REPORT REFERENCE NO.	PC/24/8
MEETING	PEOPLE COMMITTEE
DATE OF MEETING	26 JULY 2024
SUBJECT OF REPORT	PERFORMANCE MONITORING REPORT 2024 – 2025: QUARTER 1
LEAD OFFICER	Assistant Director, Corporate Services
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 Jan to March 2024 (Quarter 4) 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.
	B. 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 3 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. 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 performance in quarter 4 as measured against the revised core competencies is shown in the table overleaf.
- 2.4. The competence percentages, as shown I the table overleaf, are all green apart from SHAC's. With some further investigation, it is clear the SHAC's Level 2 is what brings the overall SHAC's percentages into Amber at 83.7%. SHAC's Level 1 this quarter (April to June 2024) is 94.1%, and SHAC's Level 3 95.9%. The ongoing SRT review, if agreed, will have a positive impact on the SHAC's Level 2 percentages.

2.5. In addition, the Academy is about to separate the old working at height qualification standards from the existing percentage figures and fully migrate the new training SHAC's standard. This will contribute to more accurate reporting and provide much easier access to competence standards for managers to manage performance.

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.	96.3 % 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.	97.7% 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. 	96.2% Green	Within tolerance for each location. No remedial action required
Working at Height and Confined Spaces (SHACS) Inc.: Level 1, 2, 3	< 90% + Risk based impact identified	 90% provides tolerance for course failures, personnel returning from long-term absence and non-attendance. SHACS competency is 92% across the 3 Levels. This does not impact service delivery and therefore does not require intervention. 	91.9 % Amber	Within tolerance for each location. SHACS level 2 has the lowest competence. Monitoring attendance of planned training courses will continue.

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. 	97.2% 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. 	97.5% Green	Within tolerance for each location. No remedial action required.
Response Driving 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.	98.5% Green	Within tolerance for each location. No remedial action required.

Fitness testing:

	As of 11 th July 2024,	Percentage as of 11 th July 2024	As of 16 th January 2024,	Percentage as of 16 th January 2024
Number requiring test (in scope)	1504	100%	1520	100%
Number passed	1448	96%	1511	99.4%
Red	15*	1%	9*	0.6%

Fitness details:

2.6. The actual failures for this quarter are 15 which represents 1% of those tested.

- 2.7. There are 31 other staff members currently out of date, but these individuals will be tested this month (July 2024) with their station annual test, as this is the most effective way of ensuring all 31 are tested. They may have only recently gone out of date due to several factors, for example sickness, transfers etc.
- 2.8. There are also 8 staff members who are long term absent, for example secondments.
- 2.9. Off the run for fitness by group is:
 - Barnstaple 1
 - Yeovil- 2
 - Exeter 5
 - Taunton 4
 - Plymouth 1
 - Torquay 2
- 2.10. 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.
- 2.11. 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.

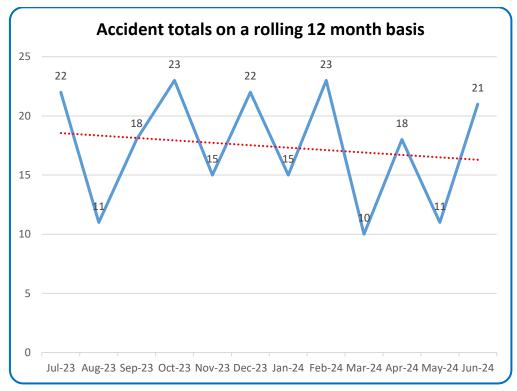
Health & Safety:

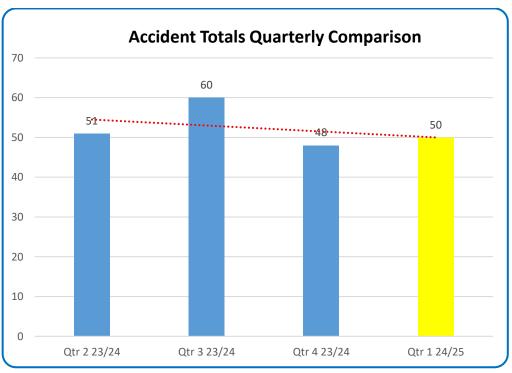
General:

- 2.12. Following a Reporting of Incidents, Diseases and Dangerous Occurrences Regulations (RIDDOR) reportable accident at the Academy BA facilities, the Health and Safety Executive (HSE) visited the site. The HSE reviewed the facility, internal accident investigation report and spoke with relevant staff. The HSE inspector praised the Services internal investigation and swift action following the incident. However, a 'Notice of Contravention' letter has been issued to the Service which requires action and response by 19 July 2024. A material breach of legislation was identified. The risk assessment was deemed not to be suitable and sufficient.
- 2.13. The Service took immediate action following the accident and is progressing the recommendations from the investigation and HSE letter.
- 2.14. The H&S Team have recruited 1FTE and 0.6FTE H&S Officers and 1 casual contract Senior Accident Investigator. All have taken post.

Accidents:

2.15. The overall trend for the rolling 12-month reporting period continues to show a positive position with a continued downward trend in accidents. The quarter 1 accident numbers are up by 2 on the previous quarter and down 30 for the same quarter in 2023. During Q1 there was 1 level 3 safety event. This related to the RIDDOR reportable incident at the Academy BA facility where a firefighter had a heat induced injury.

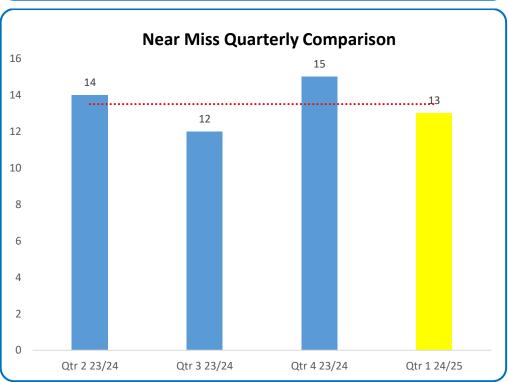




Near Miss:

2.16. There were 13 near miss reports in quarter 1 of 2024, this is down 2 on the previous quarter. This is a 13% (2 events) reduction in near miss 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.

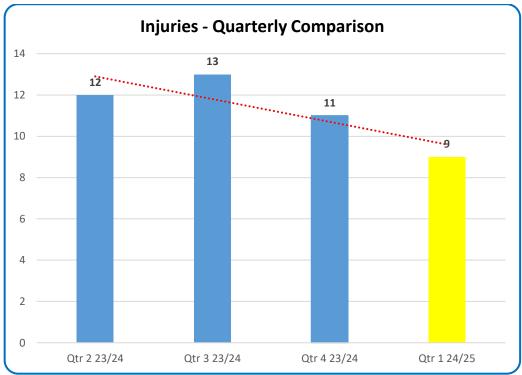




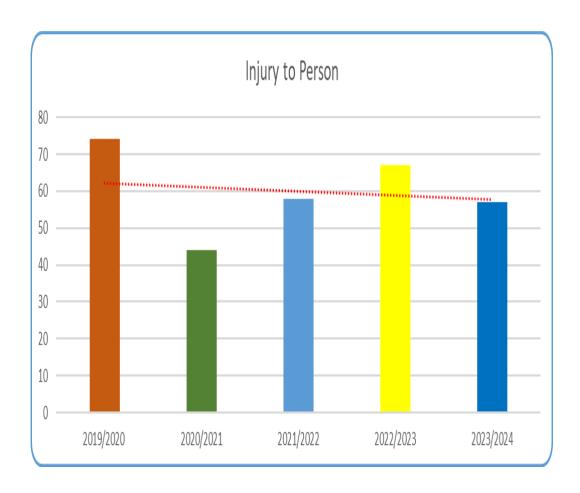
Personal Injuries:

2.17. During quarter 1, there were 9 injuries, a 18% (2 injuries) reduction on the previous quarter. The injury figures in general remain low, the trendline showing a continued reduction over the 12-month period.



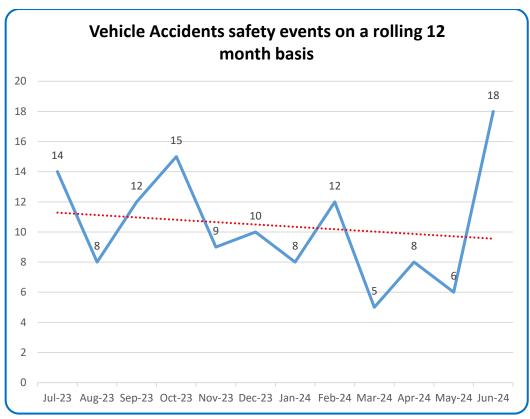


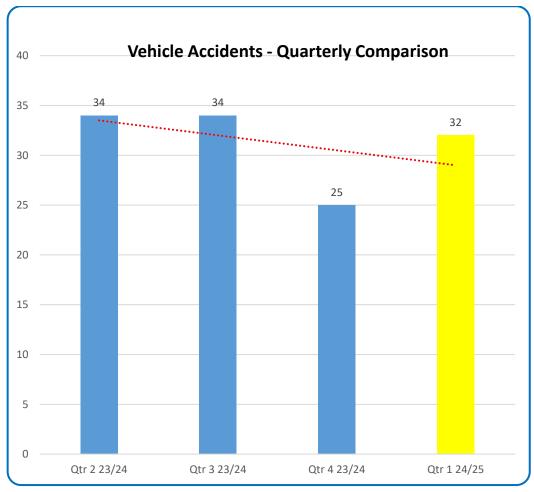
2.18. The annual trend over the last 5 financial years (2019/20 – 2023/24) indicates a slight reduction in injury related safety events.

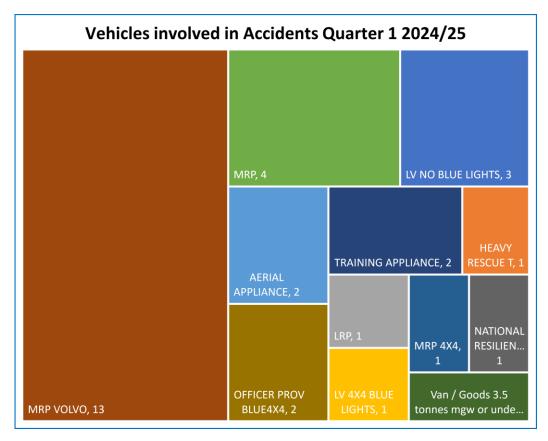


Vehicle Incidents:

- 2.19. There were 32 vehicle incidents in the quarter 1 reporting period, this is an increase of 7 (28%) on the previous quarter. There were 7,136 mobilisations in quarter 1 of this 0.4% resulted in a vehicle related safety event. This is a slight increase on the previous quarter (0.35%). 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. It is notable in the Vehicles Involved chart that MRP's are more frequently involved in accidents. Our larger appliance impacted by the topography of our region.
- 2.20. 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.

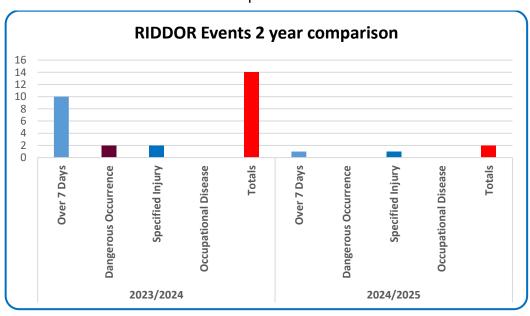


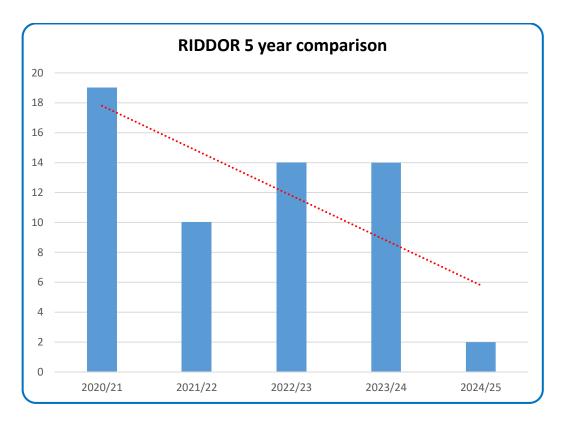




Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR):

- 2.21. There have been 2 reported RIDDOR incidents during this reporting period (Quarter 1), an 'Over 7-day injury' and 'Specified Injury'. The specified injury report fell under the criteria of an injury arising from working in an enclosed space which leads to heat-induced illness.
- 2.22. 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. Also included are the 5-year RIDDOR totals highlighting the continued reduction in RIDDOR reportable events.





National FRS H&S Comparisons:

- 2.23. Benchmarking of accident data has been discussed at the NFCC H&S Committee. There is a desire that the sector reviews their accident data against other FRS's. However, it has been identified that we all report differently and use various software packages to record our accidents. At present outside of the information gathered for the Home Office fire statistics there is no formal national comparison of H&S data. Fire statistics tables can be viewed via:
 - https://www.gov.uk/government/statistical-data-sets/fire-statistics-data-tables

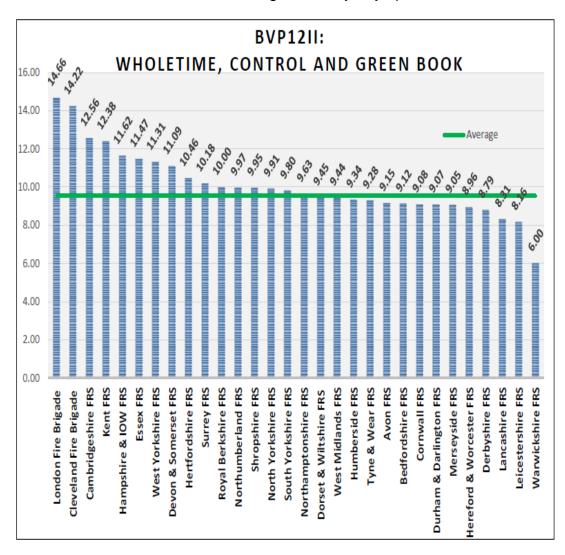
2.24. Tables related to H&S are:

- FIRE0508: Injuries sustained by firefighters and firefighter fatalities, by fire and rescue authority.
- FIRE0509: Firefighter fatalities whilst on duty, England.
- FIRE0510: Attacks on firefighters during operational incidents.
- FIRE1402: Accidents occurring to fire and rescue authority vehicles, by fire and rescue authority.
- 2.25. The data is of limited use as it is focused on operational activity and does not offer the full depth and detail to fully benchmark and compare accident data.

Sickness and Absence:

National FRS sickness data

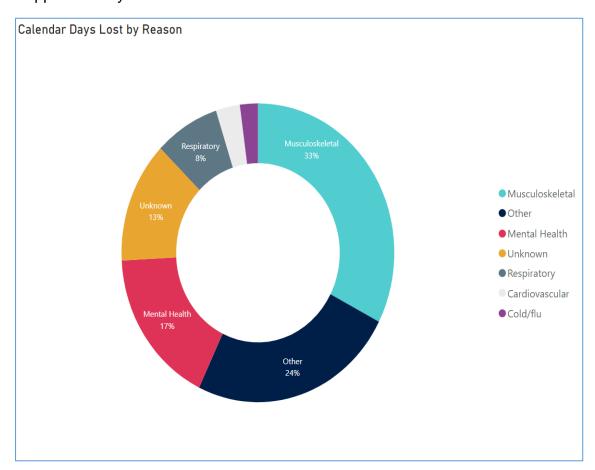
- 2.26. The Cleveland report for 2023-24 has now been published and indicates that at a national level, there have been the following increases in overall sickness absence levels for different staff groups:
 - 10% increase for on call
 - 13% increase for wholetime
 - 24% increase for support / green book
- 2.27. When grouped together, the average number of duty days lost per staff member comes to 9.54 for the reporting period. Devon and Somerset are listed 8th with an average of 11.09 duty days lost per staff member and Warwickshire have the lowest average at 6 duty days per staff member:



2.28. The Cleveland report also shows that mental health and musculoskeletal related absences account for the highest proportion of sickness absence at a national level, but the proportion differs significantly by staff grouping; on the operational side, 45% of on call sickness absence and 33% of wholetime sickness absence was attributed to musculoskeletal reasons, whereas for control and green book colleagues, 35% of sickness absence was attributable to mental health related categories including stress, anxiety and depression.

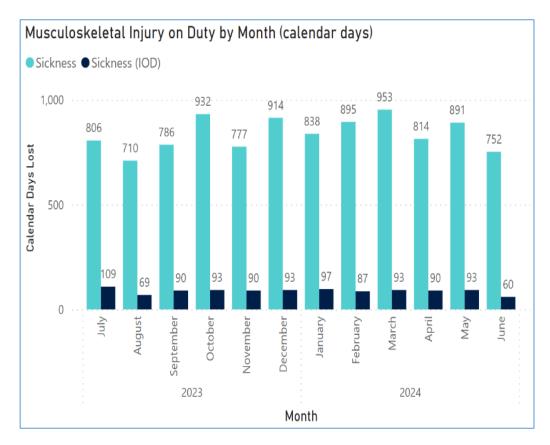
Proportion of calendar days during Q1 by sickness type:

2.29. In terms of sickness types, 'musculoskeletal' continue to account for approximately one third of all absences.



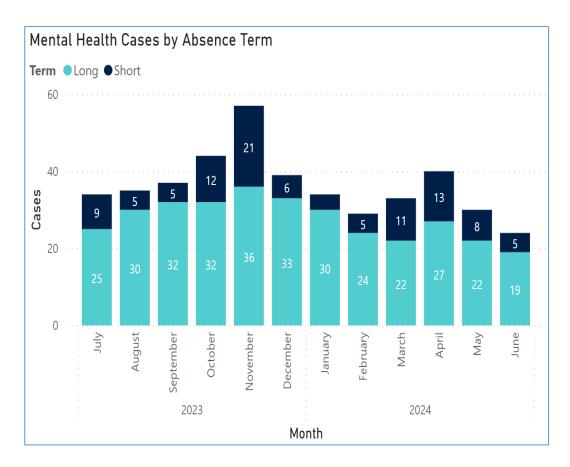
Sickness Type:	% of days lost in Q4	% of days lost in Q1
Musculoskeletal	31.5%	33%
'Other', including gastrointestinal, gynaecological, neurological and cancers	29.2%	24%
Mental Health	19.5%	17%

2.30. When reviewing the data for musculoskeletal injuries, we can see that a significant majority of injuries are not due to service-related work.

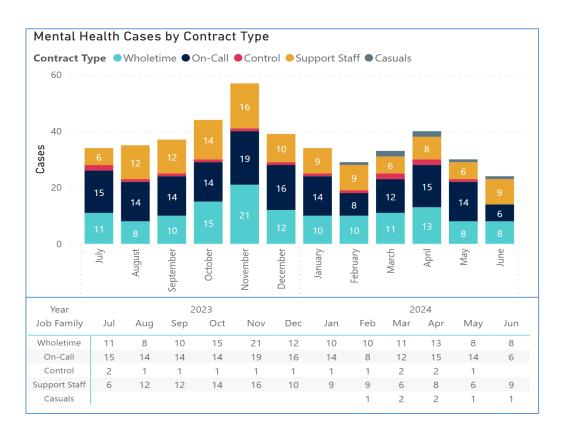


Mental Health:

- 2.31. The graph below shows that mental health account for significant proportion of long-term absences.
- 2.32. The number of open cases is now at the lowest that they have been for the entire year. We have seen a spike in short term mental health cases at the end of Q4, however this is being monitored closely and all efforts and support is being offered to aid a return to work as soon as appropriate. What is positive to see is that the spike of short-term cases in November and April have been managed effectively and not resulted in a wholesale increase of long-term absences.



2.33. Looking at the mental health cases by staff groups, you can see that we have seen a decrease in on call and wholetime mental health absence, but a greater number of support staff, which are a proportionately smaller staff group.



Health and Wellbeing Support:

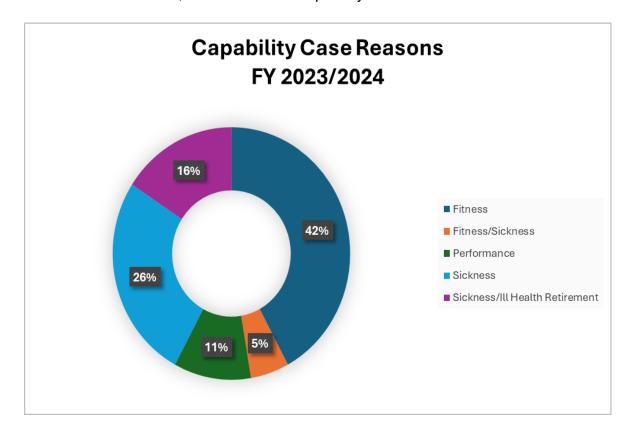
- 2.34. Unfortunately, we continue to experience significant challenges with our Occupational Health provider, who became our OH provider in Nov 22. Despite regular review meetings and bi-weekly contract management meetings we are not seeing an improvement in their service. We are working closely with Procurement to address this, as well as exploring internal options for some of the services.
- 2.35. The Service has seen 44 physiotherapy referrals this quarter (Jan-March 48). However, our physiotherapy provider has noticed a slight increase in individuals with injuries relating to poor manual handling practices e.g. lifting. They have asked for information on our manual handling training, to see if additional improvements can be made, or additional guidance issued.
- 2.36. Wellbeing Champions service was launched in April (Stress awareness month). The Wellbeing Champions offer short-term peer support. They can explore with you what you need and help you to put it into action, whether this is reaching out for counselling, physio, help to construct a difficult conversation with a line manager, use the Speak Up Guardians or raise a grievance. We are looking to increase this service by recruiting more Wellbeing Champions in September.
- 2.37. April 2024 (Stress awareness month) also provided opportunities to remind all colleagues about the tools we have available, such as wellness plans for prevention and personal stress assessment tools if going through a period of stress.
- 2.38. The Domestic Abuse procedure and support plan document has now been completed.
- 2.39. Several colleagues have undertaken mediation training and have been able to use this to undertake facilitated conversations to improve working relationships. All mediation would have been outsourced in the past.
- 2.40. We have been creating a learning profile support document to provide support with neurodiversity and wellbeing needs, particularly in the first 2 years, when operational colleagues undertake several training courses, with different trainers and providers. This enables the trainers to differentiate their training material, and styles, to the needs of colleagues, maximising understanding and improving outcomes.
- 2.41. The collaboration with the Firefighters Charity continues to increase. We have run several wellbeing workshops available to all staff on the following subjects, mental health and exercise; developing resilience and what's strong with you?
- 2.42. Looking at preventing trauma, we have been working with the Firefighters Charity to deliver TIPT (trauma intervention prevention techniques) training. A trial is planned with Camels Head station in the first instance.

2.43. The Service has created and distributed a new video and trauma informed guidance document to support operational crews responding to incidents involving a mental health crisis

Capability, Disciplinary & Grievance case summary (last 12 month period):

Capability Cases

- 2.44. Across the Service between 1st April 2023 and 30th March 2024, there have been 19 formal capability cases. Comparatively with the previous financial year, there were 7 formal capability cases. The Service has placed a greater focus on progressing capability cases, particularly in relation to fitness cases, which is likely to be one of the key factors for an increase in formal fitness capability cases in the FY 2023/2024. In Quarter 1 of FY 2024/2025, there have been 3 formal capability cases up to 30th June 2024 across fitness, sickness and sickness/ill-health retirement.
- 2.45. In FY 2023/2024, the reasons for capability cases were:

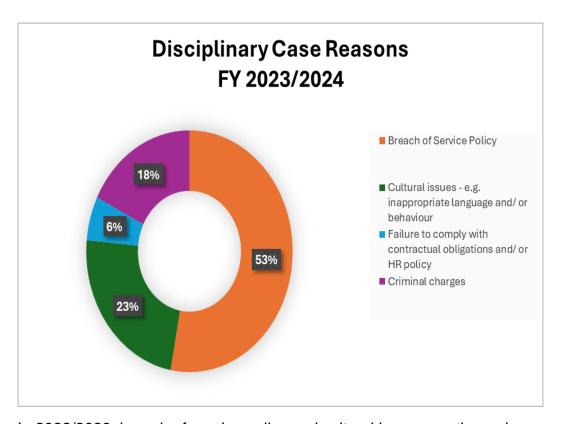


2.46. In 2022/2023, fitness and sickness are the main reasons of capability cases and both show an increase in the following 12 month period. They remain the main reasons of capability cases in FY 2023/2024. In FY 2023/2024, there has also been an increase in sickness/ill health retirement cases.

Capability Case Reason	Number of Cases FY 2022/2023	Number of Cases FY 2023/2024	Number of Cases FY 2024/2025 (Q1)
Disability	1	0	0
Fitness	2	8	1
Fitness/Sickness	1	1	0
Performance	1	2	0
Sickness	2	5	1
Sickness/III Health	0		1
Retirement		3	
Total Number of	7		3
Capability Cases		19	

Disciplinary Cases

- 2.47. In 2023/2024, there were 17 disciplinary cases across the Service. Of the 17 cases, 7 cases progressed to a formal disciplinary hearing. 10 cases did not progress to a disciplinary hearing due to no case to answer, the investigation has not yet concluded or an informal sanction was given.
- 2.48. Of the 7 cases that progressed to a disciplinary hearing, there were 4 cases of breach of Service policy, 2 cases of criminal charges and 1 case of cultural issues e.g. inappropriate language and/or behaviour.
- 2.49. Of the total disciplinary cases in 2023/2024, there were 4 cases of Gross Misconduct, 2 cases of Misconduct and 1 case to be confirmed, currently under investigation.
- 2.50. By comparison in FY 2022/2023, there were 24 disciplinary cases across the Service and 8 of these cases proceeded to a disciplinary hearing. There were 9 cases where the investigation concluded there was no case to answer/note for file, 7 cases where the employee resigned/retired before the disciplinary investigation concluded and 1 case pending an external investigation.
- 2.51. Of the 17 disciplinary cases in FY 2023/2024, the reasons for the disciplinaries are as shown in the chart overleaf:



2.52. In 2022/2023, breach of service policy and cultural issues are the main reasons for disciplinary cases. Breach of service policy remains the main reason for cases in FY 2023/2024 with a small increase by 1 case compared to the previous financial year. By contrast, there has been a decrease in cultural issues cases from 8 cases in 2022/2023 to 4 cases in FY2023/2024. *includes all disciplinary cases – cases progressed to a disciplinary hearing and also cases which did not progress to a hearing.

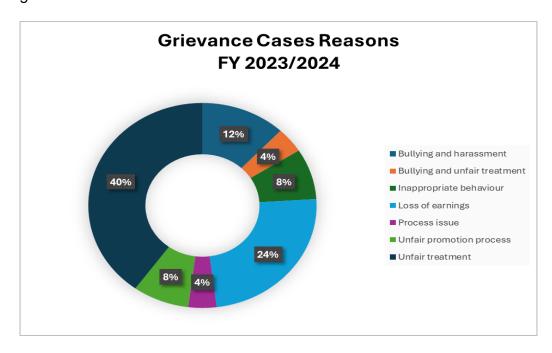
Disciplinary Case Reason	Number of Cases FY 2022/23	Number of Cases FY 2023/24	Number of Cases FY 2024/25 (Q1)
Breach of Service Policy	8	9	2
Cultural issues - e.g. inappropriate language and/ or behaviour	8	4	2
Failure to comply with contractual obligations and/ or HR policy	1	1	0
Fraud	5	0	0
Unauthorised use of and/ or damage to Service assets	2	0	0
Criminal charges	0	3	1
*Total Number of Disciplinary Cases	24	17	5

- 2.53. There were 5 fraud cases in FY 2022/2023 which were low level fraudulent pay claims/data input.
- 2.54. The table below shows the number off disciplinary case outcomes over the last two financial years and for Quarter 1 of the current financial year:

Disciplinary Case Outcome	Number of Cases FY 2022/2023	Number of Cases FY 2023/2024	Number of Cases FY 2024/2025 (Q1)
Unknown – under investigation	1	4	5
Note for File	2	0	0
No Case to Answer	7	5	0
First Written Warning	5	1	0
Final Written Warning	1	4	0
Dismissal	1	1	0
Other	0	2	0
Resigned/retired during process	7	0	0

Grievance Cases

- 2.55. Between 1st April 2023 and 30th March 2024, there were 25 grievance cases raised across the Service. Of the 25 grievance cases, 4 cases were resolved informally and 1 case by settlement agreement.
- 2.56. In 2022/2023, there were 16 grievance cases raised, of which there were no cases resolved informally and 1 case was partially resolved informally.
- 2.57. Of the 25 grievance cases in FY2023/2024, the reasons for these grievances were as shown in the chart overleaf:



2.58. Unfair treatment is the main reason for grievance cases in FY 2022/2023 and FY 2023/2024. In FY 2023/2024, bullying and harassment, inappropriate behaviour and loss of earnings had the biggest increase in cases but also a decrease in unfair investigation and process issue cases. Discrimination and racial harassment cases remains low over both financial years.

Grievance Case Reason	Number of Cases FY 2022/2023	Number of Cases FY 2023/2024	Number of Cases FY 2024/2025 (Q1)
Bullying and harassment	0	3	0
Bullying and unfair treatment	1	1	0
Discrimination	1	0	0
Inappropriate behaviour	0	2	0
Loss of earnings	0	6	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	2	0
Unfair treatment	6	10	4
Total Number of Grievance Cases	16	25*	4

^{*}includes 4 cases resolved informally and 1 case resolved by settlement agreement.

2.59. In FY 2023/2024, there have been more cases resolved through informal resolution actions and mediation than the previous financial year. This increase could be attributed the Service's focus on early intervention to resolve grievances issues informally where possible. There has also been a slight increase in cases not upheld but less partially upheld in FY 2023/2024. There are several cases currently either under investigation or attempts being made to resolve informally.

Grievance Case Outcome	Number of Cases FY 2022/2023	Number of Cases FY 2023/2024	Number of Cases FY 2024/2025 (Q1)
Not upheld	4	5	0
Partially upheld	8	4	0
Upheld	2	2	0
Withdrawn	1	0	0
Other*	1	7	0
Unknown – under investigation	0	7	4

^{*}includes cases resolved by informal resolution, mediation and settlement agreement

3. <u>PERFORMANCE MONITORING – STRATEGIC POLICY OBJECTIVE</u> 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 2025.

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

- 3.2. The Service launched its new Leadership development process to ensure opportunities are available for all, regardless of terms and conditions colleagues are employed under. The new process has a modular approach, tailored to the nature of the role (Operational/Control/Green book). We launched in April with Leading Others. Aimed at supervisory management level. Since the launch in April, we have seen just under 70 colleagues from all over the service attend the Leading Others Skill Build session. Passing/completing all relevant modules allows access to the development pool, with a structured development plan. Leading the Function aimed at middle managers is currently being developed, for launch in the autumn/winter 24.
- 3.3. 8 Have-a-go days have now been planned across the service for On-Call recruitment. 2 (Yeovil and Middlemoor) are dedicated positive action events for underrepresented groups.
- 3.4. All Interview questions have been reviewed to provide a greater focus on ethics and values, allowing greater reassurance that new appointments, and promotional processes result in the successful applicants sharing the values and ethics of the Service.

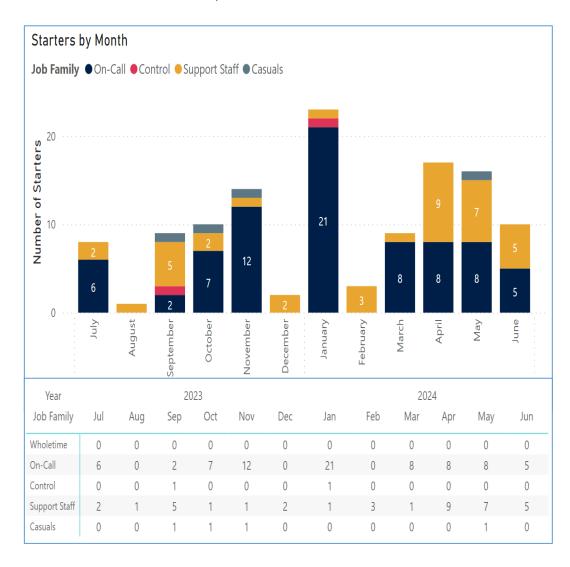
Update on Strategic Workforce Planning:

Turnover and attrition

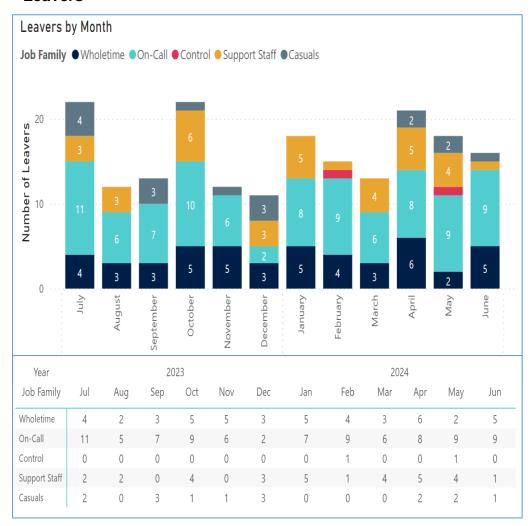
3.5. The attrition rate is reached by averaging the staff population across the start and end of a 12-month period and then dividing the number of leavers within the period by this average. The attrition rates for Q1 are below.

Staff Group	April	May	June	
Wholetime	8.5%	8.1%	8.5%	
On-Call	11.7%	11.2%	11.4%	
Support	11%	10.1%	9.2%	

- 3.6. Since the last People Committee, we have seen the attrition rates for oncall and wholetime colleagues continue to remain stable, whereas the attrition rate for support staff rate has continued to reduce each month.
- 3.7 The Service 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 any concerns. An overview of starters and leavers month, on month are below.



Leavers



People Services Systems Project

- 3.8 The build of the performance review module in iTrent is now underway, with testing planned over the next few weeks ahead of a launch planned for September.
- 3.9 Colleagues in the project team have been working hard to refine the reporting capabilities of centralised iTrent data and using PowerBI to create suitable 'dashboards' of management information. This work has started to create 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 HMI, the Home Office and the Office for National Statistics.

4. 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

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

MARIA PHILLIPS

Assistant Director of Corporate Services

APPENDIX A TO REPORT PC/24/8

SUMMARY OF PERFORMANCE AGAINST INDICATORS

Quarterly Reporting:

Target area:	Agreed performance measure:	Q2 (2023- 24)	Q3 (2023- 24)	Q4 (2023- 24)	Q1 (2024 - 25)	Trend
Firefighter Competence	90% (as of October 2022)	0 of 7 core compete ncies below 90%	0 of 7 core compete ncies below 90%	0 of 7 core compet encies below 90%	0 of 7 core compet encies below 90%	
Accidents	Decrease	51	60	48	50	1
Near Miss-	Monitor	14	12	15	13	
Personal injuries	Decrease	12	13	11	9	Ĭ
Vehicle Accidents	Decrease	34	34	25	32	1
Short term (average days per person, per month)	Decrease	2.1	2.0	-	0.83	*please see below
Long term (average days per person, per month)	Decrease	6.0	6.7	-	2.38	*please see below
Stress related absence (average number of cases per month)	Decrease	36	48	32	31	1

^{(*} Please note that due to the change is sickness reporting systems and processes we have needed to change how we capture this specific item. Historically the quarterly averages for long-term and short-term sickness absence were based of the 12-month rolling average for each month in that quarter. We do not currently have a full 12 months of directly comparable data but we can refer to the quarterly returns that align to the Cleveland reporting process. This will mean that the reporting is more consistent and also comparable to national datasets going forward.)

APPENDIX B TO REPORT PC/24/8

People Committee Performance Reporting Forward Plan

Meeting scheduled	Reporting on	Subjects
April 2024	Quarter 4	Performance Monitoring report including financial year data: • RIDDOR reporting, • Workforce planning • Annual Diversity data report
July 2024	Quarter 1	Performance Monitoring report including financial year data: • National FRS Sickness comparisons • National FRS H&S comparisons, • Grievance, Capability & Disciplinary
October 2024	Quarter 2	Performance Monitoring report including 6 - monthly data: • Workforce planning • People survey action plan update
January 2025	Quarter 3	Performance Monitoring report including Calendar Year data: • Fitness testing, • Grievance, Capability & Disciplinary