

Appendix A – HMICFRS Action Plan

Action No.	HMICFRS No.	Area For Improvement	Issue to be addressed	Action	SLT Lead	Target date	Complete	Comments
1	1.1	Yes	Develop an up to date, comprehensive Community Risk Profile (CRP) of County Durham and Darlington using a wide range of data. Use this CRP to inform the IRMP. Test the expectations of the IRMP through the use of operational data.	Develop an up to date, comprehensive Community Risk Profile (CRP) of County Durham and Darlington using a wide range of data. Use this CRP to inform the IRMP. Test the expectations of the IRMP through the use of operational data.	Head of Corporate Resources	May-21	Yes	The Community Risk Profile (CRP) was reviewed in light of the work done on the Service risks for the Degradation Plan and Station Profiles. This CRP informs the latest version of the Community Risk Management Plan 2021-24 which was fully consulted and has been published on the Service's website.
2	1.1	Yes	The Service should ensure its firefighters have good access to relevant and up-to-date site-specific risk information.	Design a new system for the collection of risk information for firefighters. Ensure all relevant buildings are included within this system with appropriate risk ratings. Design a quality assurance process to assure the service of the system's effectiveness.	AM Emergency Response	Mar-21	Yes	A new system has been developed which utilises the new iPads and Nintex software. A separated ORI Administration tool linked to the SharePoint site and dashboard has been developed for the ORI administrators. The Divisional Managers and the administrators quality assure all risk information. New and reviewed incident plans are also being submitted regularly. All risk information is added to the MDTs, once approved, making it available to crews at incidents.

3	1.1	No	Strategy documents do not cover all areas of the organisation. And some managers had no, or only limited, knowledge of these strategies.	Produce strategy documents covering the whole of the organisation. Once produced develop a communications plan so staff are aware of these strategies and how they impact on them.	Head of Corporate Resources	Aug-20	Yes	Strategies have been developed to cover all areas of the organisation by Heads of Service. These have a clear link to the CRMP. These have been agreed and signed off by SLT.
4	1.1	No	Fire stations have district plans. Station-based staff are clear on important performance areas and report on them. However, some staff are not clear how these plans contributed to meeting the Service's strategic objectives.	Once district plans are produced develop a communications plan, so station-based staff are aware of these district plans and how they contributed to meeting the Service's strategic objectives.	AM Emergency Response	Mar-21	Yes	Following the restructure to two Divisions it was decided to produce individual station plans. 15 station plans have been completed and are due to go live 1st April 2021. All stations now have a specific action plan to deliver the mitigating actions for the risks identified in their station areas through the Community Risk Profile. All station plans are located in the station hub SharePoint portal to give visibility to all operational staff and divisional management teams. All station plans include the important prevention, protection and response performance areas. A LearnPro training module has been created to describe the Community Risk Profile and how the delivery of the station plans reduces community risk and meets the Service's strategic objectives. From April 2021, operational crews will update plans to record their performance data and activities. The delivery of the station plans will be communicated through performance meetings at the end of each month.

5	1.2	Yes	The Service should ensure staff have received appropriate training of all the issues covered during a safe and well visit.	Develop a training plan to ensure staff are comfortable to address all the issues covered during a safe and well visit.	AM Community Risk Management	Dec-20	Yes	Each watch and on call team will be subject to best practice support visit by a Community Risk Officers (CRO) three times per annum. The themes for the commencement of Best Practice visits are safe and well visits, hoarding, safeguarding and make every contact count (MECC) and SWVs. A programme for each theme is produced so that all watches get the same input, and we have a record of elements covered in the sessions. Safe and well visits were the first theme covered and included understanding the targeting pyramid, use of the iPad, what to cover during a visit, how to target properties i.e., Scheduled/revisit/high risk, the importance of the lifestyle questions and the impact of referrals. Laminated guides have been provided to all stations to keep with the toolbox. This training was delivered during the CRO best practise visits to all crews between October to December 2020.
6	1.2	Yes	The Service should evaluate all its prevention work, so it understands the benefits better.	Develop an approach to evaluation to ensure all areas of prevention are appropriately evaluated including local prevention activities.	AM Community Risk Management	Jul-21	Yes	An evaluation framework has been introduced with three levels of evaluation based on the scope, cost and risks associated with projects/ initiatives. A number of activities have been identified to be evaluated for their effectiveness and these will be added to as and when community safety initiatives are completed. An evaluation repository has been set up to collate all evaluations.

7	1.2	No	Some staff did not have a good awareness of the priorities for prevention work set out in the Prevention Strategy.	Develop a plan to ensure staff have a good awareness of the Prevention Strategy, including the pyramid targeting approach.	AM Community Risk Management	Dec-20	Yes	Each watch and on call team will be subject to best practice support visit by a Community Risk Officers (CRO) three times per annum. The themes for the commencement of Best Practice visits are safe and well visits, hoarding, safeguarding and make every contact count (MECC) and SWVs. A programme for each theme is produced so that all watches get the same input, and we have a record of elements covered in the sessions. Safe and well visits were the first theme covered and included understanding the targeting pyramid, use of the iPad, what to cover during a visit, how to target properties i.e., Scheduled/revisit/high risk, the importance of the lifestyle questions and the impact of referrals. Laminated guides have been provided to all stations to keep with the toolbox. This training was delivered during the CRO best practise visits to all crews between October to December 2020.
8	1.2	No	Data shows the Service is below the England rate for safe and well visits to elderly persons and persons with a disability.	Revalidate that the Service is comfortable with the approach to targeting vulnerable persons.	AM Community Risk Management	Dec-20	Yes	The high-risk targeting tool has been updated with a PowerBi report developed so that crews can access the data. The Service continues to use a range of data sets to identify vulnerable people, in line with the approach outlined in the NFCC person centred approach. More work will be conducted to align to the NFCC person centred approach in 2021.

9	1.2	No	Guidance for when to give wellbeing advice during a safe and well visit is vague.	Provide further guidance to staff for when they should give wellbeing advice during a safe and well visit.	AM Community Risk Management	Dec-20	Yes	Each watch and on call team will be subject to best practice support visit by a Community Risk Officers (CRO) three times per annum. The themes for the commencement of Best Practice visits are safe and well visits, hoarding, safeguarding and make every contact count (MECC) and SWVs. A programme for each theme is produced so that all watches get the same input, and we have a record of elements covered in the sessions. Safe and well visits were the first theme covered and included understanding the targeting pyramid, use of the iPad, what to cover during a visit, how to target properties i.e., Scheduled/revisit/high risk, the importance of the lifestyle questions and the impact of referrals. Laminated guides have been provided to all stations to keep with the toolbox. This training was delivered during the CRO best practise visits to all crews between October to December 2020.
10	1.2	No	The Service should ensure it has an effective quality assurance process for its safe and well visits.	Design a quality assurance process to assure the service of the quality of safe and well visits.	AM Community Risk Management	Dec-20	Yes	The Service now uses three methods to provide assurance of the quality of SWVs, these being: <ol style="list-style-type: none"> 1. Follow up calls by Control Staff to ask questions following a SWV, 2. A new electronic questionnaire provided to occupiers to complete, and 3. CROs are now conducting a range of best practise visits to crews to share best practise but also ask questions and provide additional training to crews were required.

11	1.2	No	The Arson Reduction Team has no specific objectives.	Consider producing specific objectives for the Arson Reduction Team.	AM Community Risk Management	Aug-20	Yes	Specific objectives for the Arson Reduction Team have been developed and are detailed in the arson and deliberate fire reduction delivery plan. This plan has a three-year delivery plan aligned to the NFCC national arson reduction strategy.
12	1.2	No	The Service does not have a clear policy for its approach to road safety, including evaluation of activities.	Produce a clear policy for the Service's approach to road safety, including evaluation of activities.	AM Community Risk Management	Jun-21	Yes	Road safety and evaluation is included within the Prevention strategy 2020/21-2022/23. A specific policy has been produced to set out the services commitment to supporting partners in the delivery of road safety activities across the service area. This new policy will be aligned to the County Durham and Darlington Road Safety Strategy and will outline how CDDFRS will support the multi-agency delivery of this plan. This area of prevention was highlighted as an area of improvement during the OpeRA audits. A new action has been developed in the OpeRA action plan to improve the Service's road safety work. This action will be monitored through the OpeRA action plan by PPB. Marked as complete for the purposes of this action plan.
13	1.3	Yes	The Service should ensure operational staff are trained to carry out fire safety audits competently.	Review fire safety training for operational staff against national guidance.	AM Community Risk Management	Jun-20	Yes	Compliance with the NFCC fire safety competency framework is included in the business fire safety strategy 2020/21 – 2022/23 and includes training at all levels for staff to demonstrate compliance against the framework. The new NFCC framework for Business Fire Safety Regulators requires a minimum of a Level 3 Certificate in Fire Safety to conduct audits under the Fire Safety Order. A programme of training to formally qualify operational staff across the Service has commenced. As of June 2020, there are 32 station-based staff

								who are qualified to either Level 3 or Level 4 Certificate in Fire Safety and a further 40 places to train competent operational station-based staff has been requested via the TNA for 2020-21. All new wholtime firefighter trainees and apprentices will be qualified to a Level 3 Certificate and the Level 3 qualification has been integrated into Crew Managers' development.
14	1.3	Yes	The Service should ensure it has an effective quality assurance process for its audit process.	Review the quality assurance process for fire safety audits to ensure it is effective and robust.	AM Community Risk Management	Mar-21	Yes	The practice note has been reviewed and published including reference to the business fire safety management indicators. An external Quality Assurance peer review was conducted by Northumberland FRS on Friday 26 February 2021 with positive results.
15	1.3	Yes	The Service should ensure that Business Fire Safety staff have the capacity and skill to use the full range of its available enforcement powers.	Review the capacity and skills of the Business Fire Safety team to ensure the service can use the full range of its available enforcement powers.	AM Community Risk Management	Sep-20	Yes	The Business Fire Safety Team have four officers qualified to Level 4 Diploma which ensures that the full range of enforcement powers can be used. The Service Level Agreement with the Service's legal advisor includes annual legal training for the team.
16	1.3	Yes	The Service should ensure it works proactively with local businesses to support compliance with fire safety regulations.	Develop and deliver a clear approach to business engagement with local businesses to support compliance with fire safety regulations.	AM Community Risk Management	Mar-21	Yes	A communications and engagement strategy has been developed in collaboration with the Communications Team which is targeted at businesses regulated under the Fire Safety Order by CDDFRS. The strategy is divided into sections with information on the target audience, communication channels and tactics, and how seminars, the business liaison forums, digital media, Service website and post fire audits will be used.

17	1.3	No	The information used to identify high-risk buildings for fire safety audits is limited.	Review the process for identification of high-risk buildings for driving Business Fire Safety activity.	AM Community Risk Management	Mar-21	Yes	<p>A data cleanse has been completed with 3,000 additional properties added. CFRMIS using the guidance laid out by Government (IRMP Note 4) calculates this relative risk rating and identifies inspection frequencies for premises. An algorithm which takes into account size, building type, compliance rating, occupation numbers etc.</p> <p>The relative risk score considers a detailed analysis of national data (including information from the National Incident Recording System (IRS)) and data from other sources. This includes evidence-based, empirical evaluations of the risk in buildings in terms of:</p> <ul style="list-style-type: none"> • the frequency of fires nationally by type of premises, taken from the IRS based on national and international, data: • the effectiveness of passive and active fire precautions; • the impact of fire safety management; and compliance levels from audits • the societal risk presented by the type of occupancy, e.g. less mobile occupants. <p>The Service's approach to its risk based inspection programme also forms part of the external peer review.</p> <p>We will take cognisance of any new guidance from the NFCC Definition of Risk Project when issued and adjust our processes if required.</p>
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18	1.3	No	Protection staff aren't confident that the risk-based inspection programme includes all the buildings that fall under the legislative requirements for inspection.	Review the risk-based inspection programme to ensure it includes all the buildings that fall under the legislative requirements for inspection.	AM Community Risk Management	Mar-21	Yes	A data cleanse has been completed with 3,000 additional properties added. These will be added to CFRMIS to be included in the risk-based inspection programme.
19	1.3	No	The limited amount of specialist protection skills within the service means that there are times when no specialist is working.	Review the out of hours provision of qualified Business Fire Safety Officers.	DCFO Service Delivery	Nov-20	Yes	A corporate Business Fire Safety Officer has been assigned to one of the FDO rota groups, so all groups have a dedicated fire safety officer. Additionally, the other corporate Business Fire Safety Officers are available to cover any adhoc shortages on the rota.
20	1.3	No	Only few satisfaction surveys for business fire safety audits are returned.	Investigate opportunities to increase the return of satisfaction surveys for business fire safety audits.	AM Community Risk Management	Sep-20	Yes	An electronic satisfaction survey has been developed which will also allow for results to be automatically compiled without manual input or interrogation. Businesses who have received an inspection will receive an email (and a follow up email) with a link to complete the survey. Those who do not complete it will receive further follow up to encourage an increased response. This will be trialled over the next few months and the practise note will be amended to reflect the new procedure.
21	1.3	No	The service should make sure it strikes the right balance between working with, and supporting, businesses and using its enforcement powers, so businesses comply with legislation.	Evaluate the Service's approach to taking enforcement action to ensure the current balance between informal and formal actions is achieving fire safety compliance.	DCFO Service Delivery	Apr-21	Yes	An updated Fire Safety Enforcement Policy Statement has been written to ensure a consistent approach to enforcement. The peer review conducted by Northumberland FRS broadly agreed with CDDFRS enforcement decisions, however in the opinion of NFRS, one inspection in relation to a complaint could have resulted in the issue of a prohibition notice rather than it being recorded as unsatisfactory, and advice given. This concludes the evaluation of our approach

								to enforcement action, however as a result some legal training is being arranged for later in the year to support this and further scrutiny and monitoring of enforcement action will be taken by the AM for CRM and BFS Manager throughout the coming year.
22	1.3	No	It hasn't yet been possible to formally assess whether this new approach is reducing attendance at false alarms.	Evaluate if the new approach to reducing attendance at false alarms is working.	DCFO Service Delivery	Apr-20	Yes	An evaluation paper was presented to Combined Fire Authority on 17th March. This paper was accepted, and the decision taken to implement the cost recovery process for repeated UwFS in premises that the FSO applies to, on a permanent basis from 1 April 2020.
23	1.3	No	The Service has chosen not to engage with any Prime Authority Schemes.	Clarify the Service's approach to Primary Authority schemes.	DCFO Service Delivery	Aug-20	Yes	The assessment of the capacity to engage with a Primary Authority Scheme has been included in the new Business Fire Safety strategy. This will depend on the size and requirements of a partner organisation, and the marketing and engagement process to engage in a PAS has been documented with the new BFS strategy.
24	1.4	Yes	The Service should ensure it has an effective policy to determine how it aligns its resources to risk, during periods of low fire engine availability.	Develop a degradation plan for aligning resources to risk, during periods of low fire engine availability.	AM Emergency Response	May-20	Yes	A comprehensive degradation plan has been developed and was approved by SLT in May 2020.
25	1.4	Yes	The Service should ensure it has an effective system of debriefing to enable staff to learn from operational incidents and to improve future	Review the current system of debriefing to ensure staff are learning from operational incidents.	AM Assets & Assurance	Jun-20	Yes	The debrief process has improved and is functioning at all levels 1 - 3. Between Jan - April 2020, there was a level 1 debrief at 86% of all incidents. This compares to 43% in 2018. In this same time period Jan - April 2020, there were 8 level 2 and 3 debriefs. The OAG monitor to ensure level 2 and 3 debriefs are

			response and command.					completed at all relevant incidents. These debriefs have contributed to 71 new learning items in 2020 and 22 Organisational Learning Posts, taking the total to 114. Additionally, these debriefs have led to 2 submissions to NOL and 2 submissions to JOL. The OAG will continue to monitor debriefing as part of business as usual.
26	1.4	Yes	The Service should assure itself that it has procedures in place to record important operational decisions made at incidents and that these procedures are well understood by staff.	Review the current processes for the recording of important operational decisions and implement any improvement actions. Review the recording of these decisions through the debriefing system.	AM Assets & Assurance	Mar-21	Yes	The use of decision logs has been re-enforced during Incident Command Training. The new Operational Readiness Audits (OpeRAs) include checks of officer's logbooks. The Operational Assurance Group made decision logs a theme for incident monitoring on Effective Command. Evidence through Effective Command and recent OpeRAs indicate an improvement in the knowledge and understanding of decision logbooks and the actual recording of key decisions.
27	1.4	No	The service couldn't demonstrate how the Response Strategy is based on a thorough understanding of risk nor fully explain the operational planning assumptions.	Review the Response Strategy to ensure it is based on a thorough understanding of risk and operational planning assumptions.	AM Emergency Response	Aug-20	Yes	The revised Emergency Response Strategy 2020-23 has been signed off and published. The strategy links directly to the community risk plan and CRMP ensuring that it delivers actions based on understanding of risk and planning assumptions. The Strategy's actions include conducting a review of the current response standards and a study of position and disposition of appliances and equipment further cementing the Service's understanding of risk and operational planning.
28	1.4	No	The Service is slow at adopting National Operational Guidance (N.O.G.)	Ensure the Service has a clear and realistic timeline for the implementation of N.O.G.	AM Assets & Assurance	Jun-20	Yes	A new Watch Manager has been appointed and an updated project plan developed with an end date March 2020. During the Covid-19 lockdown period crews have been tasked with work to accelerate the implementation of N.O.G

								product packs. Progress is on track against the new timeline.
29	1.4	No	The service hasn't clearly communicated its response standards to the public.	Clearly communicate the Service's response standards to the public.	DCFO Service Delivery	Apr-20	Yes	The response from the public consultation on response standards has indicated that 53% of respondents are in favour of a response standard review. A review of response standards will take place in year 1 of the new ER Strategy. The Service website has been updated to clearly indicate the current response standards.
30	1.4	No	The response standards reported via the Service's website don't include call handling times.	Review if the response standards reported on the service website should include call handling times.	DCFO Service Delivery	Jun-20	Yes	Call handling times are now published on the service web site (https://www.ddfire.gov.uk/control-calls) and are automatically updated on a daily basis. The Service will continue to develop these published statistics.
31	1.4	No	Some supervisor-level commanders were unaware of or had only limited technical knowledge of the command decision-making process.	Through training and an audit process ensure supervisor-level commanders have good technical knowledge of the command decision-making process.	AM Assets & Assurance	Mar-21	Yes	The OpeRAs starting in March 2020 have specific questions to check officer's awareness and understanding of the command decision making process. This process is covered in all Incident Command development days at STC. The Decision Control Process (DCP) has been made a theme for operational monitoring through Effective Command. Evidence through Effective Command and recent OpeRAs indicate an improvement in the knowledge and understanding of the DCP.
32	1.4	No	The service should assure itself that staff read and understand operational learning.	Develop a process to give assurance that staff have read and understand published operational learning.	AM Assets & Assurance	Oct-20	Yes	A survey button has been added to the bottom of the latest news post. A process has been developed whereby those staff checking the survey button can be reviewed against all staff required to read the learning. The OpeRA process includes questions on operational

								learning which confirms staff are reading and understanding the learning.
33	1.5	No	The Service needs to develop a better approach to identifying its highest risk sites.	Review the current process for identifying the highest risk sites and implement any recommended improvements.	AM Emergency Response	Mar-21	Yes	This action is linked to Action No.2 and has been worked on in parallel. As detailed in this action a new system has been developed. This system allows stations to identify and complete ORI on high-risk sites. New incident plans have been developed for high risks such as the A1, A19 and potential wildfire sites. Through working with the Environment Agency, we now share specific information on waste sites. This collaboration has included the sharing of intelligence and plans at these high-risk sites.
34	1.5	No	The service couldn't provide evidence of when it has last tested plans for incidents at high-risk sites.	Include testing of plans at high-risk sites within the Service exercise calendar, keeping appropriate records through the debrief system.	AM Assets & Assurance	Oct-20	Yes	The Service exercise procedure has been reviewed to clarify expectations in this area. All exercise themes are coordinated and monitored through the Operational Assurance Group (OAG) to ensure plans for identified risks and high risks sites are tested.
35	1.5	No	Some operational staff are not aware of plans for high-risk sites.	Develop and deliver a communication plan to ensure all operational staff are aware of plans for high-risk sites.	AM Emergency Response	Apr-20	Yes	The District Management Teams will be working with watches to ensure that their crews are aware of current plans for high-risk sites and how to access these. The communication plan included Organisational Learning post 111 'Accessing risk information on the MDT' published on SharePoint for all personnel to view. Knowledge and understanding of this will be assessed during the 2020 Service Operational Readiness Audits.

36	1.5	No	Some operational staff are not aware of cross border risk information on MDTs.	Develop and deliver a communication plan to ensure all operational staff are aware of cross border risk information on MDTs.	AM Emergency Response	Apr-20	Yes	This action is linked to Action No.36 and has been completed in parallel.
37	1.5	No	The approach to exercising with neighbouring fire and rescue services has been ad-hoc.	Ensure a coordinated approach to cross-border exercising within the Service's exercise calendar.	AM Assets & Assurance	Oct-20	Yes	The Service exercise procedure has been reviewed to clarify expectations for cross border exercises. All exercise themes are coordinated and monitored through the Operational Assurance Group (OAG) including cross border exercises to ensure plans are tested.
38	2.1	Yes	The service needs to show a clear rationale for the resources allocated between prevention, protection and response activities. (Page 10 of the report also highlights that information in the IRMP should be used to support this allocation of resources.)	Review the IRMP to ensure there is a clear rationale for the Service's allocation of resources to prevention, protection and response activity.	Head of Corporate Resources	Nov-21	Ongoing	Greater clarity has been included in the CRMP 2021-24 (pg 33-35) highlighting the allocation of resources to risk and links to the CRP detailing consideration of various foreseeable risks. Finance have been tasked to complete a piece of work to evidence the spend across prevention, protection and response to review the cost against the output in these areas.
39	2.1	Yes	The service should ensure that it is reviewing, monitoring and evaluating all collaboration activity.	Through the collaboration register ensure that all collaboration activity is regularly reviewed, monitored and evaluated.	Head of Corporate Resources	May-21	Yes	A new Collaboration strategy has been developed which gives clear guidance on monitoring and reviewing activity. The collaboration register is now reviewed regularly through the Performance and Project Board. The register includes a section on evaluation.

40	2.1	Yes	The service should ensure it has good business continuity arrangements in place that take account of all foreseeable threats and risks. It needs to review and test plans thoroughly.	Through SMT ensure all business continuity plans are regularly reviewed. Through PSG ensure all plans are tested on a risk basis.	AM Assets & Assurance	Mar-21	Yes	A new Business Continuity Officer post was agreed in the restructure to support this area of work. A complete review has been undertaken by the Business Continuity Officer and internal processes have been aligned to the International Standard for Business Continuity ISO22301. Business continuity plans are a standing agenda item at SMT with review of plans scheduled with an overview of testing through the Protective security Group (PSG). Business continuity has been tested and improved through the Coronavirus pandemic.
41	2.1	No	The service needs to ensure that it continues to monitor the use of Operational Cover Contracts to ensure its continuing sustainability	Review the use of Operational Cover Contracts including associated costs to ensure the approach is fully understood and remains sustainable.	AM Emergency Response	Jul-20	Yes	A review of current use of OCC has taken place to understand key areas of use over the current financial year. Some areas account for reduced establishment levels and the honouring of annual leave periods during the Durham/ Spennymoor trials. Firefighters have been transferred in from other services, a new trainee course is due to allow additional firefighters to give operational cover during July 2020 and a further cohort of firefighter apprentices are now deployed onto stations which has resulted in increased establishment in emergency response which will reduce the need for the use of OCC. Following the publication and implementation of the degradation plan in March 2020, a daily restriction of OCC per shift has been set. A monitoring RAG rating and reporting mechanism into SLT has been established to manage OCC spend within tolerance limits. Where there is a requirement for further personnel the degradation plan will be utilised to ensure that appropriate emergency response cover is met. Workforce Development

								meetings monitor staffing levels on a monthly basis including forecasting of retirement levels and staff both joining and leaving the service. Further work has been conducted in relation to establishment and ridership levels and will be considered longer term.
42	2.1	No	Several of the Service's corporate documents are either missing, contain inaccurate information, or have passed their review dates.	Review all policies and procedures to ensure they are available and in date.	AM Emergency Response	Mar-21	Yes	An in-depth review of current service policy and procedure was undertaken in December 2020. As a result, it was identified that there were 7 policies, 35 procedures and 5 information notes out of date. This indicated that 84% of documents were current and within review date. Analysis of due dates moving forward over the next five years has been considered and a revised action plan has been issued to SMT to aim for 100% currency. An overview of all policies and procedures is presented to SLT quarterly.
43	2.1	No	The Service doesn't give training to managers who have business continuity responsibilities.	Review training for managers who have business continuity responsibilities and implement any recommendations.	AM Assets & Assurance	Mar-21	Yes	Training from the Emergency Planning College has been delivered to managers. A LearnPro for all staff has been developed by the Business Continuity Officer and will be launched in Business Continuity Week in May.
44	2.2	No	The technology of tablets is dated and unreliable and staff find them frustrating to use.	Ensure tablets used by staff are user friendly and support improved ways of working.	Head of Corporate Resources	May-21	Yes	New iPads have been piloted and have now been issued to all stations. Staff can use this for a variety of system including safe and well, hydrants and ORI. The old tablets have been retired. An evaluation of the end user experience was undertaken by ER and the feedback will be used to support continual improvement.

45	3.1	Yes	The service should ensure that required actions arising from health and safety investigations happen on time and any identified learning is implemented.	Review all previous health and safety investigations to ensure all actions have been completed. Implement a quality assurance process to ensure timely investigations and effective completion of any identified learning.	AM Assets & Assurance	Jul-20	Yes	All previous health and safety investigations have been reviewed and the section are working with those responsible to complete all outstanding actions. A quality assurance process has been developed and was implemented by April 2020. A performance indicator to monitor performance against this action was introduced in April 2020 and is monitored by PPB. The last two months have reported zero occurrences for this indicator, and it will be continued to be monitored by PPB.
46	3.1	No	The Service doesn't always meet current procedure timelines to complete health and safety event investigations.	Review all previous health and safety investigations to ensure all actions have been completed. Implement a quality assurance process to ensure timely investigations and effective completion of any identified learning.	AM Assets & Assurance	Jul-20	Yes	All previous health and safety investigations have been reviewed and the section are working with those responsible to complete all outstanding actions. A quality assurance process has been developed and was implemented by April 2020. A performance indicator to monitor performance against this action was introduced in April 2020 and is monitored by PPB. The last two months have reported zero occurrences for this indicator, and it will be continued to be monitored by PPB.
47	3.1	No	Some staff had only limited awareness about the new trauma support service.	The service should continue to promote staff understanding of the trauma support service to embed it in the workplace.	Head of People and Organisational Development	Jul-20	Yes	At the time of the inspection the Trauma Support Team was only newly introduced. The Trauma Support Team (TST) was promoted again through the bulletin for several weeks during March 2020. It also featured in a comms briefing video in March 2020 which outlined how the Trauma Support Team has progressed since implementation, as well as asking for additional volunteers. Staff are always contacted after traumatic incidents and teams are engaging with the process where appropriate.

48	3.1	No	The Service only collects limited information on staff survey respondents, which makes understanding the results and implementing targeted improvements more difficult.	Collect more detailed information on respondents to the staff survey to allow more targeted improvements.	Head of People and Organisational Development	Jul-21	Yes	Working with Durham University Business School (DUBS) the Culture survey has been completed with a 54% return rate. The survey results include data on employee type (WT, on call, corporate), Locality (North, South, HQ/Trg/TSC), Gender, length of service and age.
49	3.1	No	Some staff perceive that the Service treats those who sign resilience contracts more favourably than those who don't.	Continue to take steps to reassure staff that those who don't sign a resilience contract are not put at a disadvantage.	ACO Service Support	Apr-21	Yes	Further explanation of the requirements for FRA to have effective business continuity arrangements in place in accordance with the Civil Contingencies Act 2004 and the FRS National Framework were discussed at the Leadership Forum and feedback has been given by DCFO as part of a fireflash to all staff on 21/05/21. Updates to arrangements are being scoped following the feedback and the conversation will continue with staff.
50	3.2	Yes	The service should ensure the effectiveness of its workforce planning to enable it to meet operational and organisational needs.	Review the content of the workforce plan to ensure it takes account of the required staffing numbers and skills across the whole service.	Head of People and Organisational Development	Apr-21	Yes	A review of the Strategic Workforce Plan has taken place. The Workforce Planning Group membership has been reviewed, has a set terms of reference, agenda and minutes to record decisions and aid better evidence collation. Analysis and forecasting of retirement profiles and skills gaps will continue to ensure effective workforce planning is in place. Recruitment plans for the next 24 months including 'initial route to competence' have been developed and will be regularly monitored to ensure accuracy is maintained.

51	3.3	Yes	The service should assure itself that staff are confident using its feedback mechanisms.	Engage with staff to identify the underlying reasons for these concerns. Measure these areas during the staff survey. Take action following the findings of this engagement.	ACO Service Support	Aug-21	Yes	The service has reviewed its grievance procedure. A fairness action plan has been developed and is managed by the ACFO which details a range of strategies to implement to improve fairness. The People Business Partners have been set objectives around this area and they record details of issues resolved informally to assist with the monitoring of trends. The number of grievances submitted has increased over the past year which demonstrates confidence in our processes. The culture survey results showed improved levels of procedural fairness which demonstrates a positive direction of travel. Workplace incivility has also reduced, with high levels of engagement, and voice behaviour also reported. However, the results do show moderate levels of Silence due to fear which measures people withholding ideas or having a fear of speaking up due to fear of negative consequences. This outcome is slightly higher than when previously measured. This will be further explored through the focus groups which have been planned for November 2021.
52	3.3	Yes	The service should assure itself that it has effective grievance procedures which staff are confident in using.	Engage with staff to identify the underlying reasons for these concerns. Measure these areas during the staff survey. Take action following the findings of this engagement.	ACO Service Support	Jul-21	Yes	The service has reviewed its grievance procedure. A fairness action plan has been developed and is managed by the ACFO which details a range of strategies to implement to improve fairness. The People Business Partners have been set objectives around this area and they record details of issues resolved informally to assist with the monitoring of trends. The number of grievances submitted has increased over the past year which demonstrates confidence in our processes. The culture survey

								results showed improved levels of procedural fairness which demonstrates a positive direction of travel. Workplace incivility has also reduced, with high levels of engagement, and voice behaviour also reported. However, the results do show moderate levels of Silence due to fear which measures people withholding ideas or having a fear of speaking up due to fear of negative consequences. This outcome is slightly higher than when previously measured. This will be further explored through the focus groups which have been planned for November 2021.
53	3.3	Yes	The service should improve understanding of positive action among staff.	Engage with staff to review their understanding of positive action and implement any actions required to improve this understanding.	ACO Service Support	Sep-21	Yes	Initially, this was to be explored alongside our regional FRs to develop a joint positive action strategy however, regional collaboration around positive action activities was put on hold by TWFRS. A positive action strategy for CDDFRS has been written and included within the ED&I strategy. A positive action programme for the next cohort of apprentices commenced in October 2021 with the ACO launching a short video to all staff around what positive action is. This will be followed by a crews news communication directly to station-based staff who are undertaking PA activities as well and further visits from People business partners. The service is also involved with the NFCC working group for recruitment, one element of this is positive action which allows the Service to share good practice and learn from others success in this area.

54	3.3	No	The service needs to ensure its staff understand how the survey is developed to prevent misunderstanding of the questions.	Develop and deliver a communication plan for the staff survey, so staff understand the reasons for the survey and how the questions have been designed.	ACO Service Support	Jun-21	Yes	There was a comprehensive communications plan developed to launch the cultural survey. The survey has now been completed with a 54% return rate. As part of the communication plan DUBS fed back to staff over Teams on the survey outcomes.
55	3.4	Yes	The service should ensure its selection, development and promotion of staff is open, accessible and fair.	The service should ensure it follows a promotion policy that details all aspects of the promotion process to ensure fairness, consistency and openness.	Head of People and Organisational Development	Sep-20	Yes	A new uniformed promotion procedure has been implemented. A guidance document and a standardised template has been produced for panel members with guidance documents. To ensure this approach ensures fairness, consistency and openness there is robust quality assurance. The new guidance document and standardisation template were used during the recent SM promotion panel and will be used again during the upcoming WM/ CM panels in June 2020 to ensure a consistent approach is followed.
56	3.4	Yes	The service should put in place an effective process to identify, develop and support high potential staff and aspiring leaders.	Although the Service has a process to identify, develop and support staff with high potential to be senior leaders in the future, uptake is low. Review the current process then engage with staff to increase participation with this process.	Head of People and Organisational Development	Feb-21	Yes	The Leadership framework has been designed and was launched at the leadership forums in March / April. This is further supported by a range of LearnPro training modules around managing performance and guidance documents. Succession planning processes have proved successful with the following either gaining a substantive or temporary role from the 19/20 nominations - 81% supervisory managers, 44% Middle Manager, 66% strategic. The process ran again in 2020 with an increase in applications made. Procedures have been reviewed to ensure succession planning links more directly with promotion opportunities. The FRANSys system has also been re-designed to encompass talent

								management and simplify the performance management process. Guides have been developed for managing talent which are available in the system. CMI programmes continue to progress at level 3 & 5. A mentoring programme has been developed and implemented and linked specifically to succession planning.
57	3.4	No	Some staff do not understand what the new appraisals system is trying to achieve, and some managers do not know how to conduct an effective appraisal.	Explain to staff what the new appraisals system is trying to achieve and consider further training to maximise the effectiveness of the new appraisals system.	Head of People and Organisational Development	Apr-21	Yes	The guide to performance excellence has been approved by SLT and forms the basis of how the new appraisal process will work. The FRANSys appraisal system has been reviewed and relaunched. The revised system simplifies the grading system. The launch has been supported by a range of guides and support for line managers via the People Business Partners and through a range of online events to support use of the new system. This topic was also covered at the recent Leadership Forums. Appraisal training will be given to new supervisory managers as part of the revised course.