

Areas for Improvement (AFI) from the HMICFRS inspection report for SYFR – Action updates as of October 2022

Effectiveness:

AFI: The service should ensure its firefighters have good access to relevant and up-to-date risk information.

Action update: This action has been completed. Agreed at the Service Improvement Board meeting on 6 April 2022.

This action is now considered business as usual.

A process has been put in place for ensuring the submitted Operational Risk Information (ORI) returns are audited and published. It allows for the information to be verified and accessible on the mobile data terminals for operational personnel. Although this system has been in place for some time, the Service Improvement Board were not prepared to deem this action as completed until ORI completions returned to pre-pandemic numbers. Completed ORI numbers are now above pre-pandemic numbers, and the action has been closed.

AFI: The service should ensure it addresses effectively the burden of false alarms.

Action update: This action has been completed.

Business Fire Safety have an unwanted fire signals (UwFS) policy in place, which details a number of steps that can be taken with the business to address UwFS. The revised UwFS policy was put in place 6 January 2020, which also outlined new call challenge criteria. SYFR will continue to engage with businesses and highlight UwFS in the media as appropriate.

AFI: The service should ensure it has effective arrangements for providing specialist protection advice out of hours.

Action update: This action has been completed. Agreed at the Service Improvement Board meeting on 6 April 2022.

The Out of Hours (OOH) provision pilot finished on the 14 March 2022. OOH is now considered, business as usual. A dedicated Protection Inspecting Officer is available through control 24/7. The Policy and Procedure have now been published.

AFI: The service should ensure it understands what it needs to do to adopt national operational guidance (NOG) and put in place a plan to do so.

Action update: This action is completed.

Since our previous inspection in 2019, the service has created a NOG Implementation Plan. However, largely due to the pandemic, the plan has not been followed as originally planned. As a result, an updated plan has been completed and was approved by the People Board on 7 June 2022. The plan reflects both the implementation and embedding phase of NOG.

There will also be an increased focus on training around NOG, with a plan for all Watches to receive NOG awareness training and an aim to improve NOG compliance in Training and Development Centre training courses.

AFI: The service should ensure it has an effective system in place to capture operational learning so as to improve its operational response.

Action update: This action has been completed.

A full and comprehensive process is in place. Currently experiencing capacity issues within Operational Support Team to manage the increasing amount of information that is being submitted, both internally and externally. Evidence has been submitted to show the process for updating the Pre-Determined Attendance (PDA) for vehicle in water

AFI: The service should make sure its operational staff have good access to relevant and up-to-date risk information. This should include cross-border risk information.

Action update: This action is behind schedule. Progress so far:

This action is 80% complete.

Over the border risk information for all neighbouring services is available to crews via the mobile data terminals. Despite attempts to collect a wide range of over the border risk information from all neighbouring services, some services have provided very little risk information. All shared information is collected on Resilience Direct. Work has been started on developing a method of sharing all risk information on demand when over the border assistance is required within South Yorkshire.

At the last Service Delivery Board (9/8/22) the new Operational Risk Information plan was agreed. This plan outlined how the service was going to review or revisit existing Operational Risk Information (ORI's). Now this plan has been agreed at board level Firefighter Safety Team are going to progress its implementation.

An Over The Border (OTB) risk information sharing document has been produced and shared regionally. YHORG was attended on the 8/9/22. The board has been asked to progress this piece of work as a region. Region have asked to see the document so that they can agree and implement it at their local level.

AFI: The service should make sure it participates in a programme of cross-border exercises, sharing the learning from these exercises.

Action update: This action has been completed.

An exercise plan and schedules are in place. Limited exercising due to COVID-19 restrictions. The Exercise Planning Group have revised and released the policy. The 2021 plan expresses to district that joint exercising must be done and the means of creating an exercise and reporting will capture where this occurs. We have evidence of this from this year but due to COVID a number of exercises have understandably been postponed or some have been delivered as a table top exercise. The exercise plan is available on Resilience Direct (RD) and Station District plans.

Efficiency:

AFI: The service should ensure it effectively monitors, reviews and evaluates the benefits and outcomes of any collaboration.

Action update: This action has been completed.

RSM internal 'collaboration and benefits realisation' audit report produced and finalised. Internal audit rated SYFR collaboration and benefits at the highest assurance possible - 'substantial assurance'. The following is the internal audit's summary opinion: "Taking account of the issues identified, the Board can take substantial assurance that the controls upon which the organisation relies to manage the identified risk are suitably designed, consistently applied and operating effectively".

AFI: The service should ensure it has sufficiently robust plans in place which consider the medium-term financial challenges beyond 2020 so it can prepare to secure the right level of savings.

Action update: This action has been completed.

The revised and approved Medium Term Financial Plan (MTFP) clearly articulates the savings and the plans, along with the 'what ifs' should funding not be secured in line with expectations.

AFI: The service should assure itself it fully exploits external funding opportunities and options for generating income.

Action update: This action has been completed.

The revised and approved MTFP clearly articulates savings and plans through scenario planning. Grants are being utilised where available and there is a view to apply for funding through the decarbonisation fund. Due to COVID, income generation is limited. We do have special services and generate income through hydrants, secondments etc. but this is limited.

People:

AFI: The service should assure itself that staff understand how to access wellbeing support.

Action update: This action has been completed.

Health and wellbeing support need reviewed using various intelligence sources e.g. health and wellbeing survey, staff pulse survey. Partnered with the British Red Cross Psycho-Social Support Team to develop a training programme to enable in-house Critical Incident Wellbeing (CIW). Supporters to deliver peer-to-peer support to personnel following critical incidents. On station learning developed by CIW Supporters and issued to station Oct 2020.

AFI: The service needs to ensure that staff involved in protracted operational incidents have adequate welfare facilities.

Action update: This action has been completed.

A review of the welfare offer to SYFR personnel at incidents has been carried out. Operational Information Note (OIN) 'Managing Fatigue and Welfare at Operational Incidents' developed. NEW joint SYFR/British Red Cross welfare vehicle procured. Welfare unit (4-5 persons) (joint SYP & SYFR) will complement / back-up the new SYFR/BRC vehicle.

Group Managers have been issued with SYFR credit cards meaning they are able to source / fund food and refreshments at protracted incidents as appropriate. Since issue they have been used on a number of occasions successfully. Larger welfare units and providers have been identified should additional welfare capability be required.

Getting the right people with the right skills

AFI: The service should ensure its workforce plan addresses any gaps in capability which affect the availability of fire engines.

Action update: This action has been completed.

The service has now embedded a Workforce Planning Policy that sets out governance of workforce planning and the process for engaging managers to support this. This culminates in an annual workforce plan. The governance of workforce planning is via the Workforce Planning Board, chaired by the DCFO and attended by senior managers and all representative bodies. This is underpinned by a workforce planning group chaired by the Head of HR and attended by senior managers and HR Business Partners. The workforce planning annual process commences in Spring each year when managers are asked to review and refresh their workforce planning arrangements (included skills gaps and succession planning proposals) and to submit these to HR.

AFI: The service needs to assure itself that all staff are appropriately trained for their role. It needs to ensure all staff keep their skills up to date and have a consistent method of recording when they have received training.

Action update: This action is behind schedule. Progress so far:

This action is 40% complete.

A Maintenance of Competence (MoC) programme has started. This includes all MoCs, but has started with middle managers as a priority. SYFR is reviewing the way in which skills and competence are recorded.

In relation to the provision of staff on On-call stations lacking specific skills resulting in poor availability, work on this project is ongoing. Skills gaps have been identified and individuals have been booked onto or identified for future development to meet these skills gaps (e.g. Incident Command and Driver training qualifications).

SYFR is looking to review how processes work for corporate staff and this will link to the current Training Needs Analysis in place for all roles and Training and Development Framework, in addition to the newly developed frameworks of competence for non-operational employees.

There is an increased focus on this work area with the Maintenance of Competence (MOC) project, Core Learning Pathways, NFCC Leadership Framework, Fit for the Future and other identified requirements. This will be supported by the additional resource within workforce development.

Training Frameworks and associated Action Plans have been approved at People Board.

AFI: To identify and tackle barriers to equality of opportunity, and make its workforce more representative, the service should ensure the value of positive action is well-understood by staff.

Action update: This action is behind schedule. Progress so far:

This action is 75% complete.

Work is progressing in this area to further develop understanding. SYFR have published a video (and shared this nationally) around Positive Action to increase understanding. Final face to face courses are being progressed and additional training has been developed with a focus on micro aggressions.

Reminders have been sent to anyone who has not completed the Equality, Diversity and Inclusion (ED&I) Essentials and Managing ED&I LearnPro modules. Currently, 90% of staff have completed the ED&I Essentials Learnpro and 51% have completed the Managing ED&I Learnpro.

We continue to develop work around attendance at careers events and review findings from these events to determine relevant materials to target underrepresented groups.

AFI: The service should identify and implement ways to improve staff confidence in the grievance process.

Action update: This action has been completed.

If the timescales of the Grievance process are not met this is usually because the case has been more complex or a mutual extension to the timescale have been agreed. Managers have been reminded to keep to the timescales and offered support where required. The culture of the organisation is changing and improvements are being made in relationships between managers and staff. The Service will continue to be open and transparent in its communications about how decisions are arrived at. Although grievances are confidential, where possible and with agreement, improvements that have arisen as a result of grievances will be shared. The role of the First Contact Advisors (FCA) is being reviewed and refreshed. Once this is confirmed, details of the scheme and the contact details of the FCA's will be communicated throughout the Service.

AFI: The service should put in place an open and fair process to identify, develop and support high-potential staff and aspiring leaders.

Action update: This action is on schedule. Progress so far:

This action is 40% complete.

As part of the Workforce Planning and the Personal Review processes, high-potential and aspiring leaders can be identified and supported through coaching, mentoring and learning and development opportunities. The service aims to implement high potential and aspiring leader's programmes in the future. This work is still ongoing and will link into the NFCC guidance around Fast Track Direct Entry and Talent Management.

Amendments have been made to how we offer Multi Agency Gold Incident Command (MAGIC). This is a requirement for Group Managers and above.

The Executive Leadership Programme is now open to support staff members and Area Managers and Temporary Area Managers.

An initial scoping meeting has been held to look at how we can offer MBA / Level 7 courses.

Leadership is one of the priorities in this year's Annual Plan which gives us a focus on this area. We have scoped out our new programme on Leadership and how its supports the People Pillar. Two projects that support the Leadership Programme (Leadership training delivery and development programmes) have also been scoped out.