

Sent by email:

Chief Fire Officer Andy Cole
Dorset and Wiltshire Fire and Rescue Service

23 January 2026

Dear Andy,

Dorset and Wiltshire Fire and Rescue Service revisit

In April and May 2024, we inspected Dorset and Wiltshire Fire and Rescue Service. During our inspection, we identified the below [cause of concern](#) and made five recommendations. Between 24 and 27 November 2025, we revisited the service. We then closed three of our previous recommendations due to progress it had made in these areas. We have kept two recommendations and the cause of concern open.

Cause of concern

The service needs to do more to make sure that its staff routinely demonstrate behaviours in line with its values. We found strong evidence of behaviours that aren't in line with service values, and were told about some areas of the service which have a culture of tolerating unacceptable behaviour. Staff don't always have the confidence to report these issues and worryingly, when they do, they aren't always supported by managers.

We acknowledge that the service has commissioned and published an independent review into its workplace culture, and has a plan in place to improve its organisational culture.

Recommendations

The service should update its culture delivery plan to include the following recommendations:

- The service should make sure that its staff are able to demonstrate that they understand and follow the [Core Code of Ethics](#), and should be able to demonstrate that it has built the code into all relevant policies and practices.
- The service should assure itself that senior and middle managers act as role models and show they are committed to service values through their behaviour.

- The service should establish a culture where behaviours that aren't in line with its values are routinely challenged, making sure all staff are trained and supported to identify and challenge these behaviours.
- The service should make sure appropriate support is provided to those raising workforce concerns.
- The service should make sure staff fully understand the role of the culture development committee and the actions it is taking.

During our revisit, we interviewed staff who developed the service's culture action plan, which the service had already introduced at the time of our previous inspection. Staff we interviewed included you, as chief fire officer. We also interviewed managers and staff with responsibility for carrying out the plan, and colleagues from various teams and fire stations.

On 9 December 2025, we shared our initial findings with you. This letter provides an update on our findings.

Action plan

The service has a comprehensive culture action plan based on independent and internal reviews. It developed the plan in consultation with a cultural steering group that included managers, staff groups and staff representative bodies. The service also consulted with external stakeholders, including other fire and rescue services, the [National Fire Chiefs Council](#) and police forces.

After our inspection, the service updated the plan to include the recommendations from our cause of concern.

The culture delivery plan, which complements the culture action plan, includes more detailed information, such as names of lead officers as well as timescales and progress updates.

The service could improve governance arrangements

We found appropriate governance arrangements in place to monitor progress of your action plan, but they could be more robust.

The service has set up a culture development committee to oversee the culture action plan. The chief fire officer chairs this committee. The committee has a terms of reference document, which includes standing agenda items, core members and providing open seats.

The committee produces highlight reports for the senior leadership team (SLT), and also presents these reports to Dorset and Wiltshire [fire and rescue authority](#)'s finance and audit committee every six months. The reports outline how the culture action plan is progressing and give an overview of progress made against each action. Where actions are behind

schedule, they give limited detail about why, or how challenges are being addressed. The service also produces an annual report.

We also found that the terms of reference state that reports are “on an ad-hoc basis via the senior leadership team”. This approach was criticised in a recent internal audit. The service said it will put corporate oversight in place by making sure the SLT strategic focus meeting agendas include an item updating on culture progress by December 2025.

The service also monitors its culture through the service delivery plan. And it has added a strategic risk about culture to the service’s risk register, which it reviews monthly.

It was encouraging for us to see that the service has recently developed a culture assurance framework. It uses this as a live tool to monitor progress against actions and includes evidence of how each action has been met. At the time of our inspection, there was no formal process for owners to give updates.

In April 2025, the service started using the existing performance management system to monitor all remaining actions. It is unclear how this new system works with the culture delivery plan. Some department heads use the delivery plan for their updates. Others use the performance management system. The service reviews the system through quarterly service delivery team meetings. This is a positive step towards the service making sure it carries out robust scrutiny and oversight.

In November 2025, the service commissioned an internal audit “to assess the effectiveness, robustness, and transparency of the processes and mechanisms [the service uses] in delivering its culture action plan”. The audit found that there was a lack of structured and consistent tracking of the actions.

The service could do more to assure itself and the Fire and rescue authority that it is making progress against the culture action plan. It should make its reporting processes more efficient and be clear on how lead officers should give updates. It should also strengthen the culture development committee’s terms of reference to make sure that robust monitoring and reporting is taking place.

The service has scheduled the culture action plan to finish in April 2026. It told us that it is hoping to transition the plan into “business as usual”. It told us that before the transition it will carry out a lessons-learned exercise. It said it will use the outcomes of external reviews, including our report, to inform its approach. When doing this, the service should be transparent about the challenges that are still in place.

The service has effectively communicated the Core Code of Ethics and built it into its policies and procedures

In our last inspection, we found that the service didn’t make sure that staff could show that they understood the Core Code of Ethics. It also couldn’t show that it had built the code into all relevant policies and practices.

During our revisit, everyone we spoke to told us they were aware of the Code of Ethics. The service has communicated it well. Staff told us that information on culture is a lot more accessible and that they know where to find the information they need. The information is now on the service's Connect site. [On-call](#) staff can also access this site from home.

Since our last inspection, the service has promoted its Code of Ethics handbook and updated its staff code of conduct procedure, clearly aligning this with the Code of Ethics. The Code of Ethics is included in the service's induction for new starters. The service has also included it in its probation procedure. And it features in promotion processes. The service has also updated its HR policies and procedures to include the Code, including the discipline and grievance policies.

In April 2024, the service introduced a Code of Ethics workshop. This is voluntary to attend and has received positive feedback. In the 2025 staff survey, 98 percent of staff agreed with the statement: 'I understand that it is my responsibility to follow the Code of Ethics at work'.

At the time of our revisit, only 13 percent of staff had attended the workshop. And there is no mandatory training or process for staff to acknowledge that they have read or understood the Code of Ethics. The service is developing a digital resource to address this, as well as updating contracts of employment, but these aren't yet in place.

The service has started to develop role and responsibility guides. These outline expectations, standards and requirements for each role. We found that staff were unsure how they should use them.

The service hasn't yet updated its one-to-one process with the new Code of Ethics. It is getting a new HR system and will review the process once this is in place. We look forward to seeing how this work progresses in our next full inspection.

We have seen enough evidence that the service has met this recommendation, and we have closed it as a result.

More senior and middle managers are demonstrating positive behaviours, but there is still more to do

In our last inspection, we found the service didn't assure itself that senior and middle managers act as role models, or show they are committed to the service values through their behaviour.

During our revisit, most of the staff told us they felt positive about the SLT, and said they show positive behaviours and act as role models. They felt that managers are open to ideas and feedback, are open and honest, and don't ignore poor behaviour. Staff also gave examples of senior leaders acting as role models by checking on staff following difficult incidents. In the latest staff survey, 37 percent of staff disagreed with the statement: 'I feel that SLT set a good example by following the Code of Ethics'.

Staff told us they read the chief fire officer's blog and find it useful and interesting. They told us they would like to see more senior officers on stations, including corporate leaders, but also understand this is difficult in such a large service. Most staff told us their interactions with senior leaders are positive.

The service has updated its station manager induction pack with topics including professional standards, behaviours, and monitoring and building positive cultures. It also has annual managers' briefing days.

Staff told us they felt managers were getting better at calling out poor behaviour, and this was in part due to the training managers had received. Although the service records the numbers of attendees at briefings and courses, they aren't mandatory. The service also has no key performance indicators for attendance, so has limited assurance of how many managers it is reaching.

Some staff told us that they felt there was a gap at middle-manager level, and for on-call managers. This was also raised in the service's most recent culture development committee meeting. Some staff told us there are still some managers who don't believe they need to apply the Code of Ethics. To address this, the learning and organisational development team are developing a supervisory managers' package to use when staff apply for promotion. The HR team is developing a [continuing professional development](#) package to bring middle managers together for shared learning. The service needs to do more to include these managers and make sure they understand how important their role is to changing the culture of the service.

The service still faces challenges in reaching on-call managers with culture messaging. Not all managers attend the annual management briefing days, and they have limited time to read emails. On-call dial-in sessions take place every six months. Staff told us they find these sessions useful, with a good level of interaction. The service relies on district commanders to share messaging with on-call staff, but it doesn't make sure that this happens.

Staff couldn't confidently tell us how the service holds staff and managers accountable for making sure they adhere to standards.

This area needs more work, so we are keeping this recommendation open.

The service has created a culture where staff feel safe to challenge and raise concerns

In our last inspection, we found that the service hadn't established a culture where behaviours that weren't in line with its values were routinely challenged. And it hadn't made sure that all staff were trained and supported to identify and challenge these behaviours.

Since our last inspection, the service has updated its policies and procedures – including anti-bullying and [harassment](#), grievance, discipline, and capability – to make them more accessible to staff. It has communicated the methods for raising concerns effectively, including through Safe2 posters. The posters are printed with a QR code that directs staff to the confidential reporting line. In the most recent staff survey, 86 percent of staff said they knew where to find information and procedures to support them in raising concerns. Most staff we spoke to knew about the confidential reporting line. However, since 2024 only nine reports have been made.

Some staff told us they felt the service was pushing the confidential reporting line too much. They felt it was encouraging people to report poor behaviours rather than empowering managers to deal with things at a lower level. Some managers also described not always feeling well supported by middle managers to tackle poor behaviour. They said that some subtle poor behaviours are going unchallenged.

There is a mandatory whistleblowing e-learning package in place, which has a high completion rate. The service also has what it calls ‘guardians’ who it has trained to listen to staff concerns or suggestions and guide staff through informal and formal ways to deal with them.

The service has reviewed how far it can go in terms of transparency of disciplinary case outcomes to increase trust in the process. It now publishes outcomes in its staff newsletter and on the culture dashboard, an intranet resource that everyone can access. It holds post-case reviews, that include the representative bodies, to continuously improve. The service has also introduced team-based culture action plans. These help to develop a conversational learning culture about the Code of Ethics following an investigation.

The length of time the service takes to investigate disciplinary cases has decreased. The service has introduced a compliance and investigations team, which it hopes will decrease this further. It will continue to include managers in the process, as managers complete the initial assessment before passing the investigation to the compliance and investigations team. The service has also invested in more HR resources to support this work.

Since April 2022, the service has offered a ‘Not On My Watch’ training session. This has received positive feedback from staff. The service describes this training as an informal guided discussion on challenging inappropriate behaviour. It is given face to face by a [watch](#) manager. So far, 77 teams and watches across the service have had this training.

The service is also developing a new course called Drive, Thrive, Strive. This will empower managers to deal with inappropriate behaviours. It complements the Management in Lifesaving course and the Code of Ethics workshop. The service is also planning to introduce continuing professional development sessions for managers, where they can come together to discuss their experiences.

Before introducing any new training, the service should carry out a review of its existing culture training and sessions to assess their effectiveness. It should make sure these sessions are having a positive effect. And that it is targeting them at the staff that need them the most, or who haven't yet accessed the courses on a voluntary basis. It should also consider combining some of its existing provisions to make sure staff aren't confused by what is on offer.

The service has made a lot of progress in this area, so we have closed this recommendation.

The service gives appropriate support to staff who raise workforce concerns

In our last inspection we found that the service didn't always make sure it gives appropriate support to those raising workforce concerns.

During our revisit we found that the service gives appropriate support to those raising concerns, as well as to those subject to investigations, and witnesses. It clearly outlines this in its disciplinary procedure. The service assigns a contact officer, a welfare officer and an HR people partner to everyone involved in a case. Welfare officers complete reports, which give the service assurance that they are maintaining contact.

Although the welfare officer role is invaluable support for those involved in such processes, some staff told us they were concerned that there is no training given for this role. The service does offer a guidance document, but it could further strengthen this support by training those assigned to the role.

As well as the welfare officer, the service has a good variety of support systems available to all staff. These include occupational health, counselling services, trauma support, guardians and staff network groups.

We have closed this recommendation.

The purpose of the culture development committee is unclear

In our last inspection we found that the service didn't make sure that staff fully understood the role of the culture development committee and the actions it is taking.

During our revisit we found that most staff knew about the culture development committee and the culture action plan and spoke positively about them. Some staff told us they felt the purpose of the culture development committee was unclear. And the service told us it had moved away from using the committee meetings to give updates on the culture action plan's progress. It told us the meetings are now more of an informal learning environment.

During our revisit, staff often told us they had never witnessed or heard of any specific acts of inappropriate behaviour taking place. Although this is encouraging, it is important that staff understand that some staff have had a different experience.

The service should consider whether the terms of reference for the culture development committee are still relevant. It should make sure that progress against the culture action plan stays focused.

Similarly, some staff were unsure what the purpose of the culture dashboard is, and how to use it. Most staff told us they are aware of the dashboard and that it includes useful data. The service tracks how often the dashboard is used, but it doesn't have any key performance indicators, so it doesn't know how many dashboard users it should expect to see.

The service's culture communications are reaching staff. The number of hits on culture-related pages on the intranet are monitored and show a good level of use. However, some staff told us they are starting to feel overwhelmed by the culture communications and are unsure what to do with the information they are given. The service's recent culture pulse survey only had a 10 percent staff response rate.

The service is finding it particularly challenging to reach on-call staff. Only 25 percent of on-call staff responded to its most recent staff survey. And only 8 percent responded to its culture pulse survey. Staff told us they find it difficult to find the time to read emails and complete surveys due to the small amount of time they have for drill nights. The service is considering an app for on-call staff so they can more easily see the information relevant to them.

Although the service has made progress in this area, there is more work to do to. We are keeping this recommendation open.

Conclusion

The service has invested significant time and resources to develop and address its action plan. We commend its staff for the progress they have already made. The service should continue to communicate its progress to the workforce, including telling staff about our revisit findings, and how it intends to address the outstanding recommendations.

We found that the service has strengthened its HR and equality, diversity and inclusion policies, processes, and resources. It has invested in a new team to improve the consistency of its investigations.

It has prioritised continuous staff involvement with and communication about its culture journey, so staff are better informed about the standards expected of them.

The service should now evaluate the actions it has introduced, strengthen its internal assurance systems to make sure that they are effective, and consider the next steps needed to fully address the issues that have been identified.

We are encouraged by your commitment, as the new chief fire officer, and the commitment of your senior leaders, to improving the culture of the service, and by the honesty and integrity you have shown during this revisit.

Overall, I am satisfied with the service's progress, but there is still some work to do to improve the culture of the organisation. Therefore, the cause of concern and two out of the five recommendations will stay open.

We will continue to monitor the service's progress as part of our next scheduled inspection.

This letter will be published on our website.

Yours sincerely,

A handwritten signature in dark ink, consisting of a large, stylized 'K' followed by a smaller 'S' and a dot.

Kathryn Stone OBE

His Majesty's Inspector of Constabulary

His Majesty's Inspector of Fire & Rescue Services