

# Performance report - Quarter 1

Finance & Audit Committee

1 April - 30 June 2024



**Priority: Making every penny count**

## **KLOE (Key Lines of Enquiry) 6: How well do we use resources to manage risk?**

### **KLOE 6 Summary**

The Service's performance, risk and business continuity arrangements continue to be in a positive position. These arrangements have continued to be assured by the South West Audit Partnership, through internal audit practice.

Procurement arrangements continue to be in a positive position, with a key focus and approach to collaborative procurements, in line with our approach to value for money. A strategic review of Procurement is underway to ensure the Service is in the best possible position to deliver the legislative changes in the new Procurement Act, which will take effect from 28 October 2024.

This quarter the Service maintained its accreditation to the International Standards Organisation's ISO55001 in Asset Management, following an audit in May 2024 by the British Standards Institute. Maintaining this accreditation helps continues to provide good assurance of our asset management.

The fleet programme has begun well and includes four fire appliances, a Unimog and six flexi duty officer response cars. The fleet team continue to keep a close awareness of the challenges with the supply chains and delays, to support this programme.

The solar panel installation, across the first five sites, was completed in quarter 4 2023/24 and in this quarter, these were activated. The sites will now be monitored to review and analyse the impacts upon energy usage and consumption as well understand the pay-back period and carbon reduction. This information will then inform future decisions for any further solar panels.

Information and Communications Technology capital and revenue programmes remain broadly on track and there are no strategic issues to raise with Members. As previously highlighted, there are some amendments to the programming of activities in response to supply issues and the increased inflationary pressures and changes to supplier offerings (for example cloud only). Despite this, the Service continues to invest in key initiatives for improved technical sustainability and value for money to support frontline services with affordable modern technology. The revised data, digital and technology strategy aligns this work across the Service and the delivery of this will be monitored through the data, digital and technology board.

### **KLOE 6 sub-diagnostic**

**To what extent are business continuity arrangements in place and how often are they tested?**

To help the Service better understand the current and future risks, it undertakes regular horizon scanning, including gap analysis with the Business Continuity Institute Horizon Scan, is a key member of Local Resilience Forums, it also has robust risk management arrangements, and it undertakes a biennial Strategic Assessment of Risk. The Service's corporate risk management arrangements are regularly audited to ensure that they remain appropriate and comprehensive. Our internal auditors awarded the Service with 'substantial' assurance during the most recent audit in January 2024 with no supplementary actions.

Our risk management arrangements are linked into our business continuity arrangements and provide clarity on the areas of focus. Having a strong link between our risk management arrangements and business continuity management ensures that planning and preparations are suitable and sufficient. This then assures the continuation of our critical activities and the maintenance of service delivery through business continuity incidents. During quarter 1 of 2024/25 we dealt with six business continuity incidents which ranged from software outages to severe weather planning and response. We have also had a total of twelve recorded exercises. These include multi-agency water rescue in Christchurch Harbour and a partnership exercise with HMP Guys Marsh to test our joint working plans. All incidents and exercises are debriefed, and any learning identified, with associated actions followed, to ensure delivery of effective business continuity arrangements.

The Service's business continuity arrangements are aligned to the Business Continuity Institute's (BCI) Good Practice Guidance (2018), providing assurance that our arrangements are effective and strong. During the audits of 2023-24 business continuity arrangements received 'substantial' assurance which continued the 'substantial assurance' received in 2018. The Service has also had these arrangements viewed by His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS). This has been through both full inspections and also through the thematic 'response to covid' inspection. No issues were raised by HMICFRS in any of the reports relating to our business continuity. Our significant event, risk management arrangements, and business continuity processes remain well embedded, assured, and aligned, ensuring the Service continues to meet the requirements of the Civil Contingencies Act 2004.

**To what extent do we show sound financial management of non-pay costs, including estates, fleet and equipment through benchmarking, contract renegotiation and procurement?**

Procurement procedural and managerial arrangements continue to be in a positive position, with a continued focus and approach to collaborative procurements to support our approach to value for money. The Service continues to make good use of national procurement contracts, which includes actively promoting and partaking in collaborative/joint procurements. The Service is currently participating in collaborative procurements for:

- A command-and-control system with the Networked Fire Services Partnership, led by the Hampshire County Council procurement team.
- A Wide Area Network (WAN) with the Networked Fire Services Partnership, led by Kent Fire and Rescue Service procurement team. This is in the early stages of the procurement – the engagement stage.
- We will be collaborating again with BlueLight Commercials on the procurement for the VM Ware Contract. The procurement will commence in September 2024.

The Procurement Manager will be representing the Service as a member of the commercial group for the procurement of a New National Framework for personal protective equipment (PPE), working with Kent Fire and Rescue Service (national lead for the procurement) and other commercial leads for this procurement.

The BlueLight e-Tendering Hub went live on 1 April 2024. We have extended our contract for the old system and have now completed all our procurements. We have until the end of March 2025 to complete the process of archiving the completed procurements and downloading these for retention.

When procuring goods, services and works, the Service continues to follow the national and local level regulations, including adhering to the Public Procurement Regulations 2015. As part of this, the Service is required to ensure that the principles of transparency and fairness are applied throughout all stages of the procurement processes. Our approach is published on the Service's website.

The Procurement Act (new legislation) will go live on the 28 October 2024. There will be a transition period during which the existing regulations and New Act 2023 will apply. The procurement professionals including the managers who undertake significant levels of procurement will be undertaking training. These managers have already completed the specialist procurement e-learning modules and some practical training. Procurement policies and procedures are being reviewed and new

processes will be introduced as well as training/education. Further guidance has been published on our website for our suppliers, this includes access to the BlueLight Commercials site. The Procurement Manager is also engaging with the dedicated Communities of Practice set up by the Cabinet Office.

### **KLOE 6 sub-diagnostic**

**To what extent do we understand what assets we are responsible for across the Service and how do we demonstrate effective management of these assets?**

The Service continues to keep abreast of the economic situation regarding parts, materials, and labour costs increasing significantly, along with global supply chain disruptions and challenges. This focus enables appropriate decisions to be made regarding ordering timeframes and stock levels.

We have maintained our accreditation to the ISO 55001 Asset Management Standard, following an external audit in the last quarter. Maintaining this accreditation ensures that the organisation adheres to nationally recognised standards for asset management. The next audit will take place in November 2024. The British Standards Institution (BSI) external auditors are required to visit and audit the Service every six months to ensure our standards continue to meet the accreditation requirements.

The Service's Asset Management System is well embedded within the Service and is audited as part of the ISO 55001 accreditation. However, the Service continues to work with the supplier and other fire and rescue services, to develop and improve the efficiencies of the system. The system provides numerous benefits to our asset management arrangements, including increased accuracy in tracking and managing our assets. It also provides real-time data, which helps in making informed decisions and improving operational efficiency.

Work continues to progress with the Service's Estate Rationalisation Programme, with the feasibility work well underway, looking at the first three locations, which is phase one of this work. Further sites have been identified for future review as part of the next two phases of work. This work is focusing on reducing the estate and maximising the use of locations. Furthermore, the Estates teams are progressing with the two site training provision project, preparing documentation for procurement and building regulations, along with engaging with external agencies and planning officers, whilst the Service awaits a planning decision for the Weymouth site.

Our Fleet team are continuing to procure vehicles using procurement frameworks, which ensure the best value and constantly assessing products and prices across the markets for best value. The Fleet Programme for 2024/25 has begun well, this year the programme includes four fire appliances, a Unimog and six flexi duty officer response cars. The fleet team continue to keep a firm awareness of the challenges with the supply chains and delays, to support planning.

### **KLOE 6 sub-diagnostic**

#### **To what extent do we understand and manage our impact upon the environment?**

As Members are aware, the previous Consultant procured to support the development of a Heat Decarbonisation plan was unable to complete the work. The Service is now in the early stages of pre-engagement to begin the process to identify an alternative Consultant for this work. As part of this the Service will work with the Consultant to carry out site surveys at eight of our sites. This will include a comprehensive overview of the Services' current energy usage and emissions, as well as recommendations for how to reduce carbon emissions at those eight sites. The Service will use this to inform our decisions and help us evaluate potential investment opportunities.

The Service's Estates team continues to incorporate affordable quick-win environmental improvements in the reactive maintenance service and the cyclical refurbishment programmes. To enable the Service to monitor how these improvements are impacting energy usage, review the efficiency of sites and identify where savings can be made, the Service is undertaking pre-engagement activity to look at and trial systems to support this. By understanding this information and trends, the Service aims to target energy-saving measures. The data can also be used to help us set realistic energy reduction goals and track progress. Furthermore, these systems support the monitoring of changes made to the estate and help to provide expected payback timelines for work undertaken.

During this quarter, the Service visited our waste disposal contractor. This was to gain an understanding of how they operate and dispose of our waste as well as identify ideas of how our waste management provisions can be improved. Key takeaways from the visit include the importance of segregating waste at the source to improve recycling rates and reduce contamination. This information and learning is being used to engage and promote the importance with our Green Champions, to ensure waste is better managed across the Service.

The photovoltaics (solar panels) installed at Marlborough, Blandford, Sturminster Newton, Wareham, and Warminster were all activated from April 24. The Service is now monitoring the efficiency of the installations, this is providing us with the data to help

ensure maximum return on investment on future installations. Additionally, the Service is continuing to work with partner agencies, both at national and local levels, to learn from their experiences and to seek opportunities for joint working on environmental projects.

### **KLOE 6 sub-diagnostic**

#### **To what extent do our plans address the risks identified in the integrated risk management plan?**

The Service delivers a Strategic Assessment of Risk (SAR) on a two-yearly basis. It is a critical document in guiding decision making and planning, furthermore it is used as a foundation when developing the Service's strategic plan – our Community Safety Plan. The development of the SAR incorporates essential local, national, and global references, along with Group Level analysis that align to our operational groups. This information, combined with our risk and demand data, and an organisational review, ensures the delivery of a comprehensive and robust document. Whilst a SAR is used in the development of the strategic plan, a second SAR is undertaken at the mid-way point of the plan. This ensures it continues to remain relevant and/or highlights new areas of focus or priority. The process to develop the midway SAR will begin in quarter 2, with the Group and Strategic analysis starting to be researched.

The Authority approved the new Community Safety Plan (2024-2028) at their meeting in June, its delivery will be monitored and reviewed through our well established and assured performance management arrangements. The Service remains committed to maintaining alignment with the Fire Standards Board's Community Risk Management Plan standard, in the development and execution of the Community Safety Plan, as well as within the requirements of the HMICFRS methodology.

### **KLOE 6 sub-diagnostic**

#### **To what extent do we demonstrate effective management of Information and Communication technology?**

The Service is continuing to develop its ICT infrastructure, with an increased focus on a joint working across both internal departments and our partners. This ensures the Service utilises its information, data and technology efficiently to support operational activity with clear governance and security arrangements. Following approval of the Community Safety Plan in June, the Service has a revised Digital Data & Technology Strategy in place. This is cross department, bringing together work across the Service linked to the management, governance and use of our data, our ICT infrastructure and hardware for our workplaces

and on the incident ground software improvement. The delivery of the strategy is monitored and prioritised at a strategic level to ensure projects meet business need. There is a focus for ICT on:

- Further improving our infrastructure, security and storage to support the development and use of new technologies on the frontline and changes in the way we are working.
- Investment in improved software and processes to strengthen our resilience, increase efficiency.
- Accessible information through apps and use of AI tools for increased business resilience.
- Ensuring hardware meets user needs, aligned to flexible and sustainable ways of working.

### **KLOE 7: How well are we securing an affordable way of managing the risk of fire and other risks now and in the future?**

#### **KLOE 7 Summary**

Financial management and governance remain strong, and the Service is consistently rated highly in audit and inspection processes. The Service remains concerned about the medium to longer-term financial sustainability of the Authority.

The Service continues to engage with all relevant stakeholders to influence the debate on financial sustainability for fire and rescue services and, in particular to maintain increased council tax flexibility. The Chief Fire Officer is influencing the national debate through his role as Chair of the National Fire Chiefs Council's Finance Committee. This includes detailed discussions with the new government and actively representing the sector and the Authority to ensure the new administration are clear on the challenges and need for greater certainty and financial support.

The Service managed to set a balanced budget for 2024-25 but is increasingly reliant on grant income over which there is no certainty or guarantee for future financial years, so will need to develop plans to reduce levels of spend to avoid a growing financial deficit over the medium-term. The latest Medium-Term Finance Plan deficit forecasts are £2m for 2025-26, rising to £3.1m for 2027-28 (Fire Authority Budget Setting paper, 8 February 2024).

**KLOE 7 sub-diagnostic**

**To what extent do we understand and take action to mitigate our main or significant financial risks?**

For some time now, the Service have been engaging with local Members of Parliament (MPs), the Home Office and National Fire Chiefs Council to influence the debate on financial sustainability for fire and rescue services and, in particular, lobby for council tax flexibility. This has included briefing sessions for local MPs and letters from the Chair and Chief Fire Officer to relevant government ministers. This approach continues in 2024-25 following the General Election.

The Service are awaiting the formal sign off of the financial statements for 2021-22 and 2022/23 by our previous auditors, Deloitte LLP. This is expected in quarter two of 2024-25. Preliminary and interim audit work with our new Auditors, Bishop Fleming, has been completed for 2023-24, and the main audit work commenced in August 2024.

South West Audit Partnership completed the scheduled medium-term financial plan internal audit for 2024-25 in quarter 1. Substantial assurance was given with no recommended actions.

**KLOE 7 sub-diagnostic**

**To what extent do we have a track record for achieving savings and avoiding any residual future budget gaps?**

Members approve the Service budget and Medium-Term Finance Plan annually each February. The 2024-25 settlement from Central Government did not provide further £5 council tax flexibility but did provide additional grant income which enabled a balanced budget to be presented and approved by Members for 2024-25. The future provision of grant income has not been confirmed beyond 2024-25 and the Service has needed to develop plans to reduce spending. These decisions are guided by the work of the Resourcing and Savings Programme which has a schedule of work which includes regular reviews of our financial assumptions and options for making further savings and efficiencies.

### **KLOE 7 sub-diagnostic**

#### **To what extent is our use of reserves sustainable and promoting new ways of working?**

The Service continually monitors its plans for reserves usage to ensure sufficient levels are maintained to support financial sustainability. The reserves plan and general balances risk assessment are approved annually by Members at the Authority each February for the approaching financial year. Levels of reserves and general balances are then reviewed and published as part of the annual Statements of Accounts process. The Finance & Audit Committee are updated quarterly on the current reserves position as part of the wider financial position update. The usage of reserves is subject to a stringent process aligned to key priorities and supporting strategic projects.

### **KLOE 12: How effective is the Occupational Health and Safety management system in the Service?**

#### **KLOE 12 Summary**

The Service continues to exhibit a strong health and safety performance. There are no strategic issues to raise with Members. The work-related absence due to physical injuries or ill health quarterly is down from 416 to 308 days over the same time last year. In this quarter, eight people are contributing to these figures. Of the eight people, five are designated long-term sick or in long-term recovery and their days lost are 93% of the total in quarter 1. The number of reportable incidents to the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 has increased from two to six over the same quarter last year.

#### **KLOE 12 sub-diagnostic**

#### **How well structured and embedded is the Health & Safety policy, practices and culture to ensure a safe and legally compliant Service?**

The Health and Safety Committee, and the associated department, continues to monitor the robust arrangements in place. Health and Safety arrangements continue to operate well, with no causes for concern to raise with Members. Our trend analysis within the report is based on the same time as last year to allow for seasonal influences.

- The work-related absence due to physical injuries or ill health quarterly trend is down from 416 down to 308 days compared to the same time last year. In this quarter, eight people are contributing to these figures. Of the eight people, five are designated long-term sick or in long-term recovery and their days lost are 93% of the total in quarter one.
- Manual handling is one of the highest injury categories within the report, nearly a half (43%), of the days lost are due to this category.
- The number of reportable incidents to the Health and Safety Executive (HSE) under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) has increased over the same quarter last year from two to six. All occurrence reports have been fully investigated and actions taken where required.

The Service has good levels of compliance in relation to Health and Safety and this is upheld by the Service being accredited to ISO45001 Occupational Health and Safety Management system standard. The next audit by British Standards Institution auditors will be in November 2024.

### **KLOE 13: Are effective governance and decision-making arrangements in place?**

#### **KLOE 13 Summary**

The governance arrangements for the Authority and Service are well embedded and continue to work well. These arrangements have been assured through independent audit provisions, with good levels of assurance being awarded.

The Service aligned its governance, from performance through to assurance, to the Key Lines of Enquiry from HMICFRS, which has been in place since 2019 and continues to be a positive approach. Through this the Service uses the inspectorate's methodology as a baseline assessment to review arrangements and performance against their 'good' assessment.

Following the Authority providing approval for an application to be made to join the South West Audit Partnership (SWAP), an application was made. This was accepted by the SWAP Board in December 2023 and a full four-year internal audit strategy and the annual plan for 2024-25 was approved at the Finance & Audit Committee in March 2024. The first two audits have been completed during quarter one aligned to this plan.

The Service is proactively managing its information governance and information security compliance requirements. Strategic and tactical processes are aligned to the principles of British Standards Institute 27001. Cyber security arrangements are operating well and continually monitored. An assessment of the Cyber Assessment Framework led by the Home Office also demonstrates the Service is in a positive position for its cyber security arrangements. Annual Information and Communication Technology testing is conducted externally giving additional assurance of the robust arrangements in place. Due to the continued proactive work in this area, risks are reducing, and any remedial action is prioritised and regularly monitored. This includes work to ensure suppliers meet multi factor authentication requirements on third party systems so that we can progress our re-accreditation for Cyber Essentials.

Outside of our legal requirements, effective data management is at the forefront of business processes and system development. Investment in technology and improved data management processes across prevention, protection and response is enabling high quality, automated and evidence-based standards for data supporting improved decision-making and effective performance management.

### **KLOE 13 sub-diagnostic**

**How well does the Fire and Rescue Authority have oversight and scrutiny to ensure that the Service is appropriately effective and efficient in ensuring the safety of communities from fire and other risks?**

The Authority has five key priorities and performance against these are overseen and scrutinised by Members on a quarterly basis. Priorities one, two and three are reviewed at the four Local Performance & Scrutiny Committee meetings. These took place to consider quarter 4 and quarter 1 performance in August. Priorities four and five were reviewed at the Finance & Audit Committee at their meeting in July for quarter 4 performance.

The performance reports and presentations at these meetings provide details on the effectiveness and efficiency of the Service, as well as looking at how the Service is supporting, developing, and ensuring the health and wellbeing of its people. The annual report is approved by Members and published each year in September. This is further supported with a Statement of Assurance providing assurance of the previous year's governance, finance, and operational matters. The process of developing the Statement of Assurance received a 'substantial' assurance rating from internal audit and was commended by the Local Government Association peer review team led by the Chair of the Authority. The internal audit annual report from SWAP awarded the Service an overall grade of 'substantial assurance' following delivery of the 2021-22 audit programme.

The Authority oversees and scrutinises the development and delivery of the Community Safety Plan (CSP), which includes the Service undertaking consultation and community engagement. The CSP was reviewed following public consultation to take account of feedback and signed off in June 2024. A presentation of overall performance against each priority is provided to the Authority at six and 12-month intervals.

## KLOE 13 sub-diagnostic

### How effective and efficient are our governance arrangements?

The annual internal audit report, provided by our internal auditors SWAP, awarded the Service with an overall grade of 'substantial assurance' following the completion of the 2023-24 audit programme.

In December 2023, the Authority's application to join the SWAP was approved by their Board and at the Authority meeting in June 24 Councillor Small was appointed to the SWAP Members Board. The SWAP four-year audit strategy and annual plan for 2024-28, which was approved by Members in March 2024, this was collaboratively developed by: SWAP, the Service, and the Chair of the Finance & Audit Committee. During quarter 1 two audits were completed, aligned to the programme.

The Service continues to have comprehensive assurance arrangements in place, to ensure the maintenance of good performance levels across the Service. This includes internal audits, an external audit, British Standards Institution audits (for ISO45001 and ISO55001), HMICFRS inspections and peer reviews. These, in conjunction with our internal assurance mechanisms, contribute to the development of the annual Statement of Assurance.

The 2023/24 Statement of Assurance has been drafted during this quarter and is being prepared to be presented to Members at the Authority meeting in September.

The Authority and Service took deliberate steps in 2019 to ensure alignment with HMICFRS methodology, from policy development to operational implementation. This alignment is substantiated by our Key Lines of Enquiry, which adhere to the inspectorate's judgment criteria and their 'good' rating standards. To sustain this alignment, a review against the 'good' criteria is conducted annually, along with quarterly performance reports to provide ongoing evidence supporting the Service's position. This approach has undergone audit scrutiny by our internal auditors, who granted a 'substantial' assurance rating.

Performance management arrangements are well-established across the Service and up to Authority level, with clear reporting requirements and oversight. This robust system connects performance reporting from the CSP and the Authority's five priorities down to team and watch levels. These reports are gathered and presented through our performance management tool and comprehensive suite of station-level performance dashboards.

## KLOE 13 sub-diagnostic

### How effective and efficient are we at managing data?

Members can be assured that the Service is proactively managing its information and security compliance requirements. There are strategic and tactical processes that broadly align to the principles of British Standards Institute 27001 and are detailed in the supporting documentation associated with the Statement of Assurance, which will be reviewed by Members in September 2024. In this quarter there were:

- Thirty-three Freedom of Information requests received in this quarter - an increase of 19% from this quarter last year. Twenty-three were due for response in quarter 1, 100% of these were responded to within 20 working days. The average response time was eleven days.
- Seven subject access requests were received in quarter 1.
- Ten complaints were received this quarter, eight were due to be responded to. Of these, 100% were resolved within 14 days. 50% of complaints were not upheld.
- Pleasingly, there were 22 compliments this quarter.
- Fourteen security incidents were reported during the quarter. These related to data handling incidents and issues around access control. One security incident was reported to the Information Commissioner's Office (ICO). Each incident is investigated, risk assessed, and relevant learning is shared with the respective team/manager.

The Service continues to monitor progress against its Cyber Action Plan and is focused on work to ensure third party cloud services have multi-factor authentication in place. The Service has completed a gap analysis against the National Fire Chiefs Council's Cyber Assessment Framework at the request of the Home Office. Confirmation has been received that we meet all but one of the baseline requirements and this will be addressed through delivery of the Cyber Action Plan. The recent IT Health check identified only two high risks, and these relate to third party software systems, which we are in the process of addressing.

All staff are must complete Information Security/Data Protection e-learning to ensure they are aware of their responsibilities regarding data. The Service monitors the completion rate of this e-learning, and as of 31 March 2024, 97% of all employees had completed their mandatory data protection and cyber security training.

In addition to our legal compliance responsibilities, we are ensuring that data management is at the forefront of business processes and system development. Investment in technology and improved data management processes which join up prevention, protection and response is enabling high quality, automated and evidence-based standards for data supporting improved decision-making and effective performance management.

## **Priority: Supporting and developing our people**

### **KLOE 8: How well do we understand the wellbeing needs of our workforce and act to improve workforce wellbeing?**

#### **KLOE 8 Summary**

In quarter 1, long-term sickness was the largest contributing factor to the absence figures for all staff groups. Musculoskeletal was the highest causation of absence for both operational staff groups (WDS and On-Call) this quarter with mental health absence remaining the second highest causation. Mental health was the highest cause of absence for corporate staff followed by musculoskeletal absence. The highest absence causation for fire control staff was mental health, followed by respiratory absence.

The Service has a corporate target to achieve average sickness levels lower than the previous five-year average. The target (wholtime/corporate/fire control) for quarter 1 was 2 shifts lost per person, but this was narrowly exceeded with an actual figure of 2.1 shifts lost per person. Sickness absence continues to be professionally managed through our dedicated Health and Wellbeing team who work closely with line managers and Human Resources Business Partners.

Sickness procedures are robust and a range of support mechanisms such as counselling and physiotherapy are in place to support staff. Membership of our personal private healthcare scheme through salary deduction continues to increase month on month, averaging ten new members a month. The usage continues to demonstrate a demand for the different services it offers, reflective of the challenges faced through the NHS. The Service does still consider, through a cost benefit analysis, funding for private investigations if it is considered that NHS waiting times are delaying treatment and/or recovery. However, now a private healthcare scheme is available for staff, decisions consider whether the private health scheme arrangement includes this treatment and will therefore be based on exception.

In quarter 1, 93% of staff passed their fitness test and nine new fitness improvement plans were put in place for staff which includes the provision of advice and guidance on fitness improvement, including weight management and nutritional information. As a result, a total of 21 fitness improvement plans are now in place.

During quarter 1 a number of key health messages, such as Men's health, testicular cancer, stress awareness, allergies, loneliness, diabetes and weight management were published. The Service continues to promote and participate in free preventative Wellness Workshops provided by the Firefighters Charity. All of our health and wellbeing resources are publicised through our 'Safe To' programme.

### **KLOE 8 sub-diagnostic**

#### **How well do we understand the wellbeing needs of our workforce and act to improve workforce wellbeing?**

The Service has a robust and audited Health and Wellbeing Programme to support staff. A range of health and wellbeing procedures are in place which outline all the support mechanisms available to all staff including mental health support, peer support and other external self-service provisions.

Absence management continues to be a key focus with robust monitoring arrangements in place. Long-term absence was the largest contributing factor to the absence figures in quarter 1 for all staff groups. Musculoskeletal was the highest causation of absence for both operational staff groups (Wholetime and On-Call) this quarter with mental health absence remaining the second highest causation. Mental health was the highest cause of absence for corporate staff followed by musculoskeletal absence. The highest absence causation for fire control staff was mental health, followed by respiratory absence.

The Service has a corporate target to achieve average sickness levels lower than the previous five-year average. The target (wholetime/corporate/fire control) for quarter 1 was 2 shifts lost per person, but this was narrowly exceeded with an actual figure of 2.1 shifts lost person. The long-term trend analysis shows average sickness levels are increasing. Despite this trend sickness absence continues to be professionally managed through our dedicated Health and Wellbeing team who work closely with line managers and Human Resources Business Partners.

Sickness procedures are robust and a range of support mechanisms such as counselling and physiotherapy are in place to support staff. Membership of our personal private healthcare scheme through salary deduction continues to increase month on month, averaging ten new members a month. The usage continues to demonstrate a demand for the different services it offers,

reflective of the challenges faced through the NHS. The Service does consider, through a cost benefit analysis, funding for private investigations if it is considered that NHS waiting times are delaying treatment and/or recovery. However, now a private healthcare scheme is available for staff, decisions will consider whether the private health scheme arrangement includes this treatment and will therefore be based on exception.

In quarter 1, 93% of staff passed their fitness test and nine new fitness improvement plans were put in place for staff which includes the provision of advice and guidance on fitness improvement, including weight management and nutritional information. As a result, a total of 21 fitness improvement plans are now in place.

Management of long-term absence is more complex than short-term absence as the illnesses/conditions may be serious and involve surgery and recovery time. With any long-term absence, staff are referred to occupational health from day 28 of the absence for advice and recommendations.

During quarter 1 a number of key health messages, such as Men's health, testicular cancer, stress awareness, allergies, loneliness, diabetes and weight management were published. The Service continues to promote and participate in free preventative Wellness Workshops provided by the Firefighters Charity. All of our health and wellbeing resources are publicised through our 'Safe To' programme.

**KLOE 9: How well trained and skilled are staff?**

| <b>KLOE 9 Summary</b>   |
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| <p>The Service continues to conduct training delivery in accordance with the Annual Training Action Plan and on-call quarterly training programme. Our training delivery is supported by additional digital learning and virtual course delivery.</p> <p>Our competence recording system is well embedded across the organisation and enables comprehensive tracking of staff competencies. Line Managers routinely monitor these competence levels to ensure that staff are allocated to appropriate operational license courses, aligning their skills with organisational needs.</p> <p>By identifying and facilitating training approved from a cross directorate meeting, the Service ensures that our workforce remains proactive rather than reactive, with resource alignment to the Community Safety Plan. This comprehensive approach provides clear evidence that the Service understands the skills and capabilities of its workforce, supports succession planning, and ensures workforce planning across all roles.</p> |

| <b>KLOE 9 sub-diagnostic</b>   |
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| <p><b>How well do we understand the skills and capabilities of our workforce?</b></p> <p>All operational members of staff are required to maintain competence for their respective roles, ensuring a thorough understanding of our workforce's skills and capabilities. Operational competence is demonstrated by satisfactory performance at real incidents, during simulations, exercises, drills, or centrally run training courses. This ongoing assessment ensures that all staff remain proficient in their roles.</p> <p>The Operational Training Programme is supplemented by additional digital learning and virtual course delivery. This blended learning approach supports differing learning styles enhancing training to ensure that our staff are maintaining their skills within the required areas while continually developing and adapting to new challenges.</p> |

Maintenance of skills training is planned and managed through localised training, aligned with training planners and the specific needs of each station. This localised approach ensures that training is relevant and immediately applicable, addressing the unique requirements of different operational environments.

In addition, a cross directorate group develops, monitors, and delivers the Annual Training Action Plan to ensure it meets organisational needs. The Service's SAR conducts an internal analysis to identify where the Service needs to be, with resulting actions addressed through various learning and development interventions. New skills required for emerging risks are assessed before being incorporated into the list of competencies to be maintained.

Our competence recording system is well embedded across the organisation and enables comprehensive tracking of staff competencies. Line Managers routinely monitor these competence levels to ensure that staff are allocated to appropriate operational license courses, aligning their skills with organisational needs.

## **KLOE 10: How well do we ensure fairness and diversity?**

### **KLOE 10 Summary**

The opportunities for feedback from our staff are aligned to the internal communications and engagement plan. They include a range of channels and methods to ensure the involvement of all parts of our workforce. Communications plans are a standard element of the project management process to ensure that stakeholders engage in Service projects.

Robust workforce and succession planning arrangements are in place that support each stage of the employment cycle. Heads of Department complete an annual department succession plan and a five-year retirement profile is monitored regularly to aid wholetime recruitment decision making.

The Service continues to use social media as a key part of our positive action work. Community profile information is available to crews, so that the Service can target, support and strengthen our community engagement activities. Our Have a Go days have been renamed as Firefighter Recruitment Experience Events (FREE).

The diversity of our workforce is monitored on a quarterly basis and our corporate target to improve the diversity of our workforce as a whole compared to the last five years continues to make positive progress with our actual workforce diversity in quarter 1 being 22.5% against a target of 22.3%.

Our revised Buddy scheme was launched in quarter 1 with good support from across our staff networks. The first Buddy Me day is being arranged for August. A Staff Network Survey has been completed to measure value of networks and to identify areas for improvement. Following discussions with our staff networks as well nationally led negotiations, improvements have been made to our maternity provision. This has been positively received by staff as both a key recruitment and retention matter.

Equality data of all starters and leavers is captured to monitor trends and of the 30 new starters in quarter 4, 24 were commencing employment as firefighters (14 wholetime and 10 on-call); three of whom were female.

There were 34 leavers in quarter 1, six females and 28 males. Five from wholetime (15%), 18 from on-call (53%) and 11 from corporate (32%). The top three reasons for leaving for all staff was due to retirement – nine people (26%), personal/work commitments – nine people (26%) and obtained employment elsewhere – three leavers (9%). There were no significant trends by staff group or protected characteristic. Of 34 leavers this quarter, 31 were offered leavers discussions (91%). Of those that were offered a leavers discussion, none declined.

There were 11 new disciplinary cases this quarter resulting in a total of 23 performance management cases in progress. Eleven cases were also concluded this quarter. This included four hearings, all at Stage 3 (possible sanction up to and including dismissal), two resulted in summary dismissals and two resulted in final written warnings.

Post case reviews are held for all closed cases with the aim of them taking place within four weeks of the case concluding. Post case reviews enable lessons learnt, potential procedural changes and organisational learning and improvements to be captured.

There were no new employment tribunal claims this quarter, of the two carried forward, one has been withdrawn by the complainant.

### **KLOE 10 sub-diagnostic**

#### **How well do leaders seek feedback and challenge from all parts of the workforce?**

The Service has a structured approach to staff communications and engagement. An internal Communications Engagement Plan is in place to ensure there is opportunity for all parts of the workforce to provide feedback and challenge to leaders which was a focus for the latest inspection by HMICFRS.

In quarter 1, internal communications and engagement has focused on the resourcing and savings programme, with a detailed plan in place and monitored weekly. This included a video update for all staff from the Chief Fire Officer, face to face briefings, and the regular quarterly dial ins for on-call staff.

The Service continues to engage with representative bodies on a regular and structured basis through liaison meetings attended by senior managers. This enables effective and timely two-way dialogue between the Service and staff representatives. Good local relationships are being maintained.

### **KLOE 10 sub-diagnostic**

#### **How well do we identify and address potential disproportionality in recruitment, retention, and progression?**

The Service's recruitment processes are transparent and reviewed to ensure there are no unintentional barriers to recruitment. A wide range of initiatives are in place to support our work to increase the diversity of our workforce. The Service continues to use social media as a key part of our positive action work. Community profile information is available to crews, so that the Service can target, support and strengthen community engagement activities. Our Have a Go days have been renamed as Firefighter Recruitment Experience Events (FREE).

A positive action steering group is in place and good progress is being made in developing our programme of work ahead of plans to undertake a wholetime recruitment campaign in the latter part of quarter 2 2024/2025. As part of this work our revised Buddy scheme was launched in quarter 1 with good support from across our staff networks. The first Buddy Me day is being arranged for August.

The diversity of our workforce is monitored on a quarterly basis and our corporate target, to improve the diversity of our workforce as a whole compared to the last five years, continues to make positive progress with our actual workforce diversity in quarter 1 being 22.5% against a target of 22.3%.

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## **KLOE 11: How well do we develop leadership and capability?**

### **KLOE 11 Summary**

All joiners are invited to a corporate induction with one corporate induction taking place in quarter 1. The one-to-one personal review process is embedded with completion monitored to ensure that all staff have at least one personal review during a 12-month period. The completion rate for one-to-ones at quarter 1 is 94.1%.

Since 1 April 2024, ten probations have been met, one has been extended and no staff contracts have been terminated during their probation period.

Following promotion, staff meet with the Learning & Organisational Development team to identify the development programme appropriate to their role. The Service's Leadership Development Programme ensures leaders at each level in the organisation are equipped with the skills to successfully carry out their role.

Middle and strategic managers attend our Leaders' Forum which consists of two hour 'bitesize' workshops on a bi-monthly basis and cover a range of cultural and leadership topics aligned to our Strategic Assessment of Risk. Corporate staff are also encouraged to complete development pathway activities relevant to their role.

Supervisory managers undertake their initial incident command training using the facilities at the Fire Service College, which enables them to be assessed at a range of incidents. A comprehensive and structured rota group training programme is in place for Flexible Duty Officers. This ensures skills are refreshed and provides a good practice forum to share and learn from incidents recently attended. This is being further enhanced to standardise monthly tactical decision-making exercises.

The Service's apprenticeships cover a wide range of areas including Operational Firefighter, Emergency Contact Handle (Control Firefighters), Leadership Development, Finance, Human Resources and Facilities Management. In quarter 1, 17 members of staff are undertaking apprenticeships, with a number of staff having successfully completed their apprenticeships.

The Service's coaching procedure also supports staff in their development. The Service have several coaches qualified at the Institute of Leadership & Management level 3 and level 5. The Learning Hub provides a one-stop blended learning resource and is widely used by staff.

The Service have several coaches qualified at the Institute of Leadership & Management level 3 and level 5, but we continue to look at how we can reinvigorate our coaching and mentoring arrangements to complement the revision of our leadership development programmes. The Service also uses the NFCC Coaching (and mentoring) portal where staff can register as a coach but also access coaching support. The Woman in the Fire Service are also part of the NFCC coaching portal which ensures a diverse range of coaches and support are available for staff across the Fire Service sector.

## **KLOE 11 sub-diagnostic**

### **How well do we manage and develop the individual performance of our staff?**

One corporate induction was held in quarter 1. Where individuals are not able or fail to attend the corporate induction within the agreed timescales, this is escalated to the line manager to ensure attendance.

Following the corporate induction, a survey regarding the effectiveness of the process is sent out. All respondents across both sessions confirmed the induction met or exceeded their expectations. Respondents were positive about the informative and engaging content, the informal nature of the session, the opportunity for corporate and operational staff to come together and the quality of the presentations.

One way that we evaluate how successful the induction period has been for a new starter is data from probation reviews. Year to date, since 1 April 2024, ten probations have been met, one has been extended and no staff contracts have been terminated during their probation period. There are 12 final probation reviews outstanding at the end of the quarter.

The one-to-one personal review process ensures that a discussion and appraisal take place at least once a year and focuses on wellbeing, performance and development. One-to-one reviews are recorded over a rolling 12-month period and completion rates are monitored. Trend analysis suggests that reviews tended to be conducted quite evenly over the 12-month period. The completion rate at quarter 1 is 94.1%.

### **KLOE 11 sub-diagnostic**

#### **To what extent are the career pathways of all staff effectively managed?**

Following promotion, staff meet with the Learning & Development team to identify the development programme appropriate to their role. The Service's Leadership Development Programme ensures leaders at each level in the organisation are equipped with the skills to successfully conduct their role. Middle and Strategic Managers attend our Leaders' Forum which consists of two hour 'bitesize' workshops on a bi-monthly basis and cover a range of cultural and leadership topics aligned to our Strategic Assessment of Risk. Corporate staff are also encouraged to complete development pathway activities relevant to their role.

Supervisory Managers undertake their initial incident command training using the facilities at the Fire Service College, which enables them to be assessed at a range of incidents. A comprehensive and structured rota group training programme is in place for Flexible Duty Officers. This ensures skills are refreshed and provides a good practice forum to share and learn from incidents recently attended. This is being enhanced to standardise monthly tactical decision-making exercises.

The Service's apprenticeships cover a wide range of areas including Leadership Development, Finance, Human Resources and Facilities Management. In quarter 1, 17 members of staff are undertaking apprenticeships, with a number of staff having successfully completed their apprenticeships.

The Learning & Organisational Development team restructure has enabled a reappropriation of staff responsibilities. The Service have several coaches qualified at the Institute of Leadership & Management level 3 and level 5 and the Service is looking at how to reinvigorate coaching and mentoring arrangements alongside the revision of leadership development programmes. The

Service also uses the NFCC Coaching (and mentoring) portal where staff can register as a coach but also access coaching support. The Woman in the Fire Service are part of the NFCC coaching portal which ensures a diverse range of coaches and support are available for staff across the Fire Service sector.