

Performance report - Quarter 2

Finance & Audit Committee

1 July to 30 September 2024



DORSET & WILTSHIRE
FIRE AND RESCUE

Priority: Making every penny count

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

KLOE 6 Summary

The Procurement Act (new legislation) will go live on the 24 February 2025. There will be a transition period during which the existing regulations and New Act 2023 will apply. The Service's procurement professionals are undertaking initial the Cabinet Office training in preparation for this.

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 (BSI). Over the past quarter the Service continues to monitor the approach undertaken to ensure continued alignment to the standard. The next six-monthly BSI audit is due in November 2024. Maintaining this accreditation helps continue to provide good assurance of our asset management.

The Service received confirmation in October that it has secured planning permission for the training centre proposed at Weymouth Fire Station. Final designs are being developed and preparations for procurement are now underway. To prevent any issues with engagement with the market over the Christmas period the procurement is planned to go out for tender from January 2025.

The lifecycle of appliances has undergone a recent review with data gathered from 22 other fire and rescue services. Findings from the report indicated that the current replacement programme is well balanced between maximising the fleet lifespan whilst mitigating the risk of increasing vehicle failures and associated expenses. The Fleet Programme continues to progress well, with continued firm awareness of the challenges with supply chains and delays.

Information and Communications Technology capital and revenue programmes remain broadly on track and there are no strategic issues to raise with Members. Despite increased inflationary pressures and sometimes enforced cloud software offerings, the Service continues to invest in key initiatives which support front line services with modern and sustainable technology. The revised data, digital and technology strategy aligns this work across the Service and the delivery of this raises no concerns to raise with Members.

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, has robust risk management arrangements, and undertakes a biennial Strategic Assessment of Risk. The Service's corporate risk management arrangements are regularly audited, in internal audit, 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.

The Service's risk management arrangements are linked into to the business continuity arrangements and helps to 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 2 of 2024-25 the Service had one full business continuity incident, which involved public disorder and eight occasions where our business continuity lite arrangements were put in place. These include the Service receiving severe weather alerts, where estate work requires a fire station to be relocated for a short period of time. It also had a total of nine recorded business continuity exercises. These include multi-agency Control of Major Accident Hazards and Local Resilience Forum exercises, 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, which helps to provide 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. 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.

KLOE 6 sub-diagnostic

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. The contract has now been awarded.
- A Wide Area Network (WAN) with the Networked Fire Services Partnership, led by Kent Fire and Rescue Service procurement team. The is in the early stages of the procurement – the engagement stage.
- We will be collaborating again with BlueLight Commercials on the procurement for the Virtual Machine Ware Contract, a Virtualisation Cloud computing company. We are awaiting information on the outcome of the procurement process.

We are 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 Service is in the process of completing a survey of our requirements which needs to be submitted by the end of October 2024.

We are working with others over securing a new national procurement framework for smoke alarms with a view to go out to tender in January 2025.

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 24 February 2025. There will be a transition period during which the existing regulations and New Act 2023 will apply. The procurement professionals will be undertaking initial the Cabinet Office training. The Procurement Manager and Senior Procurement Officer 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 where required. Further guidance has been published on our website for our suppliers. They are providing webinars and training for suppliers. The Procurement Manager is also engaging with the dedicated Communities of Practice set up by the Cabinet Office as well as the BlueLight Commercial Group.

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?

Work continues to maintain the ISO 55001 standard which is helping the Service to continue to be assured of the appropriate management of its assets throughout their lifecycle, from acquisition to decommissioning. Following a successful BSI audit in May 2024, BSI have planned their next six-monthly audit for 25 November to 26 November 2024.

The BlueLight Asset Management System continues to be developed and expanded to assist the Service with controlling its assets. The BlueLight Asset Management System enhances the Service's ability to track and maintain assets efficiently, ensuring that all equipment is in optimal condition and ready for use. Work continues to expand and enhance the system.

We continue to monitor the increasing cost of parts, materials, and labour, as well as the impacts of global supply chain disruptions and challenges. This focus enables appropriate decisions to be made regarding ordering timeframes and stock levels.

The Service received confirmation in October that it has secured planning permission for the training centre proposed at Weymouth Fire Station. Final designs are being developed and preparations for procurement are now underway. To prevent any issues with engagement with the market over the Christmas period the procurement is planned to go out for tender from January 2025. In addition, the Service is continuing to develop proposals for further estate rationalisation linked to the projects and

decisions made through the Resources and Savings Programme. Proposal plans are being drafted for phase one which includes Occupational Health at Bromham, Tisbury Fire Station, Salisbury Fire Station, and Service Control Centre at Potterne.

The Estates team continue to incorporate affordable quick-win environmental improvements in the reactive maintenance service and the Cyclical Refurbishment Programme. They are exploring options for a replacing an ageing gas boiler system with a combination of air handling and electrical panel heaters that may be trialled to review impact before considered wider. This trial would consider the environmental impact and how efficient this type is system is at reducing our carbon footprint.

The lifecycle of appliances has undergone a recent review with data gathered from 22 other fire and rescue services. Findings from the report indicated that the current replacement programme is well balanced between maximising the fleet lifespan whilst mitigating the risk of increasing vehicle failures and associated expenses.

The Fleet Programme continues to progress well, with the team keeping a firm awareness of the challenges with supply chains and delays. Telemetry has been fitted to over 200 white fleet vehicles to improve safety, operational efficiency, fuel economy, and overall fleet management. Telemetry will also contribute to more efficient fleet management by providing insights into vehicle maintenance needs and usage patterns.

The Service's fleet continues to be procured using procurement frameworks, ensuring the best value. The Service constantly assess products and prices across the markets for best value. The total sale of old vehicles and equipment this year so far has generated over £131k of income.

KLOE 6 sub-diagnostic

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

The Service has begun to undertake market engagement and trial systems that will enable us to better monitor the Services' energy usage across the estate. This ensures further clarity over expected payback periods for solar panel installations and the performance of new estate plant installations, and how this is affecting our carbon footprint. The Service is looking for options to monitor any changes to the estate and provide environmental performance statistics for activities such as repairs, cyclical refurbishment, and installation of environmentally friendly solutions. Environmental performance statistics are crucial for understanding the impact of our initiatives on reducing carbon emissions and improving sustainability. These statistics enable us

to make informed decisions about future investments by identifying which areas provide the greatest environmental and financial benefits.

The solar panels installed at Blandford, Sturminster Newton, Wareham, and Warminster are indicating varying periods of payback for the investment. The best performing station is Blandford with a 9-year payback period. This monitoring is providing us with the data to help ensure maximum return on investment on future installations by profiling the stations to understand which other sites would benefit from carbon reduction the most.

The Service is planning a trial station, where the ageing gas boiler system will be replaced with a combined air handling and electrical panel heating system. This is expected to reduce our carbon footprint on this site. We will then evaluate its performance before considering implementing this system at other sites. If this proves successful it has the potential to further benefit the Service as we introduce more solar panels across the estate and move away from reliance on gas.

At present the Service is tendering for an environmental audit to cover eight fire stations (Stratton, Chippenham, Shaftsbury, Weymouth, Christchurch, Verwood and Hamworthy). This will provide 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 then use the energy audit report to inform our decisions and help us evaluate potential investment opportunities.

We continue 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.

We have identified six Green Champions on key stations. We will be working with these members of staff to develop the role which will be used as a template for other stations. Development will include training, sharing of knowledge, and the creation of resources to assist with reducing a stations carbon footprint.

KLOE 6 sub-diagnostic

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

The Service conducts a Strategic Assessment of Risk (SAR) every two years. This key document supports decision-making and planning and serves as the foundation for the Service's strategic plan, the Community Safety Plan (CSP). The SAR is developed by integrating vital local, national, and global insights, as well as local station analysis that aligns with our operational groups.

Coupled with risk and demand data and an organisational review, this approach ensures that the SAR is comprehensive and robust. While a SAR informs the initial development of the strategic plan, a subsequent SAR is conducted midway through the plan's cycle. This update ensures that the plan remains relevant and identifies any emerging areas of focus or priority. The process to develop this interim SAR has now commenced.

In June 2024, the Authority approved the new CSP (2024-28) after a three-month public consultation. Its implementation is monitored and reviewed through our established performance management framework, which is both rigorous and reliable. The Service continues its commitment to meeting the Fire Standards Board's Community Risk Management Plan standards in both the development and delivery of the CSP and aligns fully with the requirements of His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) methodology. The most recent HMICFRS inspection identified that the 'service continues to identify risk well' and 'has an effective community risk management plan'.

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 CSP in June, the Service has a revised Digital Data & Technology Strategy in place which received a substantial assurance rating from South West Audit Partnership (SWAP) internal auditors. The 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, 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 Medium-Term Finance Plan deficit forecasts reported to Members at Fire Authority in February 2024 were £2m for 2025-26, rising to £3.1m for 2027-28.

Detailed work to confirm the required revenue budget allocations across the Service commenced in quarter 2 2024-25. The provisional Local Government Finance Settlement is due to be issued towards the end of quarter 3 2024-25, where the wider ongoing financial position will be confirmed.

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 audit process for the 2021-22 financial statements was completed in September 2024. Following the general election, Central Government have set several backstop dates for the completion of historical outstanding audit processes. Our previous auditors, Deloitte LLP, have recently confirmed that we will be unable to achieve the backstop date of 13 December 2024 for the 2022-23 statements. This is due to delays in receiving the required assurances from the auditors of Wiltshire Pension Fund. The backstop date for the completion of the 2023-24 process is 28 February 2025. Audit work with our new Auditors, Bishop Fleming, has progressed well to date and will be completed prior to this deadline, but full sign off may not be achieved again prior to the deadline due to the pension fund audit.

SWAP 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. The Local Government Finance Settlement for 2025-26, expected in quarter 3 2024-25, will provide clarity of the financial challenges faced.

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. The trend for work-related absence due to physical injuries or ill health quarterly trend is down from 389 days to 228 days compared to the same time last year. In quarter 2, nine people are contributing to these figures. Of the nine people, four members of staff are designated long-term sick or in long-term recovery and their days lost are 95% of the total in this quarter. The number of reportable incidents to the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 has stayed the same over the same quarter last year (three). There are no strategic issues to raise with Members.

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 trend for work-related absence due to physical injuries or ill health quarterly trend is down from 389 days to 228 days compared to the same time last year. In this quarter, nine people are contributing to these figures. Of the nine people four are designated long-term sick or in long-term recovery and their days lost are 95% of the total in this quarter.
- 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 stayed the same over the same quarter last year (three). 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 continue to be well embedded and 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 HMICFRS methodology as a baseline assessment to review arrangements and performance against their 'good' assessment.

In December 2023, the Authority's application to join SWAP was approved by their Board, and Councillor Small was subsequently appointed to the SWAP Members Board at the Authority meeting in June 2024. The SWAP four-year audit strategy and the 2024-28 annual plan were developed collaboratively by SWAP, the Service, and the Chair of the Finance & Audit Committee and were approved by Members in March 2024. Four audits have been completed so far this year. These are Social Media, Medium Term Finance, Site Security and Data, Digital and Technology Strategy.

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 1 performance in August. Priorities four and five were reviewed at the Finance & Audit Committee at their meeting in September for quarter 1 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 2023 – 24 audit programme as reported in the Finance and Audit meeting in July.

The Authority oversees and scrutinises the development and delivery of the 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 Service received an overall grade of ‘substantial assurance’ in the 2023-24 audit programme, as highlighted in the annual internal audit report provided by SWAP, our internal auditors.

In December 2023, the Authority’s application to join SWAP was approved by their Board, and Councillor Small was subsequently appointed to the SWAP Members Board at the Authority meeting in June 2024. The SWAP four-year audit strategy and the 2024-28 annual plan were developed collaboratively by SWAP, the Service, and the Chair of the Finance & Audit Committee and were approved by Members in March 2024. Four audits have been completed so far this year. These are Social Media (reasonable assurance), Medium Term Finance (substantial assurance), Site Security (reasonable assurance) and Data, Digital and Technology Strategy (substantial assurance).

The Service maintains robust assurance systems to uphold high performance standards, incorporating internal and external audits, British Standards Institution audits (for ISO45001 and ISO55001), HMICFRS inspections, and peer reviews. Together with internal assurance mechanisms, these assessments contribute to the development of the annual Statement of Assurance, which was presented to Members at the Authority meeting in September 2024.

Since 2019, the Authority and Service have aligned fully with HMICFRS methodology, from policy creation to operational execution. This alignment is supported by Key Lines of Enquiry that adhere to the inspectorate’s judgment criteria and ‘good’ rating standards. An annual review against these standards, supplemented by quarterly performance reports, provides continual evidence of the Service’s positioning. This alignment and its effectiveness were further validated by an internal audit, which granted a ‘substantial’ assurance rating.

Performance management arrangements are deeply embedded across the Service and up to Authority level, with well-defined reporting requirements and oversight. This robust framework ensures consistent performance reporting from the CSP and Authority’s five priorities down to individual team and watch levels. Data is gathered and visualised through our performance management tool and detailed station-level 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. In this quarter we received:

- 27 Freedom of Information requests - 96% of these were responded to within 20 working days. The average response time was ten days. Seven of these requests were received from media outlets, six from commercial companies and 14 from individuals.
- Five subject access requests under the Data Protection Act.
- Six complaints received quarter two - ten complaints responded to (including four from quarter one) and all were resolved within 14 days. 80% of these complaints were not upheld. Two of these complaints related to property damage and four related to driving.
- 31 compliments

Seven security incidents were reported during the quarter. These related to data handling incidents and issues around access control. No breaches were 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 new 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 mitigations are being monitored and on track to be addressed.

The Service monitors the completion rate of the mandatory data protection and cyber security training for all staff. As of 30 September 2024, 98% had completed their e-learning.

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 2, 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 (Wholetime and On-Call) and corporate staff. The highest absence causation for Fire Control staff was gastrointestinal. Mental health was the second highest causation for both operational groups and Fire Control.

The Service has a corporate target to achieve average sickness levels lower than the previous five-year average. The cumulative target (wholetime/corporate/Fire Control) for quarter 2 was 4.4 shifts lost per person, was achieved with a cumulative actual figure of 4.3 shifts lost person. The long-term trendline is beginning to show a very slight decrease. Sickness absence continues to be closely managed.

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 2, 93% of staff passed their fitness test and ten individuals are supported with fitness improvement plans which includes the provision of advice and guidance on fitness improvement, including weight management and nutritional information.

During quarter 2 a number of key health messages, such as inclusion and work life balance, travel, sun and self-care, women's health were published. There are also several wellbeing advice resources available including toolkits produced by Public Health England. All of our health and wellbeing resources are publicised through our 'Safe To' programme.

A new NFCC Wellbeing Framework was launched in July and Health and Wellbeing Board, responsible for identifying existing and emerging patterns and trends in health and wellbeing, is in place. Its duties also include co-ordination of health and wellbeing activity at national level and delivery of supporting policy and advice on quality assured resources. The Service's Head of People Support sits on this board.

KLOE 8 sub-diagnostic

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

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KLOE 9: How well trained and skilled are staff?

KLOE 9 Summary

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.

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.

The Training Development and Standards team are making good progress with the implementation of National Operational Guidance.

KLOE 9 sub-diagnostic

How well do we understand the skills and capabilities of our workforce?

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.

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.

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 conducts an internal strategic analysis to identify where it 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.

The Training Development and Standards team are making good progress with the implementation of National Operational Guidance.

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

KLOE 10 Summary

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.

A positive action steering group is in place and as part of this work our revised Buddy scheme was launched in May 2024 with support from across our staff networks. A successful Buddy Me day was held in August and our wholetime recruitment campaign was launched at the latter part of this quarter.

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%.

Equality data of all starters and leavers is captured to monitor trends. There were 21 new starters in quarter 2.

There were 37 leavers in quarter 2, six females and 31 males. Seven from wholetime (19%), 20 from on-call (54%), eight from corporate (22%) and two from Fire Control (5%). The top three reasons for leaving for all staff was due to obtained employment elsewhere – ten people (27%), retirement – nine people (24%), personal/work commitments – seven people (19%). There were no significant trends by staff group or protected characteristic. Of the 37 leavers this quarter, 32 were required to complete a leavers discussion (86%).

There were eight new disciplinary cases this quarter resulting in a total of 24 performance management cases in progress. Eight cases were also concluded this quarter. These consisted of four disciplines, two appeals and two bullying and harassment.

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, with the ongoing case listed for Employment Tribunal in February.

Since its launch in March 2024, our Safe To portal has received 1676 hits. This consists of: Safe To Be: 478 times, Safe To Speak: 674 times, Safe To Challenge: 323 times, Safe To Lead: 201 times, demonstrating the usefulness of this resource.

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.

The Culture Development Committee is now well established and the Culture Steering Group has enabled work to continue on the Culture Delivery Plan. This quarter also saw episode four of the Culture Conversations podcast which is designed to engage staff with updates on the Culture Delivery Plan and complement existing communications channels. Episode four focused on our work with positive action and the buddy scheme prior to wholetime recruitment going live in October.

During quarter 2 the CFO published a staff update video, which focused on the June Fire and Rescue Authority meeting, the Resourcing and Savings programme (RSP) and organisational culture. Internal briefings have also focussed on those impacted by decisions made from the RSP.

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.

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 2024-25. 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 was held in August.

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no significant trends by staff group or protected characteristic. Of the 37 leavers this quarter, 32 were eligible to be offered leavers discussions (86%). Of those that were offered a leavers discussion, none declined.

There were eight new disciplinary cases this quarter resulting in a total of 24 performance management cases in progress. Eight cases were also concluded this quarter. These consisted of four disciplines, two appeals and two bullying and harassment.

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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 2. All individuals attended the corporate induction within the agreed timescales. Should this not be the case, this is escalated to the line manager and individuals are unable to complete their probationary period if they have not attended a corporate induction. 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 2 is 88.1%.

Since 1 April 2024, 30 probations have been met, one has been extended and one staff contract has been terminated during their probation period.

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.

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 2, 23 members of staff are undertaking 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 also publicises 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 2. 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. Since 1 April 2024, 30 probations have been met, one has been extended and one staff contract has been terminated during their probation period. There are 14 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 overall completion rate at quarter 2 is 88.1%.

KLOE 11 sub-diagnostic

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

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.

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 2, 23 members of staff are undertaking apprenticeships, with several members of staff having successfully completed their apprenticeships.

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.