LEICESTERSHIRE
FIRE and RESCUE SERVICE

HMICFRS Improvement Plan

Progress Update - September 2021

SAFER PEOPLE SAFER PLACES

Version 4.0

HMICFRS Improvement Plan

Effectiveness: Preventing fires and other risks

Area for improvement:	Background information:
Ref No. E1 'The Service should make sure it appropriately trains staff to undertake prevention activity'	The report identified that only our Community Educators are trained to carry out 'Safe and Well' checks in people's homes. These checks include social welfare, wellbeing and advice on security, as well as fire safety in the home. HMICFRS would like all staff who carry out Home Safety Checks to now be trained in, and deliver 'Safe & Well' checks.

Ref:	Action:	Achievements:
E1.1	There will be a review of the Home Safety Check (HSC) policy and associated procedures.	• Community Safety Policy published • Vulnerable person module established • HSC procedure ready for approval by Representative Bodies
E1.2	'Maximising capacity' training has taken place with the majority of crews. However, a continuing training programme to ensure all staff have the skills to deliver 'Safe and Well' Home Safety Checks is needed. All relevant staff will be trained by the end of 2019.	• Max Cap training delivered to all Wholetime and On Call firefighters • Training presentation delivered to non station staff
E1.3	The database that we use to prioritise our HSCs will be reviewed to ensure that it is 'fit for purpose' for the Safe and Well visits. Once reviewed, any changes will be adopted and appropriate training will be given. It is expected that this work will be completed by November 2019.	• Principles to prioritise HSC agreed • Revised HSC questionnaire established
E1.4	An assurance process will be put in place that demonstrates continued and consistent outcomes are maintained by all staff who deliver HSCs.	• Quality Assurance (QA) form created supporting Community Educators to assess crews • Commenced QA of station based HSCs • Plan in place to QA rest of station based staff
E1.5	A review of the approach of Disclosure and Barring Service (DBS) checks on our staff will ensure that our Service, staff members and vulnerable people are offered an appropriate level of protection.	• New employees are subject to DBS checks • Staff working with vulnerable people are subject to enhanced checks • NFCC guidance being considered

Strategic Lead: Area Manager Community Risk

HMICFRS Improvement Plan

Effectiveness: Preventing fires and other risks

Area for improvement:	Background information:
Ref No. E2 'The Service should better evaluate its prevention work, so it has a clearer understanding of the benefits'	The report from HMICFRS recognises the valuable prevention work that we carry out. They mention many prevention activities that our staff are involved with on a regular basis. These include initiatives like Fatal 4, Biker Down, and Fire-Beat and also includes the work we do with our diverse communities. They would like us to evaluate our prevention work more, to help us to understand how effective these activities are.

Ref	Action:	Achievements:
E2.1	A team will be established to identify a preferred option for a tool that allows us to evaluate our Community Safety activities. This will be a survey tool that allows the Service to monitor public opinion at all community events and Home Safety Checks. Staff will be trained to use this tool and it will be embedded in all Community Safety activities.	• Survey project complete • Evaluation work commenced using identified survey tool
E2.2	The Service will review how it evaluates its Community Safety activities by looking at behaviour change, targeting risk and service user satisfaction. This information will be used for future plans.	• Survey now widely used by all staff carrying out HSCs. • Now looking at how the results will influence department plans • Evaluation of Community Safety activities is now part of a project

Strategic Lead: Area Manager Community Risk

HMICFRS Improvement Plan

Effectiveness: Protecting the public through fire regulation		

Area for improvement:	Background information:	
Ref No. E3 'The Service should ensure it allocates enough resources to a prioritised and risk based inspection programme'	HMICFRS recognised that we take a targeted, risk based approach to inspect high risk premises within the Service area. Examples of high risk premises includes sleeping risks such as care homes, hotels and high rise flats. The Service is not on schedule to meet all those premises it has targeted. HMICFRS have asked that we ensure we allocate resources to address this.	

Ref	Action:	Achievements:
E3.1	Policies and procedures affecting this area will be reviewed and updated. This includes such items as the Fire Safety Audit procedure and the Enforcement procedure.	• Fire Protection Policy published • Work ongoing on procedures
E3.2	Concluding in October 2019 there will be a review of work activities of the Fire Protection (FP) team to ensure they are working effectively and efficiently. This will include a review of how we manage: • Building regulations • Fire Safety audits • Primary Authority scheme • Day duty officer roles Following evaluation, any changes will be embedded within the FP department.	• Review of Fire Protection work activities complete • Identified improvements established
E3.3	There will be a review of the size of the Fire Protection team with a clear rationale on what resources are required.	▫ Risk and Resource Methodology produced and agreed by senior management
E3.4	We will develop an approach to train relevant staff outside of the Fire Protection department. This will allow us to maintain an appropriate risk based inspection programme and this work will also support the departmental succession plan.	• All operational staff have received Fire Protection input • Level 3 Fire Protection course being delivered to station based staff
Strategic Lead: Area Manager Community Risk		

HMICFRS Improvement Plan

Effectiveness: Protecting the public through fire regulation

Area for improvement:	Background information:
Ref No. E4 'The Service should ensure its staff work with local businesses to share information and expectations on compliance with fire safety regulations'	At present, the Service works with local businesses and organisations to help educate in fire regulations compliance. It does this through, for example, the Better Business for All, fire safety education following Grenfell and the Leicester and Leicestershire Enterprise Partnership. The report states that HMICFRS would like us to extend our work in this area, taking a more proactive approach to educate businesses.

Ref	Action:	Achievements:
E4.1	We will develop an engagement approach to interact with businesses. This approach will consider: • Planned events calendar • Business seminars • Social media interaction which will include promotion of fire safety along with encouraging economic growth	☐ Success of Fire Protection social media output examined using Facebook and twitter analytics
E4.2	We will look at 'maximising capacity' with specific fire crews, training them to enable them to give advice on compliance with appropriate fire safety regulations for businesses.	• Operational staff have received Fire Protection input • Level 3 Fire Protection course being delivered to station based staff

Strategic Lead: Area Manager Community Risk

HMICFRS Improvement Plan

Effectiveness: Protecting the public through fire regulation

Area for improvement:	Background information:

Ref No. E5	The report from HMICFRS recognises the burden on the Service caused by false alarms. Currently, the Service has seen a 48% reduction of false alarms since 2011/12 which is the third best percentage reduction in the country. The report has asked that we continue to try to identify ways to further challenge and reduce false alarms.
'The Service should ensure it has an effective system in place to address repeat false alarms'	

Ref	Action:	Achievements:
E5.1	The procedure that is currently in place for addressing repeat false alarms will be reviewed to ensure that they are fit for purpose. This will indicate areas of responsibility for identifying repeat offenders and monitoring them. It will also ensure that appropriate actions to tackle repeat 'offenders' are delegated accordingly to departments (Operational Risk, Response).	• Review shows the effectiveness of call challenging by Fire Control • Process flow now in place to allow escalation of response to repeat false alarms • Repeat false alarms are monitored and premises reported to District Managers
E5.2	Response teams (fire crews) will also receive training which will allow them to give suitable fire safety advice to help reduce unwanted fire signals.	• Operational staff have received Fire Protection input • Operational staff are being trained in Level 3 Fire Protection • Repeat false alarms now feature on District Plans with targets for reduction
Strategic Lead: Area Manager Community Risk		

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HMICFRS Improvement Plan

Effectiveness: Responding to fires and other emergencies

Area for improvement:	Background information:
Ref No. E6 'The Service should have a clear policy around the deployment of its Tactical Response Vehicles'	The report recognised that the Service has new Tactical Response Vehicles (TRVs) available. These can be crewed with two firefighters and can be sent by the Fire Control Operators to deal with smaller incidents or as an additional resource at larger incidents. HMICFRS state that some staff may be unsure of when it is appropriate to send a TRV and have asked that we ensure our staff are aware at what incidents TRVs are appropriate.

Ref	Action:	Achievements:
E6.1	Revise the mobilising protocols and Service procedure for Tactical Response Vehicles and communicate across the Service.	• TRV mobilising protocols reviewed • Revised TRV mobilising protocols communicated to staff
E6.2	An online presentation is being prepared to re-familiarise all staff with these vehicles. It will be necessary for all operational staff to view this. The presentation will also cover how the TRV is mobilised and it will detail the type of incidents that it attends. The newer TRVs will then be on request to visit each Watch/Station, for refresher training on the vehicles. The presentation will be available on SharePoint (Service Intranet) and Service Matters (Service Newsletter). Crews will then submit a training return (TNG2) as proof that they have received the information.	• On line presentation created and delivered • Presentation delivered to staff through internal communication channels
E6.3	The training return will be evaluated after six months, to ensure understanding.	• Training return produced to show completion of training in February 2020 • District Managers tasked to check understanding
Strategic Lead: Area Manager Operational Response		

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HMICFRS Improvement Plan

Effectiveness: Responding to fires and other emergencies

Area for improvement:	Background information:
Ref No. E7 'The Service should ensure staff know how to command fire service assets assertively, effectively and safely at incidents'	At every incident that we attend, an incident commander is appointed. They will often be overseen by a further officer of a higher rank, who carries out 'Operational Performance Monitoring', ensuring compliance with current best practice. Some of our managers have not received refresher training or re-assessment in incident command. The report suggests that we addresses this.

Ref	Action:	Achievements:
E7.1	See area for Improvement P5. All incident commanders are now fully trained and have been assessed to the current standard. A process is in place to ensure continued professional development and a programme set up that will see reassessment every two years for those at Level 1,2,3 incident command.	• All incident commanders have been reassessed • A programme to assess incident commanders every 2 years is in place • A schedule enabling incident commanders to attend a development day each year is established • Level 3 and 4 incident commanders are programmed in to attend multi agency exercises
E7.2	The Operational Performance Monitoring process and form that is completed following incidents will be reviewed to ensure learning from incidents is captured.	• Operational Assurance processes (including Operational Performance Monitoring) agreed • Operational Assurance process is being planned with training for Station Managers and above.

Strategic Lead: Area Manager People and Organisational Development

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HMICFRS Improvement Plan

Effectiveness: Responding to fires and other emergencies

Area for improvement:	Background information:
Ref No. E8 'The Service should ensure its mobile data terminals are reliable so that firefighters have good access to relevant and up-todate risk information'	All fire appliances are equipped with a mobile data terminal (MDT) that allows crews to access valuable risk information about buildings, procedures and plans that are essential when managing an incident. Sometimes, as with all technology, an individual screen can freeze and need to be reset. The report from HMICFRS identified that the we need to ensure these MDTs are reliable.

Ref	Action:	Achievements:

E8.1	The Mobile Data Terminals (MDTs) are subject to improvements in the future. This is an on-going work stream which will see an upgrade of MDTs, which should improve their performance.	▢ A demountable tablet is now installed on every fire engine delivering enhancements and resilience to the existing MDTs
E8.2	The Service intends to install mobile devices on each fire appliance. These devices will have the majority of information that is available on the MDTs at present. It will give up-to-date mapping, site specific risk information, operational procedures as well as forms and guidance for crews. The devices will be on a 4G connection and serve as a back up to the MDTs.	▢ Functional, secure, demountable tablets are now installed on every fire engine containing relevant information to assist incident commanders manage emergency incidents

Strategic Lead: Area Manager Operational Response

HMICFRS Improvement Plan

Effectiveness: Responding to National risks

Area for improvement:	Background information:
Ref No. E9 'The Service should ensure it is well prepared to form part of a multi-agency response to an incident and staff know how to apply Joint Emergency Services Interoperability Principles'	In responding to major incidents, often the Service works in conjunction with other Emergency Services and partner agencies. There is a protocol for this known as the Joint Emergency Services Interoperability Principle (JESIP). This sets out best practice guidelines for us all, to ensure that we all work together to resolve the incident. The report has found that some incident commanders require refresher training on JESIP, to ensure that they fully understand the principles involved.

Ref	Action:	Achievements:
E9.1	There is a review of the current provision of Incident Command training which will incorporate JESIP training that is applicable to all operational staff. A presentation is available from the JESIP website which will be used as refresher training for all operational staff. This will be recorded as an Electronic Personal Development Record (EPDR) on the Firewatch system, with a frequency requirement. It will allow managers to run a report to ensure that all relevant personnel are competent in current procedures.	• Presentation delivered to all operational staff • JESIP material disseminated through internal communication channels

E9.2	The Joint Decision Making (JDM) model has now been adopted by the Service. All incident command training now focuses on this model. Command wallet inserts have been updated to reflect this. District Managers will ensure that all relevant staff have updated the wallet contents.	• Command wallets updated and checked by District Managers • JESIP posters on station • Incident command training includes JESIP
E9.3	JESIP principles are taught at all levels of incident command training. This is an integral part of command training and is tested as part of our assessment process at all levels.	• Incident command workbooks include JESIP • Crew Manager development portfolios include JESIP • Incident command re-validation includes JESIP
Strategic Lead: Area Manager Operational Response		

HMICFRS Improvement Plan

Effectiveness: Responding to National risks

Area for improvement:	Background information:
Ref No. E10 'The Service should ensure it is well prepared to form part of a multi- agency response to a terrorist-related and that its procedures for responding are understood by all staff and are well tested'	The Service has a standard operating procedure (SOP) for dealing with a Marauding Terrorist Firearms Active Shooter (MTFA). We also have officers that are specially trained to liaise with the Police, in case of such an event. The report recognised that the Service needs to ensure that all staff understand their duties with regards to Marauding Terrorist Attack (MTA) and that they are tested in these.

Ref	Action:	Achievements:
E10.1	Officers and middle managers have been appraised of new protocols during an inhouse presentation. Updated principles and working practices will be delivered through the National Inter-Agency Liaison Officers (NILO's).	☐ MTA presentation delivered by NILOs to middle and senior managers and officers

E10.2	Standard operating procedure 7.12.2 Firearms Active Shooter will be replaced with MTA procedure.	• Operational Information Note produced on MTA • Service Specific procedure in place for NILO deployment • Material disseminated through internal communication channels
E10.3	Training in MTA will be cascaded to all operational personnel via online videos.	• Training available online for staff • Training of staff has taken place • This training is now on a 2yr cycle on Oracle (our Learning Management System)
E10.4	We will work in collaboration with our partners to test the MTA procedures at multi-agency levels.	• Tactical and Strategic desktop exercises being held during Incident Command training • Desktop Exercise with Police booked in for March 2021
Strategic Lead: Area Manager Operational Response		

HMICFRS Improvement Plan

Efficiency: Making the best use of resources

Area for improvement:	Background information:
Ref No. F1 'The Service needs to show a clear rationale for the resources allocated between prevention, protection and response activities'	HMICFRS are satisfied that the Service manages its budget and that it has 'robust and realistic' financial plans in place to manage its overall resources. However, they have asked the Service to consider how it allocates its resources between its core duties.
Ref	**Action:**	**Achievements:**

F1.1	A review of the allocation of resource and/or capacity of both Fire Protection and Fire Prevention departments will be carried out. This will identify what resources are required for each and why. A directorate plan will then be produced that will run in line with the Service Integrated Risk Management Plan (IRMP).	☐ A Risk and Resource Methodology for Response, Protection and Prevention document has been produced and agreed by senior managers

Strategic Lead: Assistant Chief Fire and Rescue Officer Service Delivery

HMICFRS Improvement Plan

Efficiency: Making the best use of resources

Area for improvement:	Background information:
Ref No. F2 'The Service should ensure there is effective monitoring, review and evaluation of the benefits and outcomes of any collaboration'	The Service collaborates in many areas. As examples, we share our buildings, have TriService Fire Control (with Derby and Nottingham Fire Services) and work within the community with such projects as Braunstone Blues with the Police and Ambulance. HMICFRS would like us to monitor and evaluate the benefits of this collaboration.

Ref	Action:	Achievements:
F2.1	All areas of collaboration by each department within the Service will be listed on the Other Agencies Collaboration Sharepoint site. This identifies a Strategic Lead and also a Tactical Lead responsible for each area of Collaboration. Each area of Collaboration will be reviewed by the Leads on a regular basis. Tactical Management Team meeting will review all areas of Collaboration every six months. This will ensure any collaboration is still relevant, working and benefitting the Service.	• Collaboration database updated and reviewed • Collaboration database and intranet site is now used by all departments • Each area of collaboration is reviewed by Tactical leads and 6 monthly by the Tactical Managers Team meeting

F2.2	When an item of Collaboration is closed, an evaluation will take place. This will detail reasons for the closure and identify any lessons learnt.	• Evaluation of closed items has commenced • Evidence in place of evaluation – which is shared with Tactical Managers in order to enhance organisational learning. • Evaluation is reviewed every 6 months

Strategic Lead: Assistant Chief Fire Officer Service Support

HMICFRS Improvement Plan

Efficiency: Making the best use of resources

Area for improvement:	Background information:
Ref No. F3 'The Service needs to prioritise implementing new business continuity plans and test them as soon as possible'	It is essential that the Service carries out regular testing of its continuity plans. This will ensure it can provide the correct level of service in case of an event that damaged core functions. HMICFRS recognised this and suggested that the Service implement plans and regularly assess them.

Ref	Action:	Achievements:
F3.1	A further staff member will be employed to ensure that the Corporate Risk and Resilience department has the appropriate number of people to enable the tasks to be completed within the department plan.	☐ A new staff member is now employed
F3.2	The business continuity (BC) plans that are in place at present will be reviewed to ensure that they are fit for purpose.	• Business Continuity procedure is now in place • All stations have BC plans in place • Department BC plans are being developed • Fire Control Business Continuity plans are in place and tested regularly

F3.3	A test regime will be put in place.	• Fire Control Business Continuity Plans tested regularly • An BC exercise plan is now in place and testing has begun

Strategic Lead: Area Manager Community Risk

HMICFRS Improvement Plan

Efficiency: Making the fire and rescue service affordable now and in the future

Area for improvement:	Background information:
Ref No. F4 'The Service should ensure itself it fully exploits external funding opportunities and options for generating income, in particular that it is recouping costs for use of its premises by other emergency services'	The Service generates income from leasing areas within its buildings to Leicestershire Police and East Midlands Ambulance Service and from Forge Health, our occupational health facility. HMICFRS has suggested that the Service seek to ensure that the revenue from the leases is recouped.

Ref	Action:	Achievements:
F4.1	There is now a formula set by the Service for sharing premises. Rent is based upon an agreed amount per square foot, with shared space at 50% of this amount. Rent is subject to increase in relation to RPI (Retail Price Index). A service charge is also levied as a percentage of actual costs of maintaining the building (including rates and utilities) based upon the net floor area occupied in proportion to the total floor area. All LFRS premises that are shared with other Services are now paying the required amounts.	☐ Formal agreement in place for shared premises and rented space
F4.2	The Service currently receives external funding from mobile phone masts housed on Stations, from driver training with the Police and from Forge Health.	• Annually published Statement of Accounts details income • Spreadsheet to be produced showing current external funding

Strategic Lead: Assistant Chief Fire Officer Service Support

HMICFRS Improvement Plan

People: Promoting the right values and culture

Area for improvement:	Background information:
Ref No. P1	The Service recognises that its organisational values have been under review for a period of time. HMICFRS have identified this and have suggested that these core values and behaviours are published and adhered to at all levels of the organisation.
'The Service should ensure its values and behaviours are understood and demonstrated at all levels of the organisation'	

Ref	Action:	Achievements:
P1.1	Staff engagement sessions on Culture, Values and Behaviours have been carried out during June and July 2019. From these sessions, the Service will identify 'Champions' who will then deliver similar sessions to their peers. This will allow the Service to gather data and information on what staff would like to include as Service Values and Behaviours.	• Values and Behaviours engagement sessions complete • Data gathering exercise complete
P1.2	Once Behaviours and Values have been discovered, there will be a Service wide roll out to cascade the information to all staff by the 'Champions'. This will consist of engagement with all departments. This will begin the process of embedding these behaviours into the culture of the Service.	• Value and Behaviours established and communicated • Process to embed Values and Behaviours in to mainstream activities commenced
P1.3	The desired behaviours will be embedded throughout the Service. From 'onboarding' of new employees, through training, promotion and appraisals of all staff, these Service behaviours will form expectations that all staff will be encouraged to continually demonstrate.	• Staff survey indicates 96% of those who responded knew the Values and Behaviours • Now features in promotion process and recruitment • Presentations given to staff

Strategic Lead: Area Manager People and Organisational Development

HMICFRS Improvement Plan

People: Promoting the right values and culture

Area for improvement:	Background information:
Ref No. P2 'The Service should ensure staff have access to trauma support and counselling services'	The Service has trauma counselling available through its occupational health facility. All managers are also now trained as Mental Health First Aiders, to recognise symptoms and signs affecting wellbeing. The report states that a formal process should be put in place to ensure that staff receive counselling when necessary.

Ref	Action:	Achievements:
P2.1	A 'Health and Wellbeing' policy is soon to be published, which will formalise the Service's actions and responsibilities for employee wellbeing, including following traumatic incidents. The SharePoint 'Employee Health and Wellbeing' site will be updated to reflect the new policy and what can be offered to staff.	• Health and Wellbeing strategy being worked on by Health and Wellbeing Team • Staff are aware of up to date Wellbeing advice, information and training via our intranet
P2.2	Post incident trauma training will be given to appropriate staff within the Service. These members of staff will become points of contact for post incident care. A procedure will be produced to formalise this.	• Trauma Risk Incident Management (TRiM) is now in place and widely used to support staff • TRiM actions and interventions are reported and monitored monthly
P2.3	Mental Health First Aid(MHFA) training will continue within the Service. This will continue to target any supervisory managers who have not received it yet. A rolling programme of two training sessions per year will ensure this is embedded throughout the Service and that staff will receive refresher training (every 2 years).	• Most supervisory staff are mental health first aid trained • MHFA will feature as part of the Health and Wellbeing strategy

Strategic Lead: Area Manager People and Organisational Development

HMICFRS Improvement Plan

People: Promoting the right values and culture		
Area for improvement:	**Background information:**	
Ref No. P3 'The Service should ensure it has an up-to-date Health and Safety policy and procedure and that staff understand and follow its health and safety policy and procedure.'	The Service has rigorous procedures to protect its staff. However, some of the policies that surround this require reviewing. HMICFRS has recognised this and suggested that the Service ensure that policies and training are reviewed and brought in date.	
Ref	**Action:**	**Achievements:**
P3.1	A review of Health and Safety (H and S) policy, procedures and guidance will be carried out. This will include a 'peer review' by H and S staff from Cambridgeshire Fire Service. Outcomes from this review will be implemented.	• Peer review by Cambs Fire and Rescue Service complete • 3 year Implementation plan in place
P3.2	H and S training needs for staff across the Service will be addressed.	• Training needs analysis for staff complete • Mechanisms to communicate operational learning and safety information established
P3.3	The success of this review and outcomes will be monitored through reporting of H and S issues (locally, regionally and nationally), auditing and themed reviews.	• Process for monitoring H and S issues agreed • We have closed 33 items from the review • We have conducted 3 themed reviews
Strategic Lead: Area Manager Community Risk		

HMICFRS Improvement Plan

People: Getting the right people with the right skills	
Area for improvement:	**Background information:**
Ref No. P4	We currently have an electronic recording system that can ensure crews can record their

'The Service should ensure its electronic system for recording and monitoring operational staff competence is accurate and accessible.'	competence, following training or assessment. This is a centrally based system which ensures firefighters with the correct skills are mobilised to incidents. HMICFRS found that, after sampling a few firefighters, their records were not showing 'competent'. They have asked the Service to ensure that all training and competency records are up to date.

Ref	Action:	Achievements:
P4.1	There will be an immediate review of how the Service currently records competence to ensure that all Firefighters are recorded correctly, in line with current procedures. A training programme will be put in place to ensure that supervisory staff are recording this competence correctly.	• A Learning Management System has been procured • Work in line with National Fire Chiefs Council on competence is ongoing • Oracle has been procured as the Service learning management system
P4.2	There will be a review of courses offered by Learning and Development including qualifications. This should simplify how this information is recorded. This will include a review of expiry dates of these qualifications (which is linked to mobilisation).	• Review of courses undertaken • 350 E-learning packages now in place • E-learning put onto Oracle with refresher timelines in place
P4.3	The ongoing Learning Management System (LMS) project is also currently looking at addressing this issue, with a review of frequency of training, how it is linked to mobilisation and core competencies. This will then give an up to date and accurate picture of competencies within the Service.	▯ Oracle is now in place and is being used by all staff

Strategic Lead: Area Manager People and Organisational Development

HMICFRS Improvement Plan

People: Getting the right people with the right skills

Area for improvement:	Background information:
Ref No. P5 'The Service should ensure staff are appropriately trained in safety-critical skills, such as incident command'	HMICFRS found that some higher level incident commanders had not received further training or re-assessment following their initial training. They ask that the Service ensures it trains and assesses all its incident commanders to the appropriate level.

Ref	Action:	Achievements:
P5.1	A procedure is already in place to ensure that all Level 1 commanders are currently re-assessed within a 2-year time period to maintain their command status.	• All Level 1 incident commanders have been re-assessed • A programme to assess Level 1 incident commanders every 2 years is in place
P5.2	A procedure is now in place to ensure that Level 2 and 3 commanders attend an accredited command course / revalidation at the relevant level and then be reassessed within two years to maintain their command status. All Level 2 and 3 commanders are currently 'in date' following recent accreditation and reassessments.	• All Level 2 and 3 incident commanders have been re-assessed • A programme to assess Level 2 and 3 incident commanders every 2 years is in place
P5.3	Level 4 commanders (and above) will attend a command course at the relevant level and will maintain the frequency of this. A procedure will be put in place to ensure this.	▢ All Level 4 incident commanders have been re-assessed • A programme to assess Level 4 incident commanders every 2 years is in place
P5.4	Level 1,2 and 3 commanders will attend 'competence days' at L and D. This attendance will be mandatory. Level 4 commanders and above will also attend. This will ensure continued competence and professional development for all levels.	▢ A schedule enabling incident commanders to attend a development day each year is established
P5.5	Tactical and Strategic Coordinating Groups training scenarios will be implemented with attendees from a multi-agency arena to train and practice at tactical and strategic levels.	• Tactical and Strategic coordinating training sessions are in place and are attended • Positive feedback received on TCG session
P5.6	The Risk assessment for all the above will be reviewed on a rolling basis.	▢ This features on the Organisational Risk Register and has been reviewed

Strategic Lead: Area Manager People and Organisational Development

HMICFRS Improvement Plan

People: Ensuring fairness and promoting diversity

Area for improvement:	Background information:
Ref No. P6	The Service has a Grievance procedure which allows staff to challenge when they see the

'The Service should ensure that it has effective grievance procedures. It should identify and implement ways to improve staff confidence in the grievance process'	organisation as acting unfairly or in an unjust way. In the report, HMICFRS found that some staff didn't have confidence in the process of raising a grievance. Some staff also felt that negative consequences would occur, if they were to raise a grievance. HMICFRS have asked that the Service recognise this and that they should re-assure these staff in the grievance process to gain further confidence in it.	

Ref	Action:	Achievements:
P6.1	There will be a review of the Service Grievance Procedure which will consult with employees and representative bodies. Part of the staff engagement process about Values and Behaviours (P1) will also address the lack of confidence with the Grievance Procedure. Following this work and review, the procedure (including any revisions) will be relaunched. This will include communicating Service wide via Service Matters and staff engagement at Middle Managers and Supervisory Managers staff forums. Work is also ongoing which includes a review of the Bullying and Harassment procedure to align with the Grievance procedure.	• Review being undertaken by Leicester City Council • Engagement sessions with staff and representative bodies complete • Staff survey completed • Draft procedure produced and with staff consultation • Managers have been trained how to carry out investigations as part of this procedure
P6.2	Following the review, there will be an evaluation. This will be reported to the Corporate Governance Committee of the Combined Fire Authority.	

Strategic Lead: Area Manager People and Organisational Development

HMICFRS Improvement Plan

People: Ensuring fairness and promoting diversity

Area for improvement:	Background information:
Ref No. P7	Over the last few years, the Service has worked really hard to reflect the community it serves.

'To identify and tackle barriers to equality of opportunity, and make its workforce more representative, the Service should ensure diversity and inclusion are well understood and become important values of the Services'	In the report, it is identified that some staff do not have a good understanding of what 'positive action' means. They also heard some gender specific language such as 'firemen' being used. HMICFRS has asked that the Service looks into these matters and addresses them, capitalising on the good work carried out in recent years in being more inclusive and diverse.

Ref	Action:	Achievements:
P7.1	The Service has a Strategic Equality and Diversity Inclusion Board (SEDIB). At present, they are carrying out a gap analysis on the Fire and Rescue Service Equalities Framework document and also considering the 'Smoke and Mirrors' report published by Asian Fire Service Association (AFSA).	• Gap analysis complete • 5 year Equality Diversity and Inclusion (EDI) Plan agreed by senior managers
P7.2	Following the gap analysis, any areas identified for improvement will be addressed to ensure compliance with 'best practice'. Engagement will follow with all department heads to ensure equality, diversity and inclusion is included in all areas of work within the Service.	• EDI officer and manager post established • EDI features in all department and district plans • Tactical EDI Board reports on progress and issues to the Tactical Management Team each month • All new or reviewed policies and procedures require an Equality Impact Assessment
P7.3	Training of staff will take place to address issues such as understanding positive action, bullying and harassment and discrimination.	• Engagement sessions with staff in progress • A Watch Manager has been appointed to train staff in EDI matters
P7.4	Training of staff (Crew Manager and above) will also take place on 'unconscious bias' and on recruitment / promotion processes.	• A Watch Manager has been appointed to train staff in EDI matters • Plan agreed for appropriate staff to receive unconscious bias training

P7.5	A recruitment campaign, including positive action targeting BAME, LGBT+ and women, is currently underway for recruitment of 18 Firefighters in January 2020. The Service has engaged with Community Groups via Fire, Police Advisory Group for Equalities and removed the requirement for a driving licence and adjusted numeracy and literacy qualification requirements. The equalities impact for both these changes will be monitored.	• Recruitment methodology reviewed and changes identified • Process is established and used to evaluate the benefits of these changes after each recruitment drive • The effectiveness of social media targeting of diverse groups has been analysed • The 'Have a go days' have been evaluated and continue to be effective
Strategic Lead: Area Manager People and Organisational Development		

HMICFRS Improvement Plan

People: Managing performance and developing leaders

Area for improvement:	Background information:
Ref No. P8 'The Service should ensure it has an effective system in place to manage staff development, performance and productivity'	The Service carries out staff appraisals on an annual basis. These are monitored by line managers who see them as a valuable tool to highlight good work practices. The HMICFRS said that some staff haven't had this appraisal in two years and that the current appraisal process is ineffective. The Service accepts this and is currently reviewing the process. HMICFRS has recommended that the Service puts a system in place to manage productivity and staff development.

Ref	Action:	Achievements:
P8.1	There is a review of the staff appraisal system currently underway as part of the Learning Management System (LMS) project. This project will align appraisals and allow the Service a central view to monitor staff development. Part of this appraisal system will include performance review and productivity of staff. The LMS will include all staff, support and operational and it will serve as a tool to support them in whatever stage of their career they are in. This project is due to be completed in December 2019.	• Learning Management System – Oracle is now in place and used by staff • Oracle allows managers to monitor staff development
P8.2	Once the LMS project is complete, training will take place to ensure all staff are familiar with it. Appraisals will be completed at least once per year for all staff.	Staff are trained and using Oracle for Elearning

Strategic Lead: Area Manager People and Organisational Development

HMICFRS Improvement Plan

People: Managing performance and developing leaders

Area for improvement:	Background information:

Ref No. P9	HMICFRS has pointed out that some staff don't see the current promotion process as open and fair. The Service is now reviewing its promotions policy and the report recognises this taking place.
'The Service should ensure its selection, development and promotion of staff is open, transparent and fair'	

Ref	Action:	Achievements:
P9.1	A staff task and finish group has been set up to address the promotion process for Crew, Watch and Station Manager. This group is made up of Tactical Managers, recently promoted staff, representative bodies and human resource personnel. The aim of the group will be to review the current procedure and ensure that staff views are taken into account.	• Engagement sessions complete • Staff views known through completion of survey
P9.2	Engagement sessions with staff will be included in the plan to ensure transparency and engender involvement in building the promotion process. Relevant staff will be engaged with recruitment and staff selection training which will include hard and soft skills to ensure that those involved in selection decisions on promotions are adequately supported and trained including unconscious bias training.	• Unconscious bias training delivered to staff who interview for new starters • Engagement continued to understand and decide on competencies for each role
P9.3	A new procedure will be written and applied by the Service that will be open and fair. It will also be relevant to roles that it is applied to. Following the next promotion process, this will then be evaluated.	• New procedure in use • Candidates in the promotion process able to feedback their experiences through survey • Evaluation of those in the Watch Manager process found it to be 'open, fair and transparent' • Process used for Station Manager promotion process • Talent Pools and Development Pools made up of staff ready for next promotions have been identified • Development training in place • 1st stage of review has been carried out
Strategic Lead: Area Manager People and Organisational Development		

HMICFRS Improvement Plan

People: Managing performance and developing leaders		
Area for improvement:		**Background information:**
Ref No. P10		HMICFRS has asked that the Service has systems in place to recognise talent, manage and nurture it and put in place a leadership training programme.
'The Service should put in place an open and fair process to identify, develop and support high-potential staff and aspiring leaders'		

Ref	Action:	Achievements:
P10.1	The Service will look at ways to develop a formal talent management process in the future. Part of the promotions review will include having a 'talent pool' of people to develop into the next role. The Service will also set up a group to look at a 'future leaders' programme.	- New procedure in use - Successful candidates now placed into talent pools - Mechanism to select the best candidate for each post from the talent pool established - Development of staff in place to allow them to move from Development Pool to the Talent Pool
Strategic Lead: Area Manager People and Organisational Development		

HMICFRS Improvement Plan

Points identified in the report			
Ref No.	**Point:**	**Lead:**	**Achievements:**
AR1	Staff would benefit from refresher Safeguarding training to increase their confidence.	Area Manager Community Risk	- Vulnerable person module established - Safeguarding training is now on Oracle and is on a 2 year rolling programme

AR2	The Service's procedure on planned levels of fire engines and crewing availability is out of date.	Area Manager Response	• Crewing of Fire and Special Appliances updated • Operational Degradation procedure reviewed, updated and agreed • Guidance for Fire Control Watch Managers implemented
AR3	Recruitment, retention and availability of On-Call staff.	Area Manager Response	• On-Call improvement project now complete • Outcomes of project are being considered
AR4	Staff were still quoting the 'London Model' of decision making and should move to the joint decision making model.	Area Manager Community Risk	☐ The Decision Control process embedded in all training, guidance and assessment material
AR5	Operational discretion is not recorded.	Area Manager Community Risk	• Fire Control have Information Note on the procedure to follow if Ops Discretion is declared • Process for when Ops Discretion is used has been tested

AR6	The Service should carry out cross border exercises with all of its neighbours	Area Manager Response	• Operational Exercise procedure reviewed and updated • Planned exercises feature in District Plans • Reporting activity relating to cross border exercises to HMICFRS established
AR7	The Service currently lacks a way to check workforce productivity and could do more to assure itself that its workforce's time is used effectively.	All Area Managers	☐ Learning Management System – Oracle is now in place
AR8	Actions from the H and S Committee have not been completed.	Assistant Chief Fire and Rescue Officer Service Delivery	• Actions reviewed and prioritised • Action plan in place to complete outstanding actions

AR9	Staff are aware of Service Matters but there is no way of ensuring that they read and take in the information.	Area Manager Community Risk	• Monitoring software purchased enabling activity levels to be known • Quarterly process in place evaluating use of Service Matters using randomly selected staff • Outcomes indicate that 80% are reading Service Matters articles
AR10	The use of gender exclusive language.	All Area Managers	• Included within the Values and Behaviours work • Unconscious bias training included gender exclusive language
AR11	The workforce plan lacks detail about how the Service will meet its resourcing needs.	Area Manager Response	• Quarterly report showing workforce planning presented to senior managers • Report shows details of forecasted staffing levels and how resource needs will be met
AR12	Operational staff haven't received training in gathering site specific risk information or health and safety training.	Area Manager Community Risk	• Site specific risk training complete • H and S training needs analysis complete

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AR13	The Service doesn't fully understand the skills and capabilities of staff.	Area Manager People and Organisational Development	• Learning Management System – Oracle is now in place and used by all staff • Quarterly report showing operational skill levels presented to senior managers
AR14	There is less evidence of learning and improvement in nonoperational areas.	Area Manager People and Organisational Development	• All departments have fed into training analysis • Training courses are now on Oracle to benefit all staff
AR15	The Representative bodies would like involvement in decisions at an earlier stage.	Assistant Chief Fire and Rescue Officer Service Delivery	• Engagement of Representative Bodies at Staff Consultation Forum • Representative Body engagement at strategic Covid 19 meetings • Meeting minutes indicate Representative Body's satisfaction level with engagement

AR16	In some departments, staff do not have their performance managed.	All Area Managers	☐ All managers informed and influenced to complete appraisals
AR17	Call handling times – Control.	Area Manager TriService Control	☐ New ways of working being trialled in Fire Control to reduce call handling times ☐
AR18	All training recorded and managed on one system.	Area Manager People and Organisational Development	• A review of all courses has been carried out • All training is held and coordinated on Oracle
AR19	Time spent by crew and watch managers on station arranging covers and organising overtime	Area Manager Response	☐ Crewing levels during Covid 19 has seen a reduction in the need to arrange covers or overtime
AR20	Quality assurance (QA) of audits by Fire Safety Inspectors	Area Manager Community Risk	• QA procedure in place for Inspectors • QA of staff has begun and plan is being put in place on a rolling annual programme