

AFI Progress Report

Areas for Improvement (AFI) from the 2021/22 His Majesty's Inspectorate for Constabulary and Fire and Rescue Services (HMICFRS) inspection report for South Yorkshire Fire and Rescue (SYFR) – Action updates as of December 2023

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

Action update: This action is on schedule. Completion date revised to 31 March 2024.

Progress so far: This action is 90% complete.

Ensuring the information is up-to-date remains a challenge due to the high number of risk records. Work has started to implement a Site Specific Risk Information (SSRI) Review and Revisit Policy, whereby Emergency Response will review all medium risk properties via telephone and identify those which require a revisit due to the information held being out of date. Expected roll out of this process will be April 2024.

By virtue of the inspection frequency, high and very high risk properties will be reviewed annually.

Quality Assurance of risk information will be undertaken more frequently from April 2024 with first line assurance undertaken by the referenced Watch and second line assurance undertaken by Station Managers.

Access to both SSRI and Temporary risk information is embedded and works, with access gained by crews through the mobile data terminals on fire appliances, and other staff have the ability to view through desktop systems.

With regard to sharing our risk information with neighbouring Services, the process of identifying, copying and emailing both SSRI and TETRA risk information has been agreed and tested between regional/neighbouring brigades and works. The final task is to ensure that the risk information can be received by SYFR operational crews via an email linked to the appliance call-sign. A solution has been proposed by ICT and is being tested by Control and Central station. Once confirmed as working, it can be rolled out to all appliances. Other work area on this is the development of a data sharing Memorandum of Understanding. West Yorkshire Fire and Rescue have agreed to complete this if confirmed as required. Work to satisfy this AFI is expected to be complete by the end of Q1 2024.

AFI: The Service should make sure it puts in place measures so it can catch up on the home fire safety checks (HSCs) identified and awaiting a visit that have built up during the pandemic.

Action update: This action is on schedule. Completion date revised to 31 March 2024.

Progress so far: This action is 80% complete.

Community Safety have reviewed the 'backlog' and have redefined into more manageable categories, identifying those which really are overdue.

Work is progressing towards having a 'working' number of HSCs. Discussions need to take place on what is the acceptable margin for HSC figures. The rationale for this number will be clear and evidence will be available for HMICFRS inspection process. A meeting is planned for early Jan 2024 to discuss working number of HSCs for the organisation. Five years of historical data is to be utilised to inform this number.

AFI: The Service should make sure it quality assures its prevention activity, so staff carry out home fire safety checks to an appropriate standard.

Action update: This action is on schedule. Completion date revised to 31 March 2024.

Progress so far: This action is 50% complete.

Some quality assurance (QA) work is taking place and an interim QA strategy is being implemented and improvements are being made as a result of this.

QA is being re-introduced by the Community Safety (CS) Watch Managers in March 2024. A service improvement bid for a training/assurance officer is being prepared to support the standardisation of Home Fire Safety Visit (HFSV) training and delivery. This role will be responsible for the quality assurance of operational Watch/ Crew Managers. The Watch/ Crew Managers will then QA their teams as per the reviewed HFSV policy.

The Education advocate is conducting QA on all education delivery and crucial crew, the CS coordinator and High Risk Coordinators will QA the Fire Community Safety Officers HFSV delivery.

Some peer QA work has taken place with West Yorkshire. We are looking at how we can further gather end-user feedback. National Fire Chiefs' Council (NFCC) have advised that 10% of visits should be quality assured.

We want to improve the recording of our QA work and are re-introducing the Community Safety Database.

A Station Manager will join the Prevention Department whose work will include supporting QA improvements.

AFI: The Service should assure itself that its risk-based audit programme (RBAP) prioritises the highest risks and includes proportionate activity to reduce risk.

Action update: This action is on schedule. Completion date revised to 29 March 2024.

Progress so far: This action is 90% complete.

Business Fire Safety (BFS) continue to review how the RBAP is generated to ensure highest risk premises are audited and targets are set and achieved. This includes discussions with other fire and rescue service to understand the methodology used for their RBAP.

A new draft document from the NFCC looks at risk and the revisit rate. BFS will be reviewing the RBAP in line with the new methodology. NFCC will also be looking at PORIS methodology in the near future.

A decision was taken by the Service Improvement Board not to complete this action and to keep it open as there is still some work to be done.

AFI: The Service should make sure it has an effective quality assurance process, so staff carry out audits to an appropriate standard.

Action update: This action is on schedule. Completion date revised to 31 March 2024

Progress so far: This action is 60% complete.

A QA framework is being produced that will outline the current QA activities and timeframes for assessment of staff.

Key policies and procedures are now published on Learnpro. Staff are required to read these documents and indicate they have understood them.

A Competency Assessment High Risk Premises document has been drafted, and this will be used by Managers to assess the competency of BFS officer. The competency assessments outcomes have been aligned to meeting the practical outcomes of the National Occupational Standards (NOS), SFJ Awards qualification competency frameworks and NFCC Competency Frameworks.

Benchmarking documents are also being drafted which outline how each task should be completed and expectations, therefore they can be used to QA work of all staff.

BFS Management team have a monthly governance meeting to look at performance against both Key Performance Indicators (KPIs) and Local Performance Indicators (LPIs). The BFS Manager will report to the Service Delivery Board quarterly on performance of team against these performance indicators, to allow for additional quality assurance and scrutiny.

AFI: The Service should make sure it works with local businesses and large organisations to share information and expectations on compliance with fire safety regulations.

Action update: This action is on schedule. Completion date revised to 26 April 2024.

Progress so far: This action is 70% complete.

Business engagement activities are underway and a spreadsheet detailing the business engagement activities is kept up to date. We are waiting on training to be rolled out to BFS staff so they can carry out engagement work with lower risk premises.

The Business Engagement Policy has now been out for consultation to the BFS team and comments received. This will now be reviewed.

A meeting has been arranged with Hampshire Fire and Rescue Service to explore Primary Authority partnerships. This will then be fed back to the BFS governance meeting.

Six Business Safety Advisers have now been recruited and started on 2 October 2023. They are on a development pathway to Level 4 Diploma.

AFI: The Service should improve the availability of its on-call crewed fire engines to respond to incidents in line with its community risk management plan.

Action update: This action is on schedule. Completion date 27 December 2024.

Progress so far: This action is 60% complete.

We have taken on 12 new starters in September 2023 who have now completed their safety critical training and riding appliances. Pending medicals, we will have another 12 new recruits starting in March 2024.

Availability has increased across the Service with Askern and Stocksbridge being the best performers. We are expecting another increase in availability in 2024 across all stations of around 10%. Following the 12 new starters in March 2024 the Service will be close to capacity in terms of establishment. The next focus will be to ensure that we have correctly skilled staff such as Breathing Apparatus team leaders, Incident Commanders and Drivers. The Service is currently focusing on identifying future leaders and drivers to provide early development opportunities. There are over 30 On-Call candidates currently progressing with their driver training.

There are a number of barriers to improving On-Call availability. Further discussions with representative bodies will be required to overcome these.

During 2024, we will undertake a full review of the Community Risk Management Plan (CRMP). As part of this we will consider how we crew our fire stations (duty systems) and increased use of on-call firefighters.

AFI: The Service should ensure it understands everything it needs to do to adopt national operational guidance (NOG) and it should ensure its plan is resourced to do so.

Action update: This AFI is 'Actioned'

Progress so far: This action is 100% complete.

Following the People and Culture Board meeting on 13 September 2023, the NOG Implementation Closedown Report was submitted for approval. This report was formally approved by the Board, and subsequently signed by the Chair - Sue Kelsey, Director of People and Culture. The closedown report was also accepted at the Service Improvement Board on 27 September 2023.

Additionally, to ensure SYFR is progressing with the implementation of NOG, the NFCC Implementation Support Team has undertaken a piece of assurance work. The team found that a comprehensive implementation plan had been produced, with sufficient resources from relevant departments allocated to the progression of the project. They also concluded

it was clear that there was a solid understanding of the aims, objectives and scope of the project as well as plans in place to mitigate many of the barriers experienced by other Services previously.

AFI: The Service should ensure it has an effective process in place to obtain operational learning so as to improve its operational response.

Action update: This action is on schedule. Completion date 29 March 2024.

Progress so far: This action is 95% complete.

Work has been undertaken in this reporting period to change the governance arrangements and process for how learning will be obtained, evaluated and disseminated throughout the organisation. This process aligns to the NFCC Good practice Guide for operational learning and is being tracked via the Operational Learning Fire Standard implementation tool.

The operational learning framework is out for consultation and once agreed will form the road map for Operational Learning.

It is envisaged that all the work to satisfy this AFI and the wider operational learning fire standard will be completed by the end of Q1 2024.

Additionally, the Organisational Learning Professional Fire Standard is being reviewed.

AFI: The Service should arrange a programme of cross-border exercises, sharing learning from these exercises.

Action update: This action is on schedule. Completion date is 01 December 2023 (This will be reviewed at the next Service Improvement Board).

Progress so far: This action is 75% complete.

Due to the HMICFRS requesting further guarantees on progress made regarding the Grenfell recommendations, we will be implementing four training events to test FSG (on mass calls), and the link between Fire Control and the fire ground, as well as evacuation protocols. January 2024 will see the findings of the four exercises being played out in a service level exercise, which will link into the recommendations from the enquiry.

An exercise programme for 2024-25 has been developed and includes cross-border exercises. The exercise planning group meet regularly to review exercises.

We are working hard to improve the recording of exercises and plan to use the Mako system in the future.

AFI: The Service needs to make sure that it uses its resources across prevention protection and response functions in a more joined up way to meet the priorities in its community risk management plan (CRMP).

Action update: This action is on schedule. Completion date is 29 March 2024.

Progress so far: This action is 50% complete.

Much of the work we deliver for local people is outlined in our Community Risk Management Plan (CRMP). The CRMP explains how we allocate our resources to meet local risk and achieve our statutory objectives. We are undergoing a full review of the CRMP in 2024 and will assess the new CRMP by how it improves our productivity performance.

As part of the CRMP review we will consider:

- Matching our response resources to the risks we identify through our risk modelling
- How we crew our fire stations (duty systems)
- When we crew our fire stations (peak period crewing)
- The number of firefighters we crew a fire engine with
- Increased use of 'on-call firefighters'

We will also clarify and restate our objectives and what work we consider productive and will score as productive in our productivity reporting.

With regard to the 2021-24 CRMP, we direct our prevention, protection and response resources to provide the greatest possible return on investment by reducing the overall impact of the foreseeable risks we face. In summary, we:

- Use evidence, insight and professional experience to list all the risks that we face
- Assess how likely each risk is to threaten life, property and the environment
- Model the level of risk in small geographical areas to create a 'risk profile'
- Use this information to understand where to base our people and resources.

The Response, Prevention, Protection and Resilience strategies have been produced and are clearly aligned to the CRMP.

The Medium Term Financial Plan is also clearly aligned to the CRMP.

We also publish an Annual Plan that describes our priorities for the next 12 months. FRA members receive a progress report against this plan twice a year.

A review of performance data and reporting has taken place, with an options report presented to the Senior Leadership Team (SLT). A new business risk directory from Experian will support the work of BFS and SSRIs.

AFI: The Service should have effective measures in place to assure itself that its workforce is productive and their time is used as efficiently and effectively as possible to meet the priorities in its risk management plan.

Action update: This action is on schedule. Completion date 01 August 2024.

Progress so far: This action is 50% complete.

Annual targets for all Emergency Response (ER) Stations have now been established. This is to enable greater flexibility for staff in reaching the required activity levels, whilst being able to undertake additional work such as positive action, seasonal risk reduction such as water and wildfires etc.

A review of performance data and reporting has taken place, with an options report presented to SLT. It is anticipated that improving access to performance data and information will improve productivity.

The Community Activity Database will be re-introduced to enable crews to be more proactive in the communities and record the work they are delivering more effectively.

To increase awareness of the work being undertaken by crews, an annual communication piece will be produced to show the levels of work carried out, good practice and areas for improvement. This will allow the Service to compare productivity levels year on year, and provide additional evidence to inform performance clinics within the ER Function.

Performance clinics now come under the remit of Head of Service Delivery, which he will be reviewing and updating the Terms of Reference. This will give greater scrutiny to each section manager and allow other function heads/principle officers to review the work being undertaken across the Service. Once the performance clinics have taken place formal recording will take place with objectives set and reviewed as required.

AFI: The Service needs to make sure that its Fleet Strategy is regularly reviewed and evaluated to maximise potential efficiencies.

Action update: This AFI has been marked as 'actioned'

Progress so far: This action is 100% complete.

The Joint Fleet Strategy has been reviewed and brought up to date for the period 2024 to 2029. This builds on the initial Joint Fleet Strategy that was put in place for the collaborative department in 2018.

Significant progress has been made on the Vehicle Replacement Strategy for SYFR, with eight new appliances going in to service during 2023. Another twenty new appliances are on order, with four due to be delivered in April 2024 and then four per financial year from 2025 to 2028/29. As part of this strategy eight appliances will be retained as spares, to add resilience to the fleet and facilitate timely repairs and maintenance, whilst maintaining pumps on the run.

The pipeline for replacement of Officer cars is also now embedded and links to the strategy around decarbonisation and our plan to electrify the fleet. This includes work with our partners both internally and externally.

Vehicle Telematics has now been installed in all SYFR Vehicles and gives a picture of how the fleet is currently utilised. This has enabled the removal of paper vehicle log books and assists with identifying drivers and reviewing incidents quickly. The next step will be to undertake a full review of the fleet using the data that is available to us.

The Fleet Management System has been upgraded and work is underway to ensure the systems are used to full effect, using the same processes and procedures. This will enable Key Performance Indicators to be monitored in real-time. This will be linked to Power BI in due course.

The introduction of a new Fuel Management System has also brought about efficiencies and more accurate reporting.

The Strategic Fleet Committee goes from strength to strength, ensuring we have the appropriate governance arrangements in place to manage the fleet effectively and to meet the needs of the organisation. This brings together all elements of the fleet strategy.

AFI: The Service should make sure staff have access to services to support both their mental and physical health via an effective occupational health (OH) service.

Action update: This action is on schedule. Completion date revised to 31 March 2024.

Progress so far: This action is 50% complete.

Significant improvements have now been made to the OH Octopus system with all referrals, clinical notes and reports being stored on the system and less reliance on Dolphin which was primarily a HR system. This has improved the quality and consistency of management reports, enabled the introduction of statistical analysis and improved security and confidentiality.

OH are now working with ICT on the second phase of these improvements which will focus on health surveillance and statutory medicals and the development of a dashboard which will provide quick access to data. This will include the finer detail for all staff such as those on modified duties, sick leave, and those 'in ticket' for Asbestos, LGV Driving and three yearly medicals.

Policies continue to be updated and this will be the focus for the New Year, including the review of the wellbeing strategy and the introduction of voluntary health surveillance for corporate employees.

Discussions on improvements to Officers Critical Incident Wellbeing Support are ongoing and in the meantime reminders are being sent in relation to the manual system in place and the importance of this will be re-iterated at the next middle managers meeting. All attendance at critical incidents is now recorded so that we are aware of individuals with high exposure rates and are then able to ensure they are offered further support/ signposting should they require it.

OH statistics are being presented at both the Health, Safety and Wellbeing Committee and the People and Culture Board. Improvements in this area will continue as the changes to the Octopus system progress.

The Fitness Advisor has embedded the Sports Therapy side of his role and has seen positive numbers utilise this practice. This will reduce external physiotherapy costs and reduce the waiting time for treatment which in turn should facilitate an earlier return to work for those absent or on modified duties. Statistics in this area will be available once sufficient data is accessible.

There is now stability in the OH and Wellbeing teams with all roles now being permanently filled for a number of months. The focus will now be on retention and improving services.

AFI: The Service should make sure that it has effective absence/ attendance procedures in place.

Action update: This action is on schedule. Completion date 29 March 2024.

Progress so far: This action is 70% complete.

Completion time and rates for return to work processes have continued to increase and outstanding numbers have more than halved, and are continuing to remain at a consistently lower level.

Absence management meetings are continuing along with case conferences to facilitate a return to work as early as possible.

There has been a significant improvement in the turnaround of OH reports which allows the process to be followed in a timely manner.

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

Action update: This action is behind schedule. Revised completion date 04 December 2023. (This will be reviewed at the next Service Improvement Board).

Progress so far: This action is 50% complete.

Work is ongoing to update our processes for workforce and succession planning, including an automated systems for recording and monitoring. This will allow for the identification of and response to skills gaps that may arise.

Work continuing on this area as per previous update below.

Drivers:

Driver data now created and detailed pathway data is nearing fruition to indicate the status of individuals on their Driver pathway journey. Accurate reporting is now available to highlight gaps and focus investment and training where most urgent in order to deliver improved availability. On Call have already had a refocus and priority provided by the Training and Development Centre.

Supervisory Level Staff (OICs) and other management levels:

Changes to the 2023 Supervisory Promotion Boards have resulted in some positive outcomes in relation to promotion applications and numbers with further, linked changes proposed for 2024 including external applications at all levels. Reconsideration is also being given to changes to the Transfers in Process, Migration routes from On Call and pushing for both informal/current system expedited development and fast track options. Fast track options have been proposed to SLT.

Training Frameworks and Plans:

Departmental Training Frameworks and Plans continue to be developed and finalised via the Training Liaison Group and Workforce Development Committee. Further work will be undertaken around the officer attribute frameworks (notwithstanding the future work of the Specialisms Review Programme).

ICT Systems Recording:

Mako has progressed further and is ongoing development in relation the clarity, accessibility and accuracy of competence data and information in a dashboard and reportable format.

Role Profiles:

Discussion around role profiles is ongoing and will be required in order to feed into further Maintenance of Competence and Development Programme work as part of the Leadership Programme projects.

Competence Frameworks:

New or reviewed Competence Frameworks for all roles (non operational) will be considered later due to capacity.

AFI: The Service should address the high number of staff in temporary promotion positions.

Action update: This action is on schedule. Completion date 31 December 2023. (This will be reviewed at the next Service Improvement Board).

Progress so far: This action is 40% complete.

Work is ongoing and Passport developments will look to encourage even higher numbers to apply for promotional processes with the Station Manager (SM) Pilot process having encouraged a strong number of applications for 2023.

Work is ongoing on reporting to provide a live picture of reasons for each Temporary Promotion (whilst many are Establishment Vacancies, others are also caused by the knock on impact of Supernumerary posts or other factors). Promotion policy changes are under consideration. The revised policy is seeking to remove further barriers and streamline and improve development opportunities. Improvements have been seen from the 2023 process alterations, which will be reviewed and adapted to feed into the new policy.

AFI: The Service should identify and overcome barriers to equal opportunity, so that its workforce better represents its community.

Action update: This action is on schedule. Revised completion date 29 March 2024.

Progress so far: This action is 80% complete.

Equality, Diversity and Inclusion (EDI) training delivered by the new provider has started. 17 sessions booked within the current financial year and additional sessions (April 24 - July 24, October 24 - March 25 and April 25 - March 26.)

Completion rates of EDI training are regularly monitored and will be reported as part of our current Local Performance Indicators.

Work is underway to add the additional voluntary modules into Learn Pro and communications will be sent out once these are available.

The Positive Action Toolkit and Guidance will be issued soon with detailed information on how individuals can get involved in this work.

The EDI Strategy for 2024-26 is in draft and an associated EDI plan is being developed.

The question in the Pulse Survey around EDI will be used again in 2024 to allow a measure of levels of understanding around EDI.

AFI: The Service should make sure that it has effective grievance procedures. It should identify and implement ways to improve staff confidence in the grievance process.

Action update: This action is on schedule. Completion date revised to 29 March 2024.

Progress so far: This action is 85% complete.

Grievance training continues to be delivered to new line managers with reminders of the requirement to adhere to timescales as much as possible.

The grievance survey has now launched and is being set out. Part 1 has been sent out to four individuals with part 2 to be sent after the grievance has been concluded. Awaiting results so any immediate learning can be obtained, with a longer term view to be taken once further results are available.

Casework debrief forms continue to be sent to managers who have dealt with grievance cases and returned to People Relations Manager to progress any areas for development in the process.

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. Completion date revised to 30 September 2024.

Progress so far: This action is 50% complete.

Meeting held with SYFR SLT around Fast Track/High Potential scheme options. Initial decisions made in principle on direction of travel.

Confirmation of numbers on the Executive Leadership Programme (offered to Group Manager and above and corporate equivalent roles). 1 x cohort 19 started November 2023, 2 x cohort 20 starting July 2024, 1 x cohort 21 starting November 2024.

A review of the Station Manager promotion process has taken place and will be incorporated into the review of the Progression Policy and Procedure.