

Areas for Improvement (AFI) from the 2019 HMICFRS inspection report for SYFR – Action updates as of December 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.

Last update at Service Improvement Board: 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.

Please note this is an AFI in our HMICFRS Inspection report published on 20 January 2023. We are currently reviewing this AFI and the actions required to make further improvements in this area.

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

Action update: This action has been completed.

Last update at Service Improvement Board: 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.

Last update at Service Improvement Board: 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.

Last update at Service Improvement Board: 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 in draft format. This was taken to People Board for formal sign off 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.

Please note that an AFI relating to NOG is in our HMICFRS Inspection report published on 20 January 2023. We are currently reviewing this AFI and the actions required to make further improvements in this area.

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.

Last update at Service Improvement Board: 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.

Please note that an AFI relating to operational learning is in our HMICFRS Inspection report published on 20 January 2023. We are currently reviewing this AFI and the actions required to make further improvements in this area.

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 85% 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. We are waiting for replies from the region in regards to sharing over the border risk information and the plan created earlier in the year.

ORI's in general are going to be reviewed in 2023 and over-the-border risk information will form part of that review.

The ORI review/revisit policy will not be released until early 2023. The review/revisit schedule will be launched the same time as the station plans (April 2023). This is so that the review/revisits can be factored in to the operational crew capacity.

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.

Last update at Service Improvement Board: 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.

Please note that an AFI relating to cross-border exercises is in our HMICFRS Inspection report published on 20 January 2023. We are currently reviewing this AFI and the actions required to make further improvements in this area.

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.

Last update at Service Improvement Board: 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.

Last update at Service Improvement Board: 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.

Last update at Service Improvement Board: 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.

Last update at Service Improvement Board: 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.

Last update at Service Improvement Board: A review of the welfare offer to SYFR personnel at incidents has been carried out. Operational Information Note (OIN) 'Managing Fatigue & 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.

Last update at Service Improvement Board: 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.

Please note this is an AFI in our HMICFRS Inspection report published on 20 January 2023. We are currently reviewing this AFI and the actions required to make further improvements in this area.

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.

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. It is a priority in our annual plan 2022/23 and is a proposed priority in the next Service Plan.

A Leadership Priority Programme is being established, which will develop the Service's first Talent Management strategy and will oversee the development of a SYFR leadership development programme and a range of projects that will support this. The programme will review and enhance our coaching and mentoring offer and link with regional and national initiatives to extend opportunities to learn and develop.

The Training Needs Analysis for each role is being assessed to ensure it matches the relevant training framework and action plan.

Further training frameworks and associated action plans have been approved at the People Board.

We have significantly improved on call availability and are working on filling skills gaps through recruitment.

We continue to work with MOC and Mako projects, along with the On Call Programme, all of which will significantly fulfil the requirements of this AFI.

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.

Equality Diversity and Inclusion (EDI) conversations are still taking place for on-call, control and corporate staff.

Dates have been confirmed in the draft Positive Action plan Jan – Dec 23 for Have a Go Days, Female Fitness Sessions and Female Fitness Emails and Have a Chat Sessions.

Attendance at a number of school careers events by Community Safety, Operational Crews and EDI Team.

We have booked additional external EDI training sessions for on-call and corporate staff. Prepared analysis to show numbers / percentages for workgroups in/out of ticket.

We have reviewed the mandatory EDI LearnPro modules.

We have started to conduct a gap analysis against the Fit for Future improvement objectives related to ED&I.

We continue to develop work around attendance at careers events and carry out analysis on resources needed for careers and other positive action activities.

We will carry out consultation on the Positive Action Toolkit.

Please note that an AFI relating to equality of opportunity is in our HMICFRS Inspection report published on 20 January 2023. We are currently reviewing this AFI and the actions required to make further improvements in this area.

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

Action update: This action has been completed.

Last update at Service Improvement Board: 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.

Please note that an AFI relating to grievance procedures is in our HMICFRS Inspection report published on 20 January 2023. We are currently reviewing this AFI and the actions required to make further improvements in this area.

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.

We have updated the Personal Review (PR) process to enhance discussions and the information held. We will finalise these improvements to the PR system for launch in 2023.

We have a clear process for applications for the Executive Leadership Programme (ELP) gateway and for successful applicants to progress on to ELP. We now have a clear pathway for operational and corporate managers choosing to use this development opportunity.

We are meeting with Sheffield University to understand other pathways available for level 7 training.

The Project Initiation Document was approved for the Leadership Priority Programme at the People Board meeting on 6/12/22. Work on the programme and associated projects has begun and will now move at pace.

Leadership is one of the proposed priorities in this year's Annual Plan which will give us a focus on this area. It will also be a priority in the new Service Plan.

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