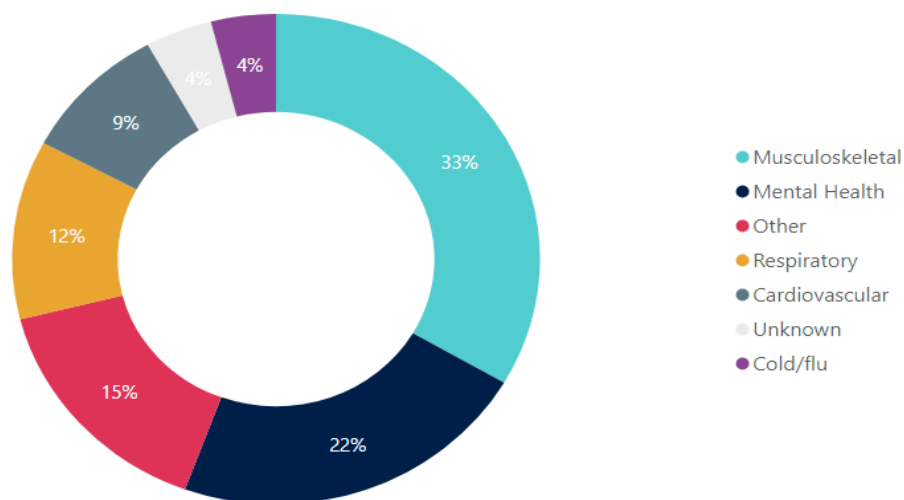


**Sickness and Absence:**

***Proportion of calendar days during Quarter 3 by sickness type.***

2.24. In terms of sickness types, 'musculoskeletal' peaked in Quarter 2 and has now returned to 33% percent of sickness absence recorded. Quarter 3 has seen a seasonal increase in respiratory conditions and Cold/flu. Mental Health has peaked to the highest all year.

Calendar Days Lost by Reason



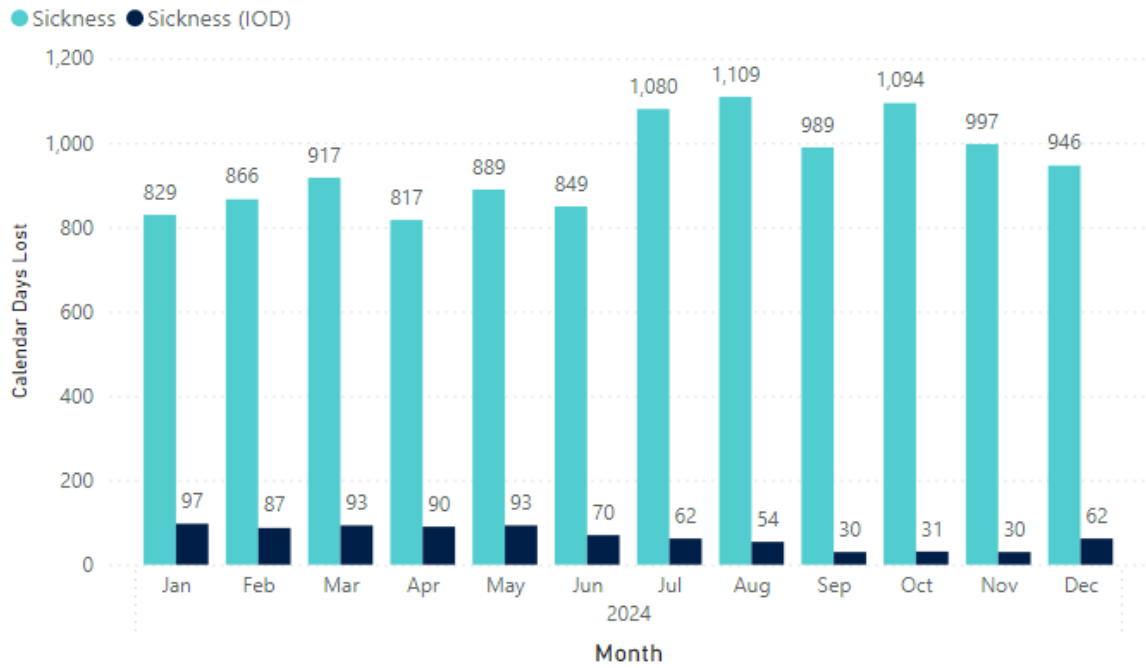
Sickness Type:	% of days lost in Quarter 4 (2023-24)	% of days lost in Quarter 1 (2024-25)	% of days lost in Quarter 2 (2024-25)	%of Days lost in Quarter 3 (2024-25)
Musculoskeletal	31.5%	33%	42%	33%
Other, including gastro, gynaecological, neurological and cancer	29.2%	24%	21%	15%
Mental Health	19.5%	17%	17%	22%

***Musculoskeletal (MSK)***

2.25. When reviewing the data for musculoskeletal injuries, overleaf, it can be observed that a significant majority of injuries continue to be not due to service-related work. In Quarter 3 of 2024-25, there was a return to the Quarter 1 levels of Injury on Duty (IOD) related injuries, after a reduction in Quarter 2, although these were still significantly lower than in the early part of 2024.

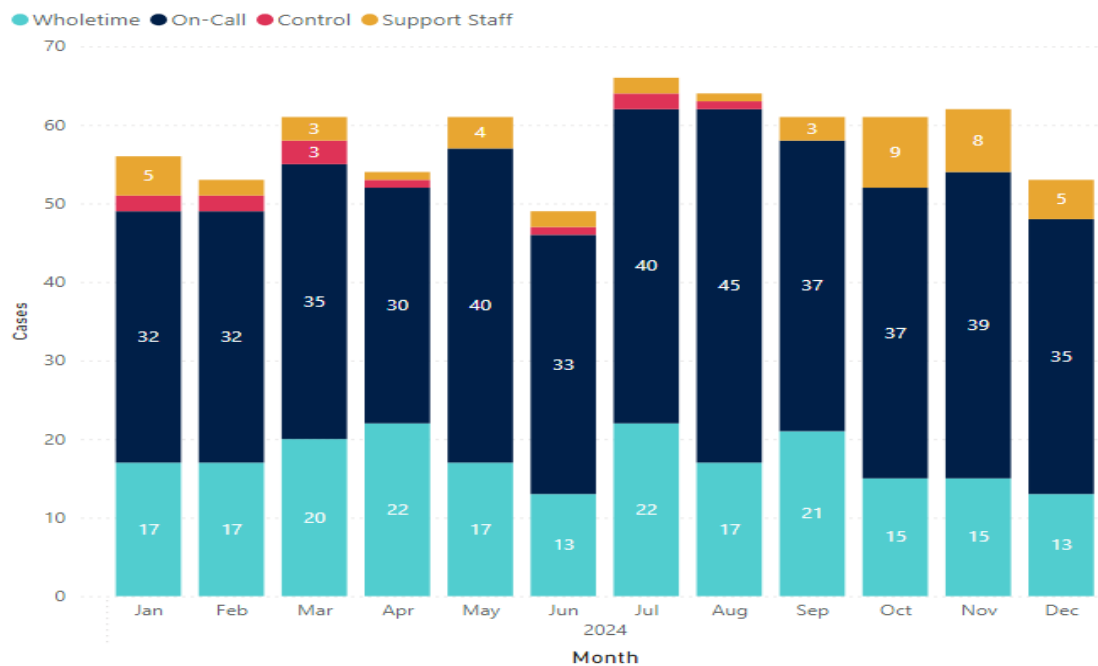


### Musculoskeletal Injury on Duty by Month (calendar days)



2.26. It can be observed, in the graph below, that there remain significantly more MSK injuries/cases with the On-Call workforce. However, this corresponds with an average of 3.2 shifts lost per Full Time Equivalent (FTE) in Wholetime and 1.8 shifts lost per FTE in On-call over the last quarter (Shifts lost are calculated using working patterns for wholetime and by multiplying calendar days by FTE for on-call)

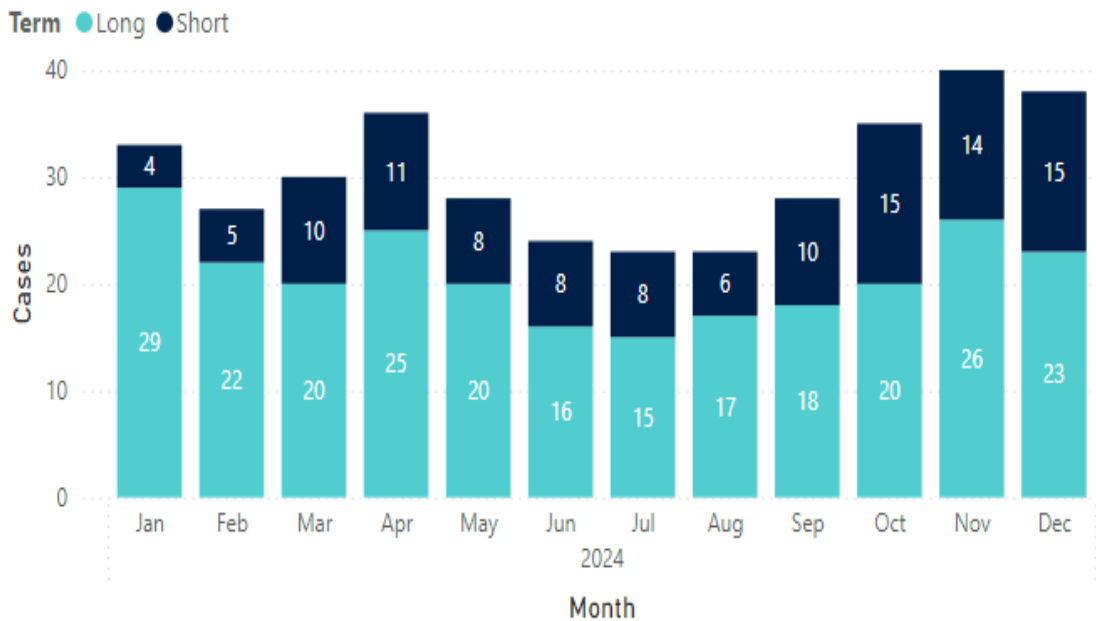
### Musculoskeletal Cases by Job Family



## Mental Health

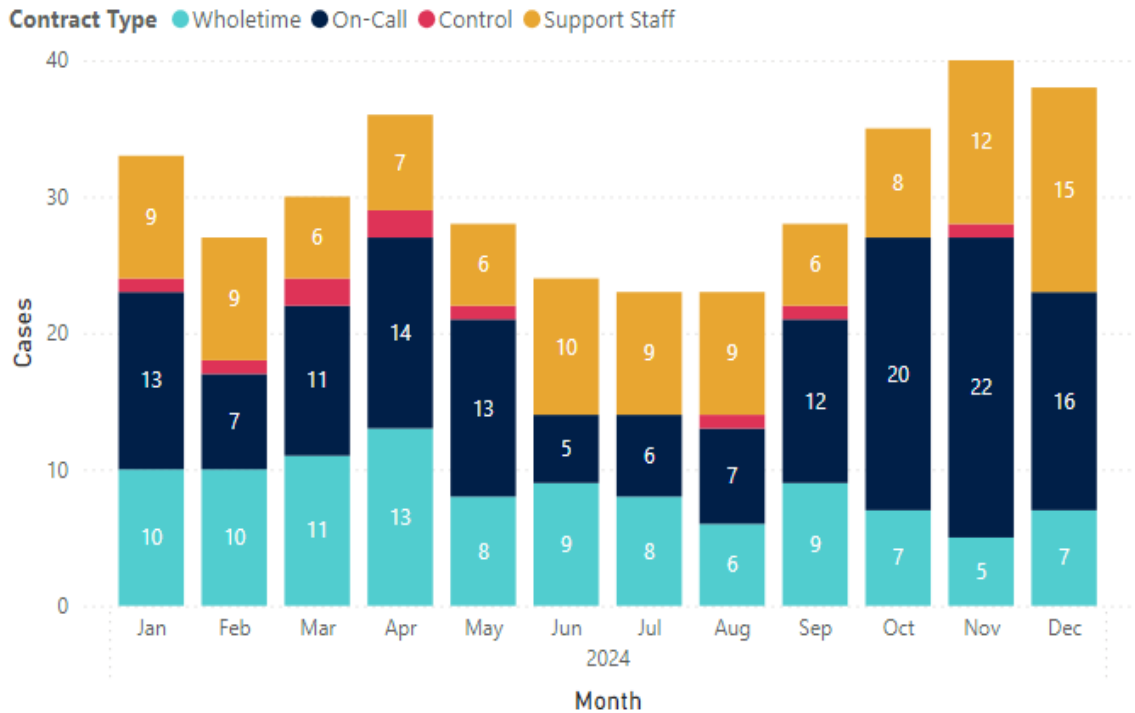
- 2.27. The graph below identifies the number of open cases in Quarter 1 and Quarter 2 of 2024-25 represented the lowest level that they have been within the last rolling 12 months. While Quarter 3 has seen an increase, the October, November and December 2024 figures are lower than they were in the equivalent time period in 2023 (43, 55 and 38 cases in 2023 compared to 35, 40 and 38 respectively with fewer long term cases).

Mental Health Cases by Absence Term



- 2.28. When considering the mental health cases by staff groups, it can be observed in the graph overleaf, that there continues to be a higher case of numbers of On-Call colleagues' absence, however even at its peak in November 2024 this equated to 2.02% of the workforce. Across all staff groups, overall case numbers remain lower than at the same time in the previous year.

## Mental Health Cases by Contract Type



2.29. When considering mental health cases in relation to population of the workforce, it can be observed that the Support areas have the highest percentage of the workforce suffering from mental health conditions. In Control and Wholetime the cases represent a much smaller proportion of the workforce. Preventative support and increased communication in this area will now be a focus.

Job Family	Percentage of workforce (at end of Q3)
On-Call	2.02%
Support	4.07%
Wholetime	1.34%
Control	0%

2.30. There is still work to do with supporting colleague's mental health, something that should be a key focus as the Service progresses through the various change programmes underway, now and in the future.

2.31. The table overleaf displays long term sickness (LTS) absence across the staff groups. Whilst work is underway to support and manage cases more effectively than in the past, an increase across some staffing groups as the year progresses, particularly in Support areas, is observed. Wholetime has seen a steady reduction into single figures.

## Number of Employees on LTS by Month

Year	2024											
	Job Family	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
Wholetime	10	10	11	13	8	9	8	6	9	7	5	7
On-Call	13	7	11	14	13	5	6	7	12	20	22	16
Control	1	1	2	2	1	0	0	1	1	0	1	0
Support Staff	9	9	6	7	6	10	9	9	6	8	12	15

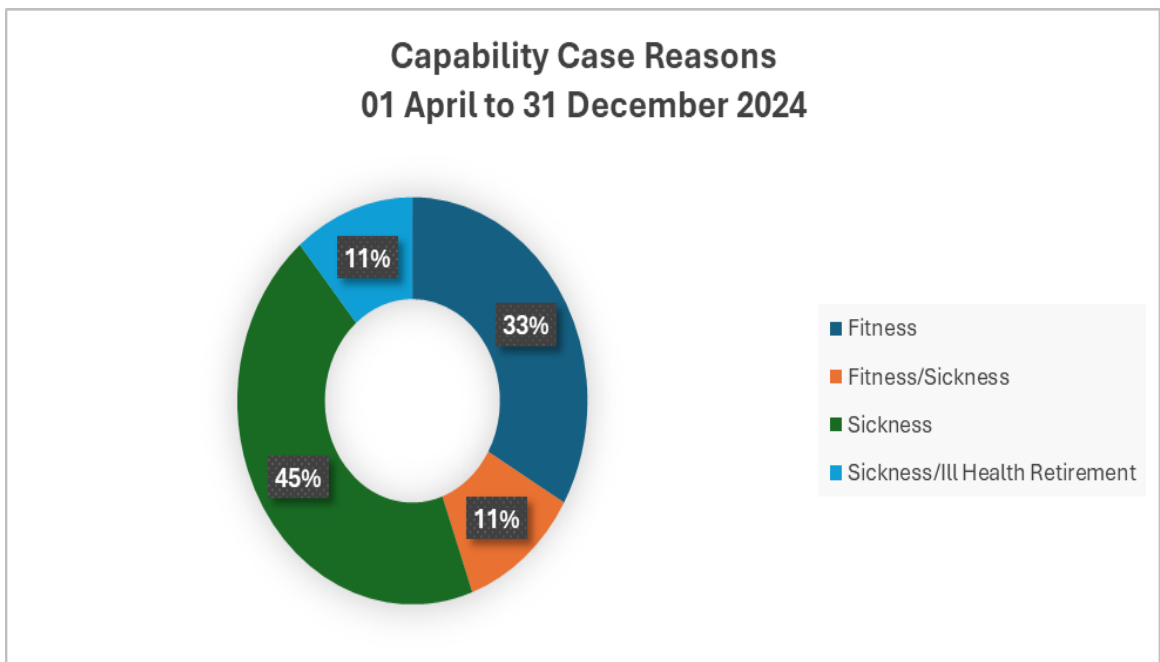
### ***Health and Wellbeing Support***

- 2.32. A new Health and Wellbeing advisor has started in their role, supporting the existing Health and Wellbeing advisor, in providing welfare provision across the service.
- 2.33. Despite some improvements, the Service continues to experience difficulties with the Occupational Health (OH) provider. Unfortunately, the regular (weekly) meetings that were held with the provider to manage the account have not been able to take place, due to the unexpected departure of the OH's account manager and a delay before allocating a new one to the Service. The contract is due to end in 2026.
- 2.34. The Service continues to collaborate closely with the Firefighters' Charity to support the wellbeing provision it can offer. There are several workshops being put to everyone in the Service to attend virtually. They start in January and include topics such as Developing resilience, Mental health and exercise and Managing stress. Several On-Call stations have also signed up for specific wellbeing workshops around nutrition, sleep and exercise.
- 2.35. During Quarter 3 of 2024-25, an increase in mental health wellbeing interventions and requests for support has been experienced. These have been from colleagues requesting support for themselves, before feeling the need to have time off, as well as colleagues and line managers requesting support for others or their whole team. The common themes are stress due to workload and the support functions and the proposed changes to Wholetime shift patterns for our operational colleagues.
- 2.36. The Service has held several internal mediation sessions between colleagues. These would have historically been outsourced incurring spend. Themes are again resulting mainly from workload, stress, and how people respond to each other due to those pressures.

**3. Capability, Disciplinary & Grievance case summary (last financial year)**

**Capability Cases**

- 3.1. Across the Service from 1<sup>st</sup> April to 31<sup>st</sup> December 2024, there have been 9 formal capability cases. Comparatively, in the same period in 2023, there were 17 formal capability cases (19 capability formal cases in total in 2023-2024). These figures show a significant reduction in the number of formal capability cases for the same period in 2023-24.
- 3.2. To date, Financial Year (FY) 2024/2025 has had the highest number of formal capability cases with 19 cases compared to 7 cases in the FY 2023/2024.
- 3.3. From 1st April to 31st December 2024, there have been 7 open, formal capability cases and 2 cases have been closed.
- 3.4. From 1st April to 31st December 2024, the reasons for capability cases are visualised below:



Capability Case Reason 01/04/24 - 31/12/24	%	Number
Disability	0	0
Fitness	33	3
Fitness/Sickness	11	1
Performance	0	0
Sickness	45	4
Sickness/Ill Health Retirement	11	1
<b>Total Number of Capability Cases</b>	<b>100%</b>	<b>9</b>

3.5. From 1st April to 31st December 2024, fitness and sickness were the main reasons for formal capability cases. This was the case for the previous two financial years also.

3.6. The table below shows the number of formal capability case reasons over the last two financial years and the current financial year from 1st April to 31st December 2024:

<b>Capability Case Reason</b>	<b>Number of Cases FY 2022/2023 (01/04/2022 to 30/03/2023)</b>	<b>Number of Cases FY 2023/2024 (01/04/2023 to 30/03/2024)</b>	<b>Number of Cases FY 2024/2025 (01/04/2024 to 31/12/2024)</b>
Disability	1	0	0
Fitness	2	8	3
Fitness/Sickness	1	1	1
Performance	1	2	0
Sickness	2	5	4
Sickness/III Health Retirement	0	3	1
<b>Total Number of Capability Cases</b>	<b>7</b>	<b>19</b>	<b>9</b>

***Disciplinary Cases***

3.7. From 1st April to 31st December 2024, there were 12 disciplinary cases across the Service. Of the 12 cases, 3 cases progressed to a formal disciplinary hearing, 8 cases did not progress to a disciplinary hearing and 1 case is currently being investigated.

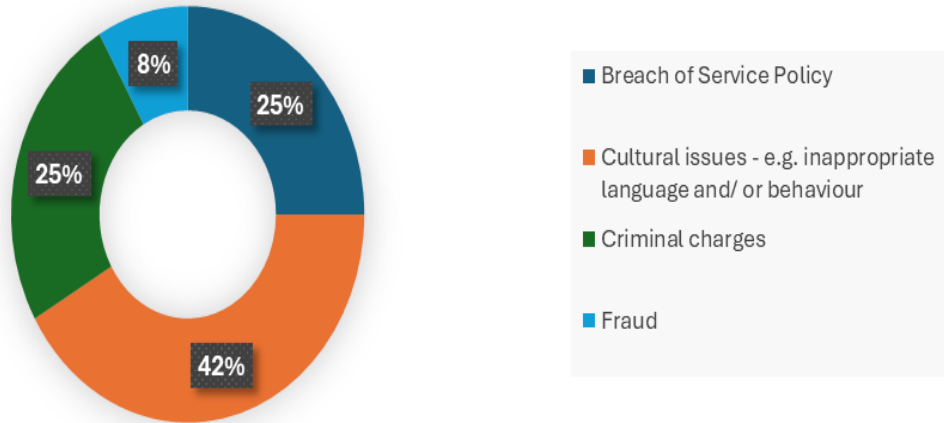
3.8. 3 cases of alleged Gross Misconduct progressed to a disciplinary hearing from which there were 2 cases of breach of Service policy and 1 case of cultural issues – e.g. inappropriate language and/or behaviour.

3.9. Of the 8 cases that did not progress to a disciplinary hearing, these were due to no evidence to support allegations (2 cases), no action taken by police (2 cases), resignation during investigation (1 case), note for file (1 case) and informal action (2 cases).

3.10. There are currently 3 open cases and 9 cases closed of the total disciplinary cases from 1st April to 31st December 2024.

3.11. From 1st April to 31st December 2024, the reasons for the disciplinary cases are visualised overleaf:

### Disciplinary Case Reasons 01 April to 31 December 2024



Disciplinary Case Reason (01/04/24-31/12/24)	%	Number
Breach of Service Policy	25	3
Cultural issues - e.g. inappropriate language and/ or behaviour	42	5
Failure to comply with contractual obligations and/ or HR policy	0	0
Fraud	8	1
Unauthorised use of and/ or damage to Service assets	0	0
Criminal charges	25	3
<b>*Total Number of Disciplinary Cases</b>	<b>100%</b>	<b>12</b>

- 3.12. In 2022-23, 2023-24 and the current year from 1st April to 31st December 2024, breach of Service policy and cultural issues were the main reasons for disciplinary cases. In 2025, the Service will be rolling out new training for all employees on The Workers Protection Act 2024 and preventing sexual harassment in the workplace. This will provide an overall reminder about acceptable standards of behaviour in and out of the workplace.
- 3.13. In 2024-25 (to 31 December 2024), the number of criminal charges remains at 3 cases which is the same as in 2023-24.
- 3.14. Additionally, there has been a significant reduction in fraud cases with zero formal cases recorded in 2023-24 and one case for the period 1st April to 31st December 2024 which is pending a disciplinary hearing.

<b>Disciplinary Case Reason</b>	<b>Number of Cases 2022/2023 (01/04/2022 to 31/03/2023)</b>	<b>Number of Cases 2023/2024 (01/04/2023 to 31/03/2024)</b>	<b>Number of Cases 2024/2025 (01/04/2024 to 31/12/2024)</b>
Breach of Service Policy	8	9	3
Cultural issues - e.g. inappropriate language and/ or behaviour	8	4	5
Failure to comply with contractual obligations and/ or HR policy	1	1	0
Fraud	5	0	1
Unauthorised use of and/ or damage to Service assets	2	0	0
Criminal charges	0	3	3
<b>*Total Number of Disciplinary Cases</b>	<b>24</b>	<b>17</b>	<b>12</b>

\*includes all disciplinary cases – cases progressed to a disciplinary hearing and also cases which did not progress to a hearing.

- 3.15. The table below shows the number of disciplinary case outcomes over the last two financial years and the current financial year from 1<sup>st</sup> April 2024 to 31<sup>st</sup> December 2024:

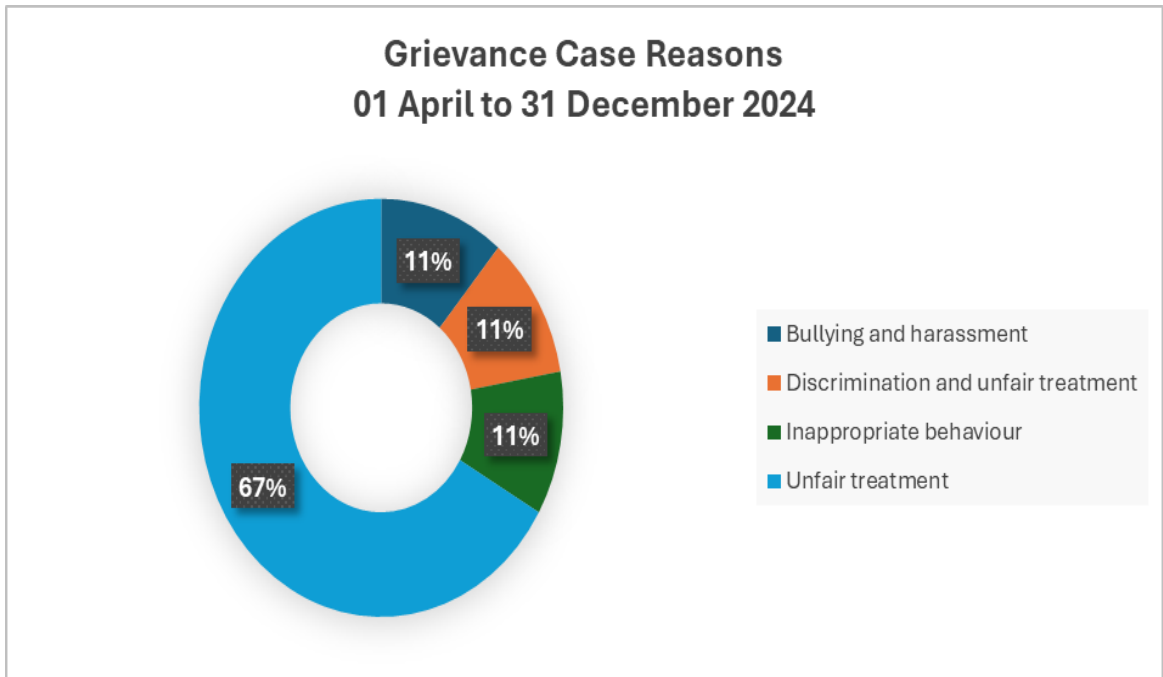
<b>Disciplinary Case Outcome</b>	<b>Number of Cases 2022/2023 (01/04/2022 to 31/03/2023)</b>	<b>Number of Cases 2023/2024 (01/04/2023 to 31/03/2024)</b>	<b>Number of Cases 2024/2025 (01/04/2024 to 31/12/2024)</b>
Unknown – under investigation	1	4	1
Note for File	2	0	1
No Case to Answer	7	5	2
First Written Warning	5	1	0
Final Written Warning	1	4	0
Dismissal	1	1	1*
Other	0	2	2
Resigned/retired during process	7	0	1

\*Employee resigned during process. Disciplinary hearing took place in their absence and decision was summary dismissal.



### Grievance Cases

- 3.16. Between 1st April and 31st December 2024, there were 9 grievance cases raised across the Service. There are currently 5 open cases and 4 cases have been closed.
- 3.17. Of the 9 grievance cases, 1 case was resolved informally and 2 cases currently awaiting an outcome of informal resolution.
- 3.18. From 1st April to 31st December 2024, the reasons for the grievance cases were as shown in the below pie chart and table:



Grievance Case Reason 01/04/2024 - 31/12/2024	%	Number
Bullying and harassment	11	1
Bullying and unfair treatment	0	0
Discrimination	0	0
Discrimination and unfair treatment	11	1
Inappropriate behaviour	11	1
Loss of earnings	0	0
Management communication	0	0
Process issue	0	0
Racial harassment	0	0
Unfair investigation	0	0
Unfair promotion process	0	0
Unfair treatment	67	6
<b>Total Number of Grievance Cases</b>	<b>100</b>	<b>9</b>

- 3.19. Unfair treatment continues to be the main reason for grievance cases across all financial years, including in the current financial year from 1st April to 31st December 2024. Discrimination, racial harassment and inappropriate behaviour cases remain low across all financial years to date.

<b>Grievance Case Reason</b>	<b>Number of Cases 2022/2023 (01/04/2022 to 31/03/2023)</b>	<b>Number of Cases 2023/2024 (01/04/2023 to 31/03/2024)</b>	<b>Number of Cases 2024/2025 (01/04/2024 to 31/12/2024)</b>
Bullying and harassment	0	3	1
Bullying and unfair treatment	1	1	0
Discrimination	1	0	0
Discrimination and unfair treatment	0	1	1
Inappropriate behaviour	0	2	1
Loss of earnings	0	5	0
Management communication	1	0	0
Process issue	3	1	0
Racial harassment	1	0	0
Unfair investigation	2	0	0
Unfair promotion process	1	1	0
Unfair treatment	6	9	6
<b>Total Number of Grievance Cases</b>	<b>16</b>	<b>23*</b>	<b>9</b>

\*includes 5 cases resolved informally and 1 case resolved by settlement agreement

- 3.20. The table overleaf shows the number of grievance case outcomes over the last two financial years and the current financial year from 1st April 2024 to 31st December 2024.
- 3.21. In 2023/2024, more grievance cases were resolved through informal resolution actions and mediation than the previous financial year. With the majority of cases from 1st April to 31st December 2024 currently under investigation (5 out of 9 cases), it is hoped there will be more cases in the current financial year that can be resolved informally, where possible.

Grievance Case Outcome	Number of Cases 2022/2023 (01/04/2022 to 31/03/2023)	Number of Cases 2023/2024 (01/04/2023 to 31/03/2024)	Number of Cases 2024/2025 (01/04/2024 to 31/12/2024)
Not upheld	4	5	2
Partially upheld	8	6	0
Upheld	2	3	1
Withdrawn	1	0	0
Other*	1	8	1
Unknown – under investigation or awaiting informal resolution outcome	0	1	5

\*includes cases resolved by informal resolution, mediation and settlement agreement.

#### 4. **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:***

- 4.1. 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 in April 2025.

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

- 4.2. The new Leading Others development process has received excellent feedback, following the re-design earlier this year. Leading the Function is booked to take place in January 2025, following the successful trial in November 2024.
- 4.3. The Service has now run several ‘Have-a-go’ days for On-Call recruitment. There are more planned throughout 2025. Two (Yeovil and Middlemoor) are dedicated positive action events for underrepresented groups.
- 4.4. The Service has identified, through Strategic Workforce Planning, that Firefighter recruitment is now required. Several processes are running to achieve this; On-Call to Wholetime, Direct Transfer from another Fire and Rescue Services and next year an External Wholetime Firefighter recruitment drive, with a course planned in Sept 2025.

4.5. All recruitment processes have been reviewed to ensure they are accessible for everyone. This has resulted in several changes in how things are achieved but have not hindered the overall effect or outcomes and received positive initial feedback from His Majesty’s Inspectorate of Constabulary & Fire & Rescue Services.

**5. UPDATE ON STRATEGIC WORKFORCE PLANNING**

***Turnover and attrition:***

5.1. The attrition rate is reached by averaging the headcount staff population across a 12-month period and then dividing the number of leavers within the period by this average. (If a person leaves multiple positions, they are counted once for each position. This will also include people who have left a position but remain employed in another one although it will exclude transfers. The attrition rates for Quarter 3 of 2024-25 are set out below.

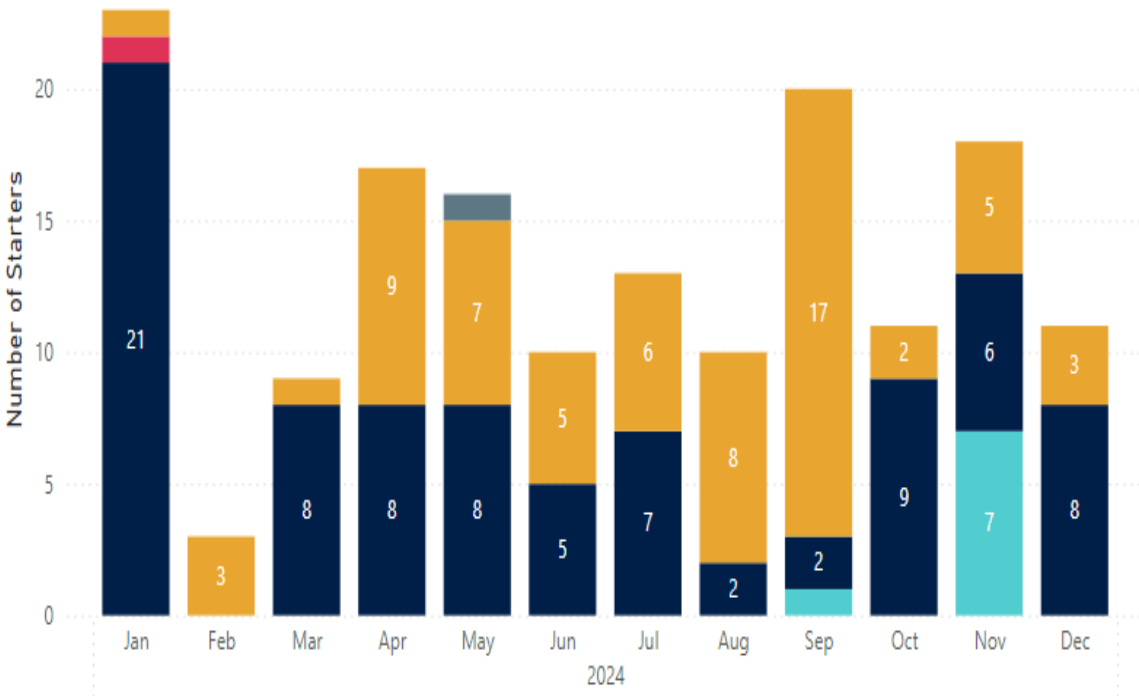
<b>Staff Group</b>	<b>October</b>	<b>November</b>	<b>December</b>
Wholetime	11.3%	10.9%	11.9%
On-Call	10.1%	9.9%	10.6%
Support	10.0%	10.3%	10.3%

5.2. Since the previous People Committee meeting, it has been observed that the attrition rates across the Service has remained at 10.8%. While the wholetime staff attrition rate has increased over Quarter 3 it has continued at a similar rate for on-call and support with a 0.3% increase between the Quarter 2 and Quarter 3 figures.

5.3. Work will continue to track and map these figures over the coming months as part of Strategic Workforce Planning activity and consider any appropriate interventions to address and concerns. An overview of starters and leavers month-on-month is shown overleaf.

### Starters by Month

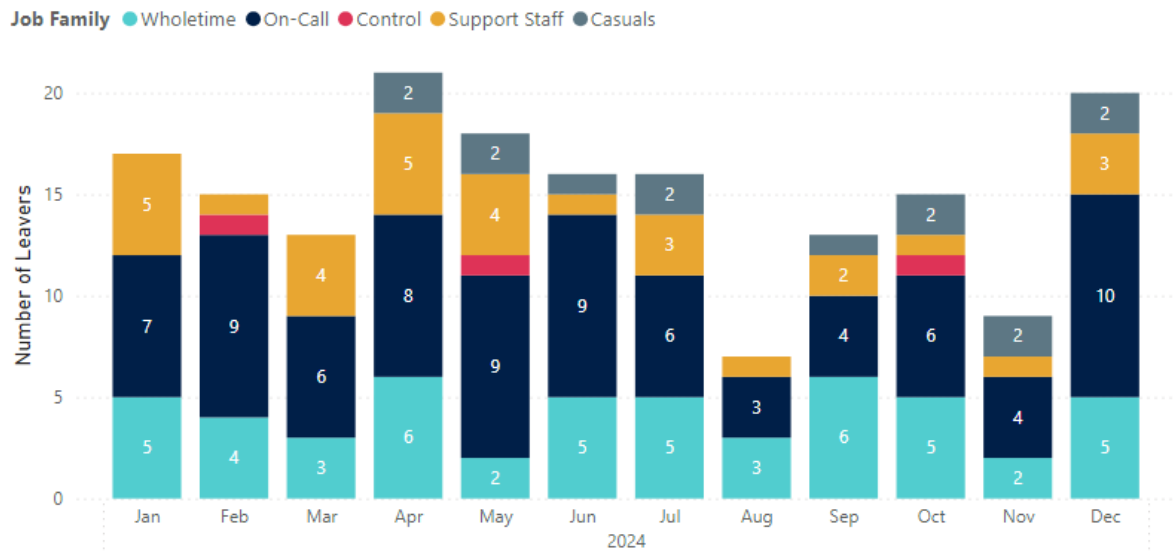
Job Family ● Wholetime ● On-Call ● Control ● Support Staff ● Casuals



Year	2024											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Wholetime	0	0	0	0	0	0	0	0	1	0	7	0
On-Call	21	0	8	8	8	5	7	2	2	9	6	8
Control	1	0	0	0	0	0	0	0	0	0	0	0
Support Staff	1	3	1	9	7	5	6	8	17	2	5	3
Casuals	0	0	0	0	1	0	0	0	0	0	0	0

5.4. The relatively high numbers of starters in support areas largely correspond with the leaver figures of the preceding months and there have been a greater number of operational posts recruited in Quarter 3.

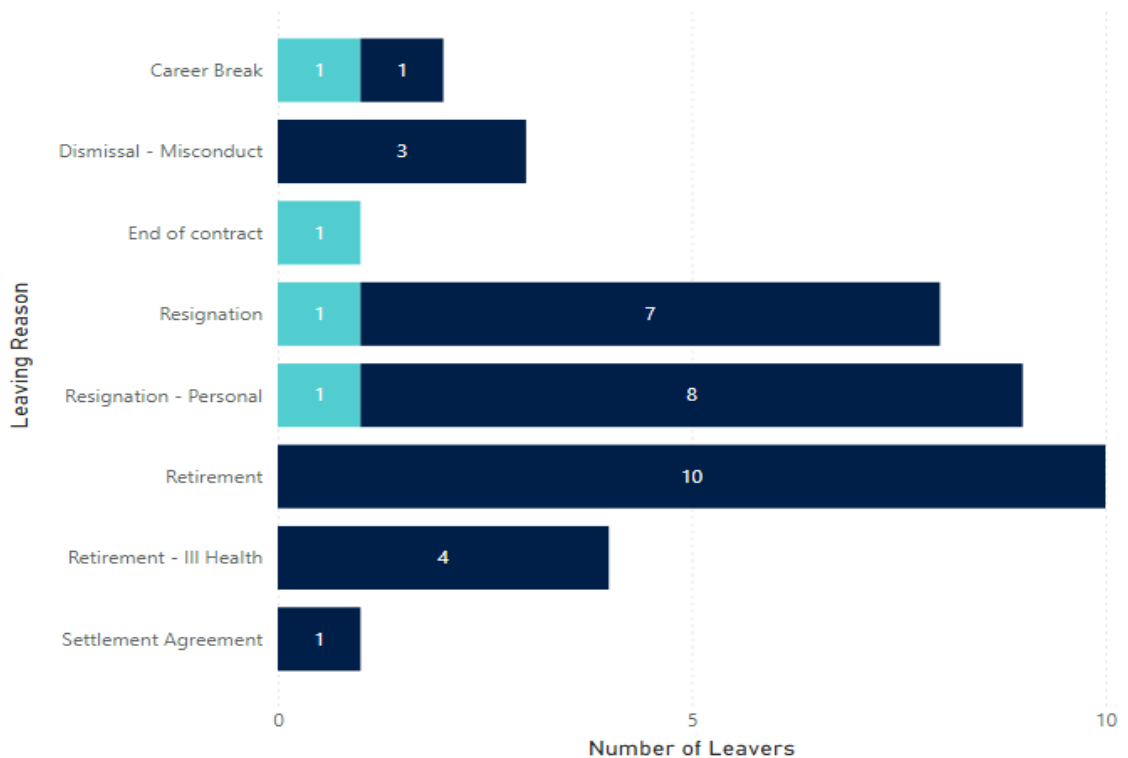
Leavers by Month



Year	2024											
Job Family	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Wholetime	5	4	3	6	2	5	5	3	6	5	2	5
On-Call	7	9	6	8	9	9	6	3	4	6	4	10
Control	0	1	0	0	1	0	0	0	0	1	0	0
Support Staff	5	1	4	5	4	1	3	1	2	1	1	3
Casuals	0	0	0	2	2	1	2	0	1	2	2	2

5.5. The chart overleaf shows the reasons for leaving over the last quarter by gender. 'Resignation – personal' will generally refer to situations where a lifestyle reason or personal circumstance has prompted a decision to leave, rather than for other reasons, such as career advancement or pursuing an opportunity elsewhere.

## Reasons for leaving (by gender)



\*light blue represents a female leaver

## 6. PEOPLE SERVICES SYSTEMS PROJECT

- 6.1. The build of the performance review module in iTrent is now complete and the module was launched on 1<sup>st</sup> November 2024. Early adopters are now using the system for 'one to one's and performance management activity. 'How to' videos have been released to embed usage.
- 6.2. Most 'data dashboards' of management information have been handed over to People Services by the project team with a few outstanding data sets due to happen in line with the reporting calendar over the next two months. This work has created efficiencies and greater consistency in what is being reported to different stakeholder groups including the Strategic Workforce Planning Group and the People Committee as well as His Majesty's Inspectorate of Constabulary & Fire & Rescue Services, the Home Office and the Office for National Statistics.
- 6.3. The Digitisation of Personnel Files project is on track to be completed by the estimated end date of 31<sup>st</sup> March 2025. All leavers' files have been digitised and around 75% of the estimated 1850 active files have undergone a data cleanse in line with data retention requirements. The Service is in the process of finalising the file structure for digitisation of active files and plans to send the first batches for digitisation by the end of January 2025.

**7. PERFORMANCE MONITORING – STRATEGIC POLICY OBJECTIVE 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***









- 7.1. Reported above, at Section 5, within the update on Strategic Workforce Planning.

**CHRIS HOWES**  
**Assistant Director (People)**



**SUMMARY OF PERFORMANCE AGAINST AGREED MEASURES**

Quarterly Reporting:

Target area:	Agreed performance measure:	Q4 (2023-24)	Q1 (2024-25)	Q2 (2024 -25)	Q3 (2024-25)	Trend
Firefighter Competence	90% (as of October 2022)	0 of 7 core competencies below 90%	0 of 7 core competencies below 90%	1 of 7 core competencies below 90%	1 of 7 core competencies below 90%	
Accidents	Decrease	48	50	53	62	
Near Miss-	Monitor	15	14	10	19	
Personal injuries	Decrease	11	9	12	13	
Vehicle Accidents	Decrease	25	32	29	32	
Short term (average days per person, per month)	Decrease	-	0.83	0.73	1	
Long term (average days per person, per month)	Decrease	-	2.38	2.3	2.6	
Mental Health related absence (average number of cases per month)	Decrease	-	29.6	25	37.6	

(\* Please note that due to the change in sickness reporting systems and processes the Service have needed to change how it captures this specific item. Historically the quarterly averages for long-term and short-term sickness absence were based off the 12-month rolling average for each month in that quarter. There is not currently a full 12 months of directly comparable data, but reference can be made against the quarterly returns that align to the Cleveland reporting process. This will mean that the reporting is more consistent and comparable to national datasets going forward.)

FORWARD PLAN

Meeting scheduled	Reporting on	Subjects
April 2025	Quarter 4	Performance Monitoring report including financial year data: <ul style="list-style-type: none"> <li>• RIDDOR reporting,</li> <li>• Workforce planning</li> <li>• Annual Diversity data report</li> </ul>
July 2024	Quarter 1	Performance Monitoring report including financial year data: <ul style="list-style-type: none"> <li>• National FRS Sickness comparisons</li> <li>• National FRS H&amp;S comparisons,</li> <li>• Grievance, Capability &amp; Disciplinary</li> </ul>
October 2024	Quarter 2	Performance Monitoring report including 6 - monthly data: <ul style="list-style-type: none"> <li>• Workforce planning</li> <li>• People survey action plan update</li> </ul>
<b>January 2025</b>	<b>Quarter 3</b>	<b>Performance Monitoring report including Calendar Year data:</b> <ul style="list-style-type: none"> <li>• <b>Fitness testing,</b></li> <li>• <b>Grievance, Capability &amp; Disciplinary</b></li> </ul>

<b>REPORT REFERENCE NO.</b>	<b>PC/25/2</b>
<b>MEETING</b>	<b>PEOPLE COMMITTEE</b>
<b>DATE OF MEETING</b>	<b>24 JANUARY 2025</b>
<b>SUBJECT OF REPORT</b>	<b>HIS MAJESTY’S INSPECTORATE OF CONSTABULARY &amp; FIRE &amp; RESCUE SERVICES (HMICFRS) ACTION PLAN UPDATE</b>
<b>LEAD OFFICER</b>	<b>Chief Fire Officer</b>
<b>RECOMMENDATIONS</b>	<i>That the Committee reviews progress in delivery of the action plan.</i>
<b>EXECUTIVE SUMMARY</b>	<p>On 27th July 2022 His Majesty’s Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) published the DSFRS 2022 Inspection Report. The inspection report identified one Cause of Concern and 14 Areas for Improvement (AFIs). Of the 14 AFIs, eight have been linked to the People Committee.</p> <p>Since the inspection report, two national thematic reports have been published by HMICFRS. The first, published on 31 March 2023, examined the values and culture in fire and rescue services. The second, published on 01 August 2024, examined standards of behaviour and the handling of misconduct in fire and rescue services.</p> <p>This report outlines the progress that has been made against the HMICFRS Areas for Improvement and national recommendations since the last update to the Committee in October 2024.</p>
<b>RESOURCE IMPLICATIONS</b>	Considered within the Action Plan where appropriate.
<b>EQUALITY RISKS AND BENEFITS ANALYSIS</b>	Considered within the Action Plan where appropriate.
<b>APPENDICES</b>	None.
<b>BACKGROUND PAPERS</b>	None.

## **1. INTRODUCTION**

- 1.1. On 27<sup>th</sup> July 2022 His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) published the 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.
- 1.2. On 31 March 2023, HMICFRS published a report into the values and culture in fire and rescue services. The report contained 35 recommendations, 1 specific for the Police, 14 which required action at a national level and 20 which were specific for fire and rescue services.
- 1.3. 01 August 2024 HMICFRS published a report into standards of behaviour and the handling of misconduct in fire and rescue services. The report contained 15 recommendations to Chief Fire Officers, Fire and Rescue Authorities and others.
- 1.4. This report outlines the progress that has been made against the HMICFRS Areas for Improvement and national recommendations since the last update to the Committee on 18 October 2024.

## **2. CAUSE OF CONCERN ACTION COMPLETION STATUS**

- 2.1 The Cause of Concern was as follows:

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 31<sup>st</sup> 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 All actions under the cause of concern have now been marked as completed. The recommendation for closure was approved by Executive Board on 19/03/2024.
- 2.3 The Cause of Concern has now been transitioned into Service business as usual. Progress on improving organisational culture will continue to be an area of focus.

## **3. AREAS FOR IMPROVEMENT ACTION PLAN COMPLETION STATUS**

- 3.1. Table 1 lists the open Areas for Improvement linked to the People Committee and their individual status.
- 3.2. Areas for Improvement closed since the last report to the committee: 0

3.3. Total Areas for Improvement closed: 2 (of 8)

**Table 1: Open areas for Improvement linked to the People Committee**

Reference	Description	Target Completion	Status
HMI-3.1-202208	Secondary Contracts	30/09/2024 31/01/2025	In Progress – On Track
HMI-3.2-202210	Temporary Promotions		
HMI-3.4-202213	Selection and Promotions Process		
HMI-3.2-202209	Workforce Planning	30/09/2024 31/12/2024 31/03/2025	In Progress – On Track
HMI-3.4-202214	PDR Process	30/04/2024 30/06/2024 30/11/2024 31/05/2025	In Progress – On Track
HMI-3.4-202215	High Potential Staff	TBC	Paused

#### 4. **VALUES AND CULTURE RECOMMENDATIONS**

4.1. HMICFRS required services to provide a final update on the status and progress against each of the values and culture recommendations by Tuesday 19 March 2024. The recommendations outlined in Table 2 overleaf have remained marked as 'In Progress'.

4.2. Recommendations closed since the last report to the committee: 0

4.3. Total recommendations closed: 16 (of 20)

**Table 2: HMICFRS Values & Culture “In progress” recommendations**

Reference	Description	Target Completion	Status
REC09	Background checks	30/11/2024 31/01/2025	In Progress – On Track
REC12	Staff disclosure, complaint and grievance handling standard		
REC14	Misconduct allegations standard		
REC32	Diversity in succession planning	01/01/2024 31/12/2024 31/03/2025	In Progress – On Track

**5. STANDARDS OF BEHAVIOUR RECOMMENDATIONS**

- 5.1. Table 3 overleaf lists the recommendations made in the HMICFRS report on standards of behaviour and the handling of misconduct and their individual status. The table outlines the deadline set by HMICFRS and also the internal target completion date (TCD) set by the Service.
- 5.2. Recommendations closed since the last report to the committee: 1
- 5.3. Total recommendations closed: 3 (of 16)
- 5.4. Dates marked with an asterisk (\*) indicate that the Service is ‘Off Track’ for completion of the recommendation by that date.

**Table 3: HMICFRS Standards of Behaviour Target Completion Dates**

Reference	Description	Deadline	TCD
REC02	Probationary Policy	01/02/2025	Closed
REC12	Welfare Support	31/08/2024	Closed
REC13a	Appeals Process	01/11/2024	Closed
REC01	Code of Ethics (SB)	01/02/2025*	30/06/2025
REC03	Watch Movements	01/02/2025*	30/04/2025
REC04	Professional Standards	01/02/2025	01/02/2025
REC05	Raising a Concern	01/11/2024*	TBC
REC06	Training for Managers	01/02/2025	01/02/2025
REC07	Misconduct Policies	01/05/2024	31/03/2025
REC08	Allegations of Misconduct	01/11/2024*	31/03/2025
REC09	Case Management	01/08/2025	01/08/2025
REC10	Misconduct Investigations	01/05/2025	01/05/2025
REC11	Misconduct Investigation Training	01/05/2025	01/05/2025
REC13b	Appeals Training	01/02/2025	01/02/2025
REC14	Performance Against Misconduct Issues	01/11/2025	01/04/2025
REC15	Learning from Misconduct	01/02/2025	01/02/2025

**6. ACTION DEADLINE EXTENSIONS**

6.1. Table 4 overleaf outlines four areas which have had a deadline extension since the last report to the People Committee.

**Table 4: Extended deadlines since the last report to Committee**

Reference	Improvement Area
HMI-3.1-202208	Secondary Contracts
HMI-3.2-202210	Temporary Promotions
HMI-3.4-202213	Selection and Promotions Process
<b>Reason for deadline extension</b>	
The consultation for the new recruitment policy has now closed. The People Services team are currently working through the feedback and it is expected that the final version will be published by 31/01/2024.	

Reference	Improvement Area
HMI-3.2-202209	Workforce Planning
REC32	Diversity in succession planning
<b>Reason for deadline extension</b>	
The workforce strategy is in development and a draft has been created. Senior Leadership Team stakeholders are being engaged. Following completion and launch of the strategy, the Workforce Plan and process will be developed, refined and launched by 31st March 2025. Each department will then develop a workforce plan, using the strategy and planning template, which will be fed into the Strategic Workforce Planning Group	

Reference	Improvement Area
HMI-3.4-202214	PDR Process
<b>Reason for deadline extension</b>	
Professional Standards Board recommended that this area for improvement remains open until its evaluation and review has been completed. To allow time for this to take place, the target completion date has been moved to 31/05/2025.	



<b>Reference</b>	<b>Improvement Area</b>
REC09	Background checks
REC12	Staff disclosure, complaint and grievance handling standard
REC14	Misconduct allegations standard
<b>Reason for deadline extension</b>	
Update to be provided during the People Committee meeting by People Services.	

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