| REPORT REFERENCE NO. | PC/23/7   |  |  |
|----------------------|---|--|--|
| MEETING              | PEOPLE COMMITTEE  |  |  |
| DATE OF MEETING      | 26 APRIL 2023   |  |  |
| SUBJECT OF REPORT    | HMICFRS CAUSE OF CONCERN AND AREAS FOR IMPROVEMENT ACTION PLAN UPDATE   |  |  |
| LEAD OFFICER         | Deputy Chief Fire Officer   |  |  |
| RECOMMENDATIONS      | That the Committee reviews progress in delivery of the action plan.   |  |  |
| EXECUTIVE SUMMARY    | On Wednesday 27th July 2022, His Majesty's Inspectorate of Constabulary & Fire & Rescue Services (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 January 2023. The key highlights are that:   |  |  |
|                      | Seven actions within the Cause of Concern action plan are currently recorded as 'In Progress – Off Track'. This is due to the following factors:  |  |  |
|                      | <ul> <li>01a.03: 90% of individuals have completed the training<br/>presentation on values, behaviours and ethics. A decision<br/>needs to be made on the target completion level for all<br/>staff across the Service.</li> </ul>  |  |  |
|                      | O1a.06: This action has been delayed due to problems with the current PPD system and therefore is off track as its target completion date (28/02/2023) has now passed.  |  |  |
|                      | <ul> <li>01a.07: This action has been changed to now include<br/>three charters instead of the four originally planned.<br/>These will be trainer/ trainee charter, customer service<br/>charter (external) and an internal charter between staff.<br/>Work is already being progressed on the trainee/ trainer<br/>and external charters, the internal charter will now be<br/>developed.</li> </ul> |  |  |
|                      | <ul> <li>01a.08/ 01b.01: The first core brief on culture will form<br/>part of the next ACFO blog and additional training will be<br/>delivered through Innovation Central. This action has<br/>been marked as off track as its target completion date<br/>(31/12/2022) has now passed.</li> </ul>  |  |  |

|                                      | <ul> <li>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. EB have agreed that the action will remain as 'Off Track' until the Freedom to Speak Up Guardian has been established.</li> <li>01b.11: This action has been completed but there is an issue with the policy management system and getting the policy approved. This action has been marked as off track as its target completion date (28/02/2023) has now passed.</li> <li>1 action within the Areas for Improvement action plan is currently recorded as 'In Progress – Off Track'. This is 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) is also linked to HMI-3.4-202214 (PDR Process), which is therefore now also showing as off track.</li> </ul> |  |
|--------------------------------------|---|--|
|                                      | 1 Area for Improvement, HMI-3.4-202215 (High Potential Staff) has been paused due to dependencies on the Area for Improvement around the selection and promotions process (HMI-3.4-202213).   |  |
| RESOURCE<br>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<br>PAPERS                 | None  |  |



# HMICFRS Action Plan People Committee Update

**HMI Team** 

Devon & Somerset Fire & Rescue Service

April 2023

### 1. INTRODUCTION

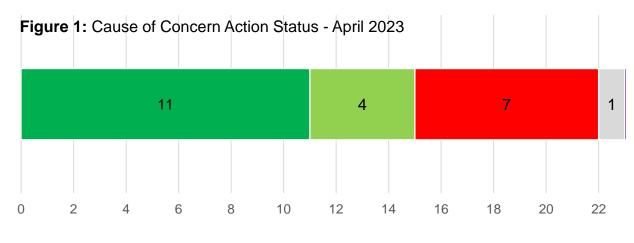
- 1.1. On Wednesday 27July 2022, His Majesty's Inspectorate of Constabulary & Fire & Rescue Services (HMICFRS) published the Devon & Somerset Fire & Rescue Service (DSFRS) 2022 inspection report. The inspection report identified one Cause of Concern and 14 Areas for Improvement (AFIs).
- 1.2. This report 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:

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.



**Number of Actions** 

- Completed
- In Progress On Track
- In Progress Off Track
- Not Started On Track (Evidence and Assurance)

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

| Table 1:                        | Table 1: Summary of progress against the individual actions           |  |  |  |  |  |  |
|---------------------------------|---|--|--|--|--|--|--|
| Cause o                         | Cause of Concern – Values and Behaviours                              |  |  |  |  |  |  |
| Not<br>started<br>(on<br>track) | started (on (off track)   In progress (on track)   Completed   Closed |  |  |  |  |  |  |
| 1 *<br>(→ at<br>1)              | 1 * 0 4 7 11 0  |  |  |  |  |  |  |

<sup>\*</sup> 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 currently in progress within the Cause of Concern action plan and their current status.

Table 2:

| Ref.   | Description   | Progress Update  | Target<br>Completion | Status                           |
|--------|---|--|----------------------|----------------------------------|
| 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). | Staff are now undertaking this training through facilitated group sessions with their line managers. As at 13/04/2023 90% of staff have undertaken this training. This action is marked as 'In Progress – Off Track' as the target completion date has now passed.                             | 31/03/2023           | In<br>Progress<br>– Off<br>Track |
| 01a.06 | PPDs to be completed in line with policy and recorded on Workbench.   | A new PPD report has been established which provides much greater detail on important performance management issues, including bullying and harassment and whether these have been reported.  864 staff have completed this to date and those that are outstanding will be chased. This action | 28/02/2023           | In<br>Progress<br>– Off<br>Track |

| Ref.   | Description   | Progress Update  | Target<br>Completion | Status                           |
|--------|---|--|----------------------|----------------------------------|
|        |   | will remain off track as the target completion date has now passed.  |                      |                                  |
| 01a.07 | Expectations documents x4 (charters) between: a. Managers and staff b. Trainers and recruits c. Staff and staff d. Staff and clients/ customers/ partners   | This action has been changed to include 3 charters - trainee/ trainer, customer service charter (external), and internal charter. The trainee/ trainer charter and the customer service charters are in development and currently both out for consultation and review. Work has started on developing the internal charter through work with the Service's Cultural Leads. This action is marked as off track as the target completion date has now passed. | 28/02/2023           | In<br>Progress<br>– Off<br>Track |
| 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/ department visits). | The update from the ACFO on values and culture (Friday 31/03/2023) will be cascaded through managers to teams are the first core brief on culture as part of the next ACFO blog. In addition to this, outcomes of the SLT meeting (05/04/2023) to discuss the new HMICFRS report will be shared with the wider Service.  | 31/12/2022           | In<br>Progress<br>– Off<br>Track |
| 01b.01 | Pre-recorded quarterly updates to all staff (leading conversations tone) on expectations to reinforce core brief, with CFO and DCFO.  | This will be coordinated through Innovation Central as part of new training for staff.   | 31/12/2022           | In<br>Progress<br>– Off<br>Track |

| Ref.   | Description   | Progress Update   | Target<br>Completion  | Status                           |
|--------|---|---|---|----------------------------------|
|        | Followed up by face-to-face engagement session (See 01b.02).  |   |   |                                  |
| 01b.03 | Performance/<br>conflict training for<br>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. The Director of Finance, People and Estates will consider these future plans in relation to the financial implications.  | 30/09/2023  | In<br>Progress<br>– On<br>Track  |
| 01b.04 | Monthly communication to the workforce on concluded disciplinaries including sanctions and rationale for those sanctions.   | The first of these updates was communicated in the Chief Fire Officer's blog (24/02/2023). The target completion date for the action will be pushed back to 31/05/2023 to allow for 3 further monthly updates. After these have been evidenced the action will be marked as completed.  | 30/11/2022<br>Revised<br>Target<br>Completion<br>Date –<br>31/05/2023 | In<br>Progress<br>– On<br>Track  |
| 01b.08 | Establish 'Speak Up' champions 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 . | 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. EB have agreed for the action will remain as off track until the Speak Up Guardian | 28/02/2023<br>Revised<br>Target<br>Completion<br>Date –<br>01/06/2023 | In<br>Progress<br>– Off<br>Track |

| Ref.   | Description   | Progress Update  | Target<br>Completion | Status                           |
|--------|---|--|----------------------|----------------------------------|
|        |   | has been established. The anticipated target completion date for this, in line with the deadline for linked recommendations in the HMICFRS Culture Report, is 01/06/2023.  |                      |                                  |
| 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 assessment centres for uniformed staff include elements to assess candidates awareness of culture and ethics. This is also included in questions for non-uniformed staff. There is ongoing work around improving the selection and promotions process which will be linked to this action. | 30/06/2023           | In<br>Progress<br>– On<br>Track  |
| 01b.11 | Exit process to be formalised. This to include specific questions on cultural improvements.   | This action has been completed but there is an issue with the policy management system and getting the policy approved. Once the new policy has been published there will be communications and additional information for managers.   | 28/02/2023           | In<br>Progress<br>– Off<br>Track |

| Ref.   | Description  | Progress Update   | Target<br>Completion | Status                          |
|--------|--|---|----------------------|---------------------------------|
| 01b.12 | Revise induction process for all staff to include the setting of expectations of behaviour, values and ethics. | The first new induction session took place on 27/03/2023 for corporate staff, some control staff and on-call staff. The behaviours, values and ethics training was not included in this session due to the 31/03/2023 deadline for service wide training. The new training on behaviour, values and ethics will be included in future sessions, the first of these is scheduled for 28/06/2023. | 30/06/2023           | In<br>Progress<br>– On<br>Track |

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 e-learning.  | 09/02/2023<br>(Director of<br>Finance, People<br>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 assessments and are a core skill on the competencies dashboard. | 26/10/2023<br>(Director of<br>Finance, People<br>and Estates) |
| 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<br>(DCFO)  |

| Ref.   | Description  | Update   | Date completed  |
|--------|--|--|---|
| 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<br>(ACFO)  |
| 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<br>(DCFO)  |
| 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<br>(Director of<br>Finance, People<br>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<br>(DCFO)  |

| Ref.   | Description  | Update   | Date completed       |
|--------|--|--|----------------------|
| 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 are also welcoming feedback on concerns via email or post. The Respect and Fairness Toolkit was also linked. | 06/03/2023<br>(DCFO) |
| 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<br>(DCFO) |
| 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<br>(DCFO) |
| 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           |

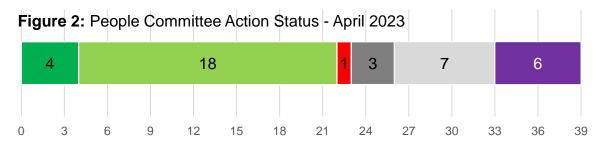
# 3. AREAS FOR IMPROVEMENT ACTION PLAN COMPLETION STATUS

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

Table 4:

| Reference          | Description  | Target<br>Completion | Status                     |
|--------------------|--|----------------------|----------------------------|
| HMI-3.1-<br>202208 | The service should monitor secondary contracts to make sure working hours are not exceeded.  | 31/01/2024           | In Progress –<br>On Track  |
| HMI-3.2-<br>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 –<br>On Track  |
| HMI-3.2-<br>202210 | The service should address the high number of staff in temporary promotion positions.  | 30/09/2023           | In Progress –<br>On Track  |
| HMI-3.3-<br>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 –<br>On Track  |
| HMI-3.3-<br>202212 | The service should improve staff understanding of the purpose and benefits of positive action.   | 30/09/2023           | In Progress –<br>On Track  |
| HMI-3.4-<br>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 –<br>On Track  |
| HMI-3.4-<br>202214 | The service should improve all staff understanding and application of the performance development review process.  | 30/04/2024           | In Progress –<br>Off Track |
| HMI-3.4-<br>202215 | The service should put in place an open and fair process to identify, develop and support high-potential staff and aspiring leaders.                                 | Review<br>30/06/2023 | 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.



**Number of Actions** 

- Completed
- In Progress On Track
- In Progress Off Track
- Not Started On Track

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<br>started<br>(on<br>track)                             | Not<br>started<br>(off track) | In progress (on track) | In progress (off track) | Completed       | Closed        | Paused/ No<br>Longer<br>Required |  |  |
| 10 *<br>(↓ from<br>13)                                      | 0<br>(→ at 0)                 | 18<br>(↓ from 23)      | 1<br>(† from 0)         | 4<br>(↑ from 3) | 0<br>(→ at 0) | 6<br>(† from 0)                  |  |  |

<sup>\*</sup> 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. IMPROVEMENT AREAS WHICH ARE 'OFF-TRACK'

4.1. Table 6 below outlines the improvement areas which are currently marked as 'In Progress – Off Track'.

### Table 6:

| Improvement Area   | Status                     |  |  |  |
|--|----------------------------|--|--|--|
| HMI-3.4-202214 – PDR Process (Area for Improvement)  | In Progress – Off<br>Track |  |  |  |
| Factors impacting delivery   |                            |  |  |  |
| 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) is also linked to this improvement area, which is therefore now also showing as off track. |                            |  |  |  |

# 5. PAUSED IMPROVEMENT AREAS

5.1. Table 7 below outlines one improvement area which has been paused during 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 will review the pausing of this action on 30/06/2023.

**GAVIN ELLIS Deputy Chief Fire Officer**