



Organisational Risk Register

2023



Created: January 2022

Reviewed: November 2023

Owner: Corporate Risk

Chapter 1 – Corporate Risk Register



SAFER COMMUNITIES

AIM: FEWER INCIDENTS WITH LOWER IMPACTS

OUTCOMES:

- 1) Targeted prevention and protection activities
- 2) Manage business and community risk effectively
- 3) Effective partnership working

RAT ID	HAZARDOUS EVENT			STRATEGY OUTCOME AT RISK	EXISTING CONTROL MEASURES	CURRENT RISK (with control measures)				CONTROL MEASURES TO BE IMPLEMENTED	CONTROL MEASURE OWNER	IMPLEMENTATION DATE	RESIDUAL RISK (after all control measures)				RISK MANAGEMENT PROCESS (Tolerate, Treat, Transfer, Terminate)
	THE IS A CHANCE THAT	CAUSED BY	RESULTING IN			L	C	R	ML				L	C	R	ML	
23/S1 (NEW)	The Service will fail to meet the Aim of “Fewer incidents with reduced consequences” as set out in our Safer Communities Strategy	A lack of collaboration / partnership working could prevent accurate, timely information/activities being shared to enable effective interventions.	Failure to target prevention, protection and resilience activities. Failure to manage business and community risk effectively. Failure to ensure effective partnership working.	1,2,3	Community Risk Management Plan (Safer Communities Strategy)	2	3	M	TC	Collaborate and work with partners to reduce the risk to our communities.	AM Community Risk	01/20/2026	2	2	M	M	Treat
Directorate and Department Plans		Implement an effective Fire Protection Risk Based Inspection Programme for commercial buildings.			AM Community Risk					31/05/2025							
Implement an effective programme of Home Safety Check visits to reduce domestic dwelling fires.		AM Community Risk			31/05/2025												
Target and help those vulnerable to fire and rescue related incidents.		AM Community Risk			01/09/2026												
Improve community engagement and equality of access.		AM Community Risk			01/02/2026												

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		quality Home Safety Checks and community engagement work increases the risk to individuals and communities being affected by fire and rescue related incidents.															
17/05	We fail to meet Central Government and public expectations in relation to the Grenfell Tower review	Additional workload, resources and training	The inability to deliver our core functions and priorities identified in Our Plan 2020-24	1,2,3	Collaboration Policy and Procedure Communications Training and Exercising	2	2	M	OP	Further training and exercising to improve understanding and embed new processes	Service Delivery	March 2024	2	2	M	OP	Tolerate



RESPONSE

AIM: RESPOND EFFECTIVELY TO INCIDENTS

OUTCOMES:

- 1) Manage calls to fires and other emergency incidents
- 2) Provide a 24/7 response to local, regional, national and international incidents
- 3) Supply the appropriate resources and attend incidents to meet the needs of our communities
- 4) Meet our communities' expectations in resolving incidents

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23/S2)NEW)	The Service will fail to meet the Aim of “Respond effectively to incidents” as set out in our Operational Response strategy.	Appliance availability and our response times to fire and rescue related incidents is ineffective or doesn't meet our target of attending all Primary Domestic Dwelling fires in an average of 10 Minutes (including the call time) and all “other types” of life risk incidents in an average of 12 minutes (Including the call time). Climate change will see an increase in flooding, water rescue and wildfire incidents. The impact and frequency of road traffic collisions on major and rural roads. An increase in ‘special service’ incidents (e.g. bariatric transfer,	Failure to manage calls to fires and other incidents. Failure to provide 24/7 response to local, regional and international incidents. Failure to supply the appropriate resources and attend incidents to meet the needs of our communities. Failure to meet our communities' expectations in resolving emergencies.	1,2,3,4	Community Risk Management Plan (Response Strategy) Directorate and Department Plans	2	4	H	TC	Castle Donington - Change from DCP duty system to Day Crewed. Appliance crewed at night by combining the tactical response crews from Loughborough and Western Stations. Loughborough - Introduction of an On-Call section and an additional appliance. Tactical Response Vehicle to relocate to Castle Donington at night. Western - Introduction of an additional Tactical Response Vehicle during the day, in addition to the existing appliance. Tactical Response Vehicle to relocate to Castle Donington at night. On completion of a trial, consider deploying Variable Response Vehicles.	Director of Operational Response Director of Operational Response Director of Operational Response		2	3	M	TC	Treat

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		<p>gaining entry on behalf of partners etc.) reducing our availability for traditional fire and rescue incidents.</p> <p>An increase in the utilisation and disposal of lithium-ion battery related incidents may cause longer more protracted incident attendance.</p> <p>The staff and public impact from the effects of contaminants and effluents in smoke from some fire incidents will need to be considered.</p>								<p>Provide additional water rescue capability to two further Wholetime stations, increasing the total to five across the Service (Birstall, Loughborough, Oakham, Southern and Wigston)</p> <p>Internal and external education and process change to reduce the impact of contaminants on our staff and our communities.</p> <p>Embedded business continuity management programme.</p> <p>Introduction of a new mobilising system.</p>	<p>Director of Operational Response</p> <p>Training & Development</p> <p>Director of Director of Service Assurance</p> <p>Director of Operational Response</p>						
15/04	There will be a partial or complete failure of the mobilising system	ICT equipment failure, loss of staff and/or failure of the joint enterprise between Leicestershire, Derbyshire and Nottinghamshire Fire and Rescue Services	Delays to mobilisation, reduced Service performance, impacts on Firefighter and public safety and or impacts on other Service departmental functions	1,2,3,4	<p>Collaboration</p> <p>Assurance</p> <p>Learning and Development</p> <p>Resources</p>	4	4	VH	ST	<p>First Line fault identification, troubleshooting and resolution guide provided for Control</p> <p>Automated monitoring and reporting of all mobilisation critical elements of the mobilising system</p> <p>Scheduled System maintenance plan</p>	<p>Tri-Service SDM</p> <p>SYSTEL FRANCE / Tri-Service ICT DEPTS</p> <p>SYSTEL UK / SYSTEL FRANCE / Tri-</p>	<p>March 2020</p> <p>November 2022</p> <p>March 2020</p>	4	4	VH	ST	Treat

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										for updates, hot fixes, patches and preventative works	Service SDM / Tri-Service ICT DEPTS						
										Business Continuity Plans	Fire Control	November 2022					
										LFRS ICT Risk Register Item R004: detailing control measures to ensure LFRS systems can support Systel mobilisation	ICT Manager	April 2024					
										Upgrade of mobilising system software to latest version (V117)	Tri-Service ICT Manager	November 2022					
										Business continuity plans for emergency maintenance of system be put in place. Stage 1 – initial report to Tri-Service Exec.	Tri-Service ICT Manager	October 24					
										A new mobilising system has been purchased and is to be integrated into the service.	Replacement mobilising system project	October 24					

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15/05	There will be a significant reduction in operational capacity	Industrial action by one or more of the main representative bodies involving some or all operational staff including Fire Control staff	An inability to maintain basic operational response capability as set out in the Service Operational Degradation Procedure	1,2,3,4	Collaboration Policy and Procedures Communications Assurance	5	3	H	ST	Fire Control business continuity plans	Fire Control	January 2024	5	3	H	ST	Treat
15/07	A higher than usual number of employees are unable to work, or attend their workplace	Pandemic Disease	The inability to deliver our core functions and priorities identified in Our Plan 2020-24	1,2,3,4	Collaboration Policy and Procedure Communication	3	3	H	TC	NONE	N/A	N/A	3	3	H	TC	Tolerate
17/01	The Service will have too few On-Call Duty System appliances available	Lack of appropriate skill sets, reliance on dual contractors with limited hours of availability, inability to fill vacancies at On-Call Stations or lack of succession planning	Insufficient resources available in the right place at the right time to meet the 10-minute turnout time	2,3,4	Policy and Procedure Learning and Development Resources	3	3	H	TC	Implementation of recommendations from On-call Availability Project	Director of Service delivery	June 2023	3	3	H	TC	Treat

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20/04	We will be unable to fulfil our core statutory duties or meet governance and/or financial legislation and/or regulation.	The failure of a key supplier to the Service due to influences outside of the Service's control.	Potential inability to receive 999 calls, failure of mobilising systems. Possible failure, loss or inability to supply Personal Protective Equipment, Breathing Apparatus, Operational vehicles and critical ICT systems.	1,2,3,4	Policy and Procedure	4	5	VH	C	Confirmation process to ensure key suppliers have adequate business continuity plans of their own in place Robust contract management process in place that includes assessment of long-term viability of potential suppliers of significant size Ongoing review of alternative suppliers	Procurement Managers Business Support Project Managers	December 2023 December 2023 December 2023	4	5	VH	C	Treat



FINANCE AND RESOURCES

AIM: **DELIVER VALUE FOR MONEY QUALITY SERVICES**

OUTCOMES:

- 1) A well-managed and transparent budget
- 2) Robust and efficient procurement activities
- 3) Reliable and effective ICT systems
- 4) Fit for purpose estate, vehicles and operational equipment

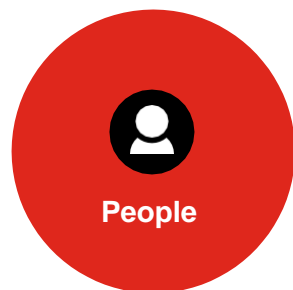
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23/S3 (NEW)	The Service will fail to meet the Aim of “Deliver value for money quality services” as set out in our Finance and Resources strategy.	Service premises, vehicles and equipment that do not meet equality, environmental or corporate standards in training and protecting our staff and keeping our communities safe.	A failure to provide a well-managed and transparent budget. Weak and ineffective procurement activities. Unreliable, insecure and ineffective ICT systems. An unfit for purpose estate, vehicles and operational equipment.	1,2,3,4	Community Risk Management Plan (Finance and Resources Strategy) Directorate and Department Plans	2	3	M	TC	Successfully implement the five-year Fleet Replacement Plan.	AM Business Support	31/03/2026	2	2	M	TC	Treat
		ICT technologies / services will be disrupted and / or data leaked from unauthorised sources (cyber-attacks).								Ensure our equipment is new or serviced regularly.	AM Business Support	31/03/2026					
		ICT systems and service processes are not regularly reviewed and updated.								Successfully implement the five-year Estate plan of station improvements and refurbishments.	AM Business Support	31/03/2026					
		The Service fails to respond adequately to the financial challenges it faces								Implement the ICT plan, reviewing and updating systems and processes (including cyber prevention activities). Deliver improvements towards achieving the Government's carbon reduction targets and our own commitment to sustainability.	AM Business Support	31/03/2026					

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		and sustain a balanced budget.								Develop and agree a medium-term financial plan, set a balanced budget for each financial year, manage and report spend against it.	Finance Manager	31/03/2026					
16/06	Service premises, vehicles and/or equipment is lost, damaged, does not meet equality, environmental or corporate standards in training and protecting our staff and keeping our communities safe.	Changes in legislation, damage in the course of training or operational incidents, theft and criminal activity and or loss.	Loss or delay to operational response and financial cost	4	Policy and Procedure Assurance Communications Resources	3	2	M	OP	Estates 5 year plan Condition survey completed on a 5 year cycle Suitably trained Estates staff	Estates Estates Estates	September 2023 April 2024 April 2024	2	1	L	OP	Treat

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18/02	ICT technologies / services will be disrupted and/or data leaked from unauthorised sources	A failure of ICT security controls to prevent a cyber-attack, including malware, spamming, scams, spyware, ransomware or phishing, or loss/ theft of ICT assets	Buildings/ ICT infrastructure components inaccessible, inability to deliver of processes and outcomes, loss of data, reputational damage, financial loss, unauthorised use of data including passwords or personal data to cause further damage, including denial of service and communications overload	3	Policy and Procedure Communications Resources	3	5	VH	ST	LFRS ICT Risk Register Item R008	ICT Manager	Dec 2024	2	3	M	TC	Treat
18/03	The Service fails to respond adequately to the financial challenges it faces	A reduction in spending power as a consequence of increased inflationary pressures and/or pay and pension issues	An inability to provide a balanced budget and/or being unable to fund additional statutory requirements placed on the Service	1	Assurance Resources	2	2	M	OP	NONE	N/A	N/A	2	2	M	OP	Treat

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21/05	Data is deleted, access to data is removed or data is inaccessible	Human error and/or non-compliant data storage practices	Permanent loss of data, temporary unavailability of data, disruption of key processes and outcomes, inability to comply with legislation such as FOI, GDPR etc. and/or reputational damage	3	Policy and Procedure Assurance	2	4	H	TC	LFRS ICT Risk Register Item R001	ICT Manager	April 2024	2	4	H	TC	Treat
21/06	Outsourced, e.g. cloud-based, ICT services are not available or that data entrusted to a service provider is inaccessible, lost or compromised	Inadequate security or resilience of third party and/or inadequate outsourcing governance	Reputational damage, financial loss, unauthorized use of data such as passwords or personal data to cause further damage, loss of data, unavailability of data, disruption of key processes and outcomes and/or inability to migrate to another cloud service provider	3	Policy and Procedure	2	4	H	TC	LFRS ICT Risk Register Item R010	ICT Manager	December 2024	2	3	M	TC	Treat

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21/07	ICT technologies and services do not meet corporate and business requirements and/or users do not yield the maximum benefit of ICT technologies	Inadequate engagement with users, inadequate funding, inadequate expertise of ICT staff, implementation of changes delayed and/or system redundancy	Disruption of outcomes, increased demand on the ICT helpdesk, increased user errors, suboptimal use of ICT technologies and/or reputational damage	3	Policy and Procedure Communications Resources	2	4	H	T	LFRS ICT Risk Register Item R009	ICT Manager	December 2024	2	3	M	TC	Treat



PEOPLE

AIM: **AN ENGAGED AND PRODUCTIVE WORKFORCE**

OUTCOMES:

- 1) Striving to improve the service we deliver
- 2) Listening and engaging with our employees and communities
- 3) Ensuring our people know that their health and wellbeing is important to us
- 4) Being uncompromising in our commitment to diversity and an inclusive, cohesive workforce

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23/S4 (NEW)	The Service will fail to meet the Aim of “An engaged and productive workforce” as set out in our People strategy	Failure to recruit the required operational and support staff to meet the needs of the Service.	Failure to improve the service we deliver.	1,2,3,4	Community Risk Management Plan (Finance and Resources Strategy) Directorate and Department Plans	2	3	M	TC	Deliver Annual Equalities Plan and improve the diversity of our workforce. <ul style="list-style-type: none">Statutory Annual Equalities Report	AM People and Organisational Development	31/07/2024	2	1	L	OP	Treat
		Increased staff turnover could result in our staff being inexperienced and not effectively trained.	Failure to listen to and engage with our employees and our communities.							Enhance our approach to employee engagement. <ul style="list-style-type: none">Employee engagement eventsEmployee Strategy	Director of Service Support	31/12/2026					
		The workforce remains unrepresentative of the communities of Leicester, Leicestershire, and Rutland, impacting future recruitment, retention and community engagement activities, resulting in not meeting the responsibilities of the Public Sector Equality duty.	Our people not knowing that their health and wellbeing is important to us.							Enable a positive working environment for all our employees and hold people to account against the core values. <ul style="list-style-type: none">Core Code of Ethics	Director of Service Support	31/12/2024					
		We fail to ensure our culture is one in	Compromising on our commitment to diversity and an inclusive, cohesive workforce.							Develop our people at all levels. <ul style="list-style-type: none">Leadership and	AM People and Organisational	31/12/2024					

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		which all people can thrive.								<div>Development Framework<ul style="list-style-type: none">Organisation al Development Workshops</div> <div>Ensure appropriate health and wellbeing interventions are implemented and maintained to support our staff.<ul style="list-style-type: none">Occupation al Health & Wellbeing systems and processes</div> <div>Delivery of effective workforce planning and succession planning to ensure progression and opportunity throughout the Service.<ul style="list-style-type: none">Workforce Planning StrategyFive Year Plan</div>	<div>Development</div> <div>AM People and Organisation al Development</div> <div>AM People and Organisation al Development</div>	<div>01/01/2025</div> <div>31/03/2024</div>					

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19/01	A Service employee or member of the public comes to harm	A failure to operate safe systems of work on the incident ground or other location such as workshops or whilst travelling to/from locations of work	Death or serious injury to one or more individuals	1,2,3,4	Policy and procedure Assurance Learning and Development Resources Communications	1	3	M	OP	Review of Health & Safety risk assessments	Health & Safety Department	December 2023	1	3	M	OP	Treat



GOVERNANCE

AIM: **PROVIDE ASSURANCE**

OUTCOMES:

- 1) Well informed communities
- 2) Well informed staff
- 3) We'll know what our communities think
- 4) We'll know what our staff think

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23/S5 (NEW)	The Service will fail to meet the Aim of "Provide assurance" as set out in our Governance strategy.	Failure to effectively implement the findings and areas for improvement identified in the HMICFRS Inspection Report and the recommendations of the HMICFRS values and culture 'Spotlight' report.	Failure to keep our communities well-informed. Failure to keep our staff well-informed. Failure to establish what our communities think.	1,2,3,4	Community Risk Management Plan (Governance Strategy) Directorate and Department Plans	2	3	M	TC	Implement the most recent HMICFRS Inspection Improvement Plan and the HMICFRS Values and Culture Report recommendations.	AM Service Assurance	31/10/2024	2	2	M	OP	Treat
		Failure to implement and comply fully with the range of Fire Standards Board Fire Standards.	Failure to establish what our staff think							Implement improvements and suggestions identified by our staff. (Staff surveys, Staff Engagement Days)	AM People & Organisational Development	31/10/2024					
		Failure to act in relation to the key findings from the most recent internal staff opinion/cultural survey.								Deliver compliance with the Fire Standards Board Fire Standards.	AM Service Assurance	31/03/2025					
		Failure to consult effectively with our communities regarding the strategic direction of the Service.								Comply with our responsibilities from a data protection and GDPR perspective.	AM Service Assurance	31/03/2025					
		Failure to achieve compliance with								Build improved trust and engagement with our communities, ensuring that communication methods are effective.	AM people & Organisational Development	31/12/2024					

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		UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018 in relation to the use of people data.								Evaluate activities to inform future initiatives and improvements. Manage our organisational risks and ensure our business continuity plans are effective and tested regularly.	AM Service Assurance AM Service Assurance	31/10/2024 31/12/2024					
18/01	We fail to achieve compliance with UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018	The actions of our staff and agents working for us processing our personal data; or failure of our technical security to protect against external threats	A breach of Statutory obligation as a Public Authority	1,2	Assurance Learning and Development Resources	4	3	H	TC	Find a solution to replace use of WhatsApp as a dynamic group information tool and implement. Following the dissolution of Forge Health treat the residual Data Protection risks still associated with Occupational Health (as identified in the independent review). New SIRO – Discussions to take place with the new role holder and what skills, knowledge and training they may have and what else is needed. Compliance with the NFCC Fire Data Standard – Data Management.	ICT Manager ICT Manager/Commercial Procurement Manager IG Manager (DPO) IG Manager (DPO)/ICT Manager	30 April 2023 30 June 2023 31 December 2023 31 December 2023	3	2	M	OP	Treat

Chapter 2 - Project Risks

PROJECT REF	HAZARD STATEMENT	RISK ASSESSMENT SCORES				PROJECT CONTROL MEASURES
		L	C	R	ML	
23/P01	Western Refurbishment Project There is an issue regarding the availability of supplier resources from the Estates Team. This may affect the ability to deliver the project within timescales.	3	4	VH	ST	Consider other internal resource to assist with project management, consider use of YMD Boon to support wider elements of project.
23/P02	Market Bosworth Refurbishment Project There is a risk that there is not sufficient service project manager resource available.	4 ↑	3 ↓	VH	ST	Communicate risk with senior managers, consider additional internal resource, consider expanding role of building surveyors, clarify internal responsibilities and communicate contacts with key internal contacts/ resource.
23/P03	Views Replacement Project There is a risk that issues with other systems or resource outside of the project could result in delays (e.g. FireWatch project progress, Systel warehouse, HR availability to support sickness data validation, replacement data warehouse)	2	4	H	TC	Review project task timelines - re prioritise data sources to manage delays. Close engagement with other projects and data owners around expected completion of tasks and availability. Consider alternative data sources.
23/P04	Oracle Project T&D not using LMS to record all training/qualification activity as their primary system. There are multiple recording methods that were in use pre-LMS, which have not been phased out and take precedence over the LMS. This is leading to error within the data sets of the LMS and subsequently impacting upon the confidence of LMS reporting with the end user.	4 ↑	4	VH ↑	ST ↑	Learning & Organisational Development plan to support Training & Development in moving to using the LMS as their primary system has been sent to T&D for contracting agreement.

Chapter 3 - Health, Safety and Welfare Risks

H&S REF	HAZARD STATEMENT	RATIONALE	RISK ASSESSMENT SCORES				CONTROL MEASURES	Date of last Assurance at H&S Committee
			L	C	R	ML		
21/HS01	Management of contaminants (Specific Hazard) There is a possibility that staff could come to harm as a result of exposure to contaminants during their employment with the Service. LFRS has a moral and legal obligation to reduce the risk posed to staff in the long, medium and short term.	<p>The interim guidance from the UCLAN / FBU research has now been published.</p> <p>The HSE has been asked for this to form the basis of risk control for contaminants</p> <p>The scientific review identifies significant potential risks for Firefighters and other staff who attend fire scenes and identify control measures which will require planning, investment and cultural changes to implement.</p> <p>The impact of the risk is very high as it is linked to fatal illness as well as other issues such as morale.</p> <p>The likelihood is medium/low as the impact is likely to be experienced in the long term.</p>	2	5	VH	ST	<ul style="list-style-type: none"> Review how risk information is passed on to other organisations re contaminants Review of risk assessments in relation to working in the appliance bay, BA workshop, fire investigators. Post fire activities, working with other organisations or allowing them to enter fire scenes Review PPE and equipment provision particularly gloves, water bottles and bags for soiled kit Review washing protocols and the implications for warranties for fire hoods and helmet cradles Review the welfare procedure in relation to food, rest and hygiene requirements. Hydration, crew rotation and the delivery of fresh PPE to scenes should also be included Review how exposure to contaminants can be managed for high exposure roles such as in learning and development and consider whether the service needs to introduce standards around tenure PPE surveys to resume Review deployment of crews returning to stations with bagged up kit 	January 2023
21/HS02	Management of manual handling (Specific Hazard) There is a possibility that staff may come to harm as a result of the failure to apply appropriate manual handling techniques. LFRS has a moral and legal obligation to reduce the risk posed to staff in the long, medium and short term.	<p>Manual handling is especially problematic within fire services as lifts have to take place in time critical scenarios when staff are already fatigued.</p> <p>This puts the individual at greater risk as they are less likely to lift in a textbook manner and are more vulnerable to injury when already fatigued.</p> <p>In non-fire scenarios, lifts are often undertaken in poor postural positions due to the layout of domestic premises.</p> <p>The impact of this risk is significant as many lifts could have the potential to injure operational staff as textbook technique cannot be applied due to the limitations detailed above plus there is a specific risk of injuring a vulnerable person such as a bariatric person or elderly, infirm or end of life patient as lifting them could be inherently hazardous.</p> <p>Likelihood is medium high as these lifts are commonplace and the standard control measures in the hierarchy of control are not</p>	3	4	VH	ST	<ul style="list-style-type: none"> Training improvements. Lifting sheet roll out. Manual handling procedure. Liaison regarding care plans. Manual handling assessments to be developed further. Introduction of targeted fitness training trial to build core strength and reduce potential for manual handling injury. 	July 2023

		available to the service in most instances.						
21/HS03	Health and Safety training provision (Management Risk) There is a risk that LFRS may not meet its obligations to provide effective health and safety training for staff resulting in a potential for harm and possible breach of statutory duty.	The service has a legal responsibility to provide effective H&S training for managers to ensure that these managers understand their responsibilities and implement the control measures relevant for the protection of our staff and others. This lack of training may result in the service being found directly in breach of its duties or it may lead to a breach in another statutory H&S duty. The risk's impact is significant due to the potential for statutory breach, however, likelihood should reduce.	2	5	VH	ST	<ul style="list-style-type: none"> • Completion of roll out of management training. • Health and safety training input delivered to new recruits. • IOSH Supervising Safely delivered to Level 1 ICS qualified staff – currently 36% Completed course. • Station Managers are nominated for NEBOSH General certificate. 	July 2023
21/HS04	Failure to complete suitable and sufficient Health and Safety Risk Assessments (Management Risk) There is a risk that LFRS may fall in its duty to ensure an adequate and effective system of H&S risk assessment is in place, which may result in harm to staff and failure to meet statutory obligations.	A number of LFRS staff have successfully passed the IOSH risk assessment course provided by Leicestershire Police. Despite this cadre of trained staff being available, fewer risk assessments have been developed than was originally intended. Impact is high as lack of risk assessments and the actions that they drive can be a breach of duty, however, the likelihood of this happening will diminish under the new system when implemented.	2	5	VH	ST	<ul style="list-style-type: none"> • Monitor roll out and adoption of the new form. • Internal QA process by Health and Safety Team. • TBRA Scrutiny through use of existing risk management committees. • Risk assessments covered in IOSH and NEBOSH training. 	July 2023
21/HS05	Inability to maintain fire fighter competence for basement firefighting	Concerns have been raised regarding the safety of basement firefighting. The Balmoral bar incident in Scotland is the highest profile of these incidents and involved the death of a fire fighter who was unable to reach safety. LFRS firefighters have received burns during basement fire training at the fire service college. Until we can train our firefighters to an appropriate standard of competency we are at risk of a firefighter becoming injured at a basement fire due to competency gaps.	2	5	VH	ST	<ul style="list-style-type: none"> • Introduce an effective training course through outsourcing, expansion of the Hot Fire Training Unit at the Caterpillar site or await new training facility becoming available. 	July 2023
22/HS01	There is a risk that our staff could injure themselves whilst carrying out fitness training within Service premises.	While this risk exists, the provision of fitness and gym facilities should always be regarded within a wider context as a control measure within the operational environment and contributor to health and wellbeing for staff in general.	3	2	M	TC	<ul style="list-style-type: none"> • Maintenance of gym equipment • Inspection of gym equipment • Monitoring of inspection outcomes • Creation of risk-based inspection regime • Purchasing of equipment to follow trend analysis of inspection failures • Purchasing of equipment to eliminate additional fixings and complicated design • Official approval process for new equipment • Gym surveys • Inspection improvements based on Microsoft 365 form 	January 2023

							<ul style="list-style-type: none">• Official system put in place to defect equipment that has broken or failed inspection or maintenance• Prioritisation system for purchasing equipment for space limited gyms• Review of options for safety event reporting	
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Assessments Removed or Archived During the Current Calendar Year

RAT ID	HAZARDOUS EVENT	STRATEGY OUTCOME AT RISK	FINAL RISK SCORE				REASON FOR REMOVAL	DATE REMOVED
			L	C	R	ML		
22/HS01	There is a risk that our staff could injure themselves whist carrying out fitness training within Service premises.	N/A	3	2	M	TC	Following a discussion within the Health and Safety Committee, it was decided that the level of risk has been brought to a level that is as low as reasonably practicable (ALARP) and would therefore be closed on the Organisational risk register (ORR) and would move to Business as Usual (BAU).	08/11/2023

Risk Assessment Matrix

CONSEQUENCE	5		21/HS01 21/HS03 21/HS04 21/HS05	18/02	15/04 20/04	
	4		21/05 21/06 21/07 23/P03 23/S2	21/HS02 23/P01	23/P04	
	3	19/01	23/S1 23/S3 23/S4 23/S5	15/07 17/01	18/0123/P02	15/05
	2		17/05 18/03	16/06		
	1					
		1	2	3	4	5
LIKELIHOOD						

RISK VALUE	
VERY HIGH	High level risk with the potential to cause catastrophic damage to the reputation, finances or governance of the Service
HIGH	Mid-high level risk possibly requiring significant amendment to policy/procedure and significant financial outlay
MEDIUM	Low-mid level risk possibly requiring new policy and/or some financial outlay
LOW	Low level risk capable of being managed within normal service policy and procedure

Risk Management Matrix

CONSEQUENCE	5		21/HS01 21/HS03 21/HS04 21/HS05	18/02	15/04 20/04	
	4		21/05 21/06 21/07 23/P03 23/S3	21/HS02 23/P01	23/P04	
	3	19/01	23/S1 23/S3 23/S4 23/S2	15/07 17/01	18/0123/P02	15/05
	2		17/05 18/03	16/06		
	1					
		1	2	3	4	5
LIKELIHOOD						

MANAGEMENT LEVEL	
CORPORATE	Those risks likely to require management oversight by the CFA and/or SLT
STRATEGIC	Those risks likely to require management oversight by SLT
TACTICAL	Those risks likely to require management oversight by the HSW Committee and sub-groups, Tactical Manager's Team (TMT) and/or individual Directors
OPERATIONAL	Those risks likely to require management oversight by individual Group and Station Managers and/or TMT

Glossary of Terms and Abbreviations

Hazardous Event - A potential event that can cause harm

Likelihood (L) - The chance of something happening. May be described by the probability, frequency or uncertainty of event

Consequence (C) - The outcome of an event. Specifically, the severity or extent of harm caused by an event

Operational (OP) - Those risks likely to require management oversight by individual Group and Station Managers and/or GMT

Tactical (TC) - Those risks likely to require management oversight by the HSW and CRM Committee and sub-groups, Group Manager's Team (GMT) and/or individual Director

Strategic (ST) - Those risks likely to require management oversight by SLT

Corporate (C) - Those risks likely to require management oversight by the CFA and/or SLT

Low (L) - Low level risk capable of being managed within normal service policy and procedure

Medium (M) - Low –mid level risk possibly requiring new policy and/or some financial outlay

High (H) - Mid-high level risk possibly requiring significant amendment to policy/procedure and significant financial outlay

Very High (VH) – High level risk with the potential to cause catastrophic damage to the reputation, finances or governance of the Service