Public Document Pack

BEDFORDSHIRE FIRE AND RESCUE AUTHORITY

Councillor P Downing (Chair)
Councillor C Atkins
Councillor M Ayub
Councillor Y Waheed
Councillor J Mingay
Councillor M Riaz

A meeting of **Human Resources Policy and Challenge Group** will be held at **Conference Room, Fire and Rescue Service Headquarters, Kempston, Bedford MK41 7NR** on **Wednesday, 16 December 2015** starting at **10.00 am.**

Union Representatives have been invited to attend the meeting.

Karen Daniels
Service Assurance Manager

A G E N D A

Item	Subject	Lead	Purpose of Discussion
1.	Apologies	Chair	
2.	Declarations of Disclosable Pecuniary and Other Interests	Chair	Members are requested to disclose the existence and nature of any disclosable pecuniary interest and any other interests as required by the Fire Authority's Code of Conduct.
3.	Communications	Chair	
4.	Minutes	Chair	To confirm the Minutes of the meeting held on 29 September 2015 (Pages 1 - 8)
5.	Human Resources Performance Monitoring 2015/16 Quarter 2 and Programmes to date	ACO	* To consider a report (Pages 9 - 20)

Item	Subject	Lead	Purpose of Discussion
6.	New Internal Audit Reports	ACO	* To consider a report (Pages 21 - 36)
7.	Corporate Risk Register	HSSP	*To consider a report (Pages 37 - 40)
8.	Service Gyms and Equipment	HSSP	* To consider a report (Pages 41 - 46)
9.	Review of Human Resources Policy and Challenge Group Effectiveness	ACO	* To consider a report (Pages 47 - 50)
10.	Review of Work Programme 2015/16	Chair	*To consider a report (Pages 51 - 56)
	Next Meeting		10.00 am on 15 March 2016 at Conference Room, Fire and Rescue Service Headquarters, Kempston, Bedford MK41 7NR

DECLARATIONS OF INTEREST

From 1 July 2012 new regulations were introduced on Disclosable Pecuniary Interests (DPIs). The interests are set out in the Schedule to the Code of Conduct adopted by the Fire Authority on 28 June 2012. Members are statutorily required to notify the Monitoring Officer (MO) of any such interest which they, or a spouse or civil partner or a person they live with as such, have where they know of the interest.

A Member must make a verbal declaration of the existence and nature of any Disclosable Pecuniary Interest and any other interest as defined in paragraph 7 of the Fire Authority's Code of Conduct at any meeting of the Fire Authority, a Committee (or Sub-Committee) at which the Member is present and, in the case of a DPI, withdraw from participating in the meeting where an item of business which affects or relates to the subject matter of that interest is under consideration, at or before the consideration of the item of business or as soon as the interest becomes apparent.

For Publication

**Bedfordshire Fire and Rescue Authority
Human Resources Policy and Challenge
Group
16 December 2015
Item No 4**

MINUTES OF HUMAN RESOURCES POLICY AND CHALLENGE GROUP MEETING HELD ON 29 SEPTEMBER 2015

Present: Councillors P Downing (Chair), C Atkins, M Ayub and J Mingay

ACO Z Evans, SOC T Rogers, GC K Moores, WC S Daniels, Ms J Burnett and Ms D Clarke

15-16/HR/018 Apologies

An apology for absence was received from Councillor Waheed.

15-16/HR/019 Declarations of Disclosable Pecuniary and Other Interests

There were no declarations of interests.

15-16HR/020 Communications

There were no communications.

15-16/HR/021 Minutes

RESOLVED:
That the Minutes of the meeting held on 23 June 2015 be confirmed and signed as a true record.

15-16/HR/022 Human Resources Performance Monitoring 2015/16 Quarter 1 and Programmes to Date

ACO Evans submitted the report on Human Resources programme, projects to date and performance against Human Resources performance indicators and associated targets for the first quarter of 2015/16.

She advised that the Safety Critical Training project had been completed. From 1 May 2015, all operational and control roles were now subject to development rates of pay on initial appointment with electronic development programmes in place.

There were a number of exception reports for indicators during the first quarter of 2015/16.

The targets for both EQ1 (percentage of new entrants to the operational sector to be women (due to budget constraints this will be measured in relation to retained recruitment only)) and EQ2 (recruitment of minority ethnic staff across the whole organisation) had not been met during the first quarter, as there had been no women or individuals from an ethnic minority background recruited during the reporting period.

Six women had submitted completed application for the RDS role: two had passed the written stage, two had passed the written and practical stage, one was awaiting interview and one had passed all stages and was waiting for medical clearance. It was hoped that this would positively impact on performance in future quarters.

ACO Evans reported that, when the targets were set in March 2016, a target for percentage of new entrants to whole-time positions would need to be considered. Positive action for the recruitment of women and minority ethnic firefighters in the Autumn of 2016 was being delivered now.

In response to a question, Ms D Clarke, Head of Human Resources, advised that focus groups had recently been held with female staff and the general consensus was that the working environment in the Service had improved considerably for women over the years.

Ms J Burnett, the Diversity Adviser, reported that one of the individuals involved in the focus group had volunteered to represent the Service at a recent Girl's Careers Day at Cranfield University.

ACO Evans highlighted continuing good progress against HR1 (the percentage of working time lost due to sickness), which, at 3.21% was out-performing the stretch target of 3.6%.

GC Moores, Training Centre Commander, gave an update on the training and development performance indicators which were not reaching target levels.

In relation to T1 (the percentage of station based operational staff that have attended an assessed BA course within the last two years), GC Moores advised that there had been data issues and members of staff on long-term sick and on modified duties had been included in the figures. Extra courses had been provided as required and there was now more flexibility in the nomination procedures. It was anticipated that performance would improve against this indicator in the second quarter.

In response to a question about attendance rates, GC Moores reported that the attendance rates were generally high, although the weekend courses were less well attended. He reassured Members that when individuals missed courses they were immediately nominated onto the next available course.

Performance against T3 (the percentage of station based operational staff that have attended Water First Responder course within the last three years) had been adversely affected as a number of courses had been cancelled as a result of the dry summer and performance should improve against this indicator during the wetter months.

T4 (the percentage of station based operational staff that have attended Compartment Fire Behaviour course within the last three years), as with the other indicators, related to a small number of individuals compared against a high target.

It was noted that T6 (percentage of station based operational Working at Height Operators that have attended a Working at Height recertification assessment within the last three years) was a new indicator.

T8(b) and (c) (percentage of Safety Critical Maintenance training programme completed by RDS Operational (b) and Control (c) personnel via PDRPro within last 12 months) were short of target with efforts continuing to improve the recording of safety critical training. The training system for Control had recently been reviewed and updated in preparation for the introduction of the new mobilising system.

The health and safety indicators H1 (number of serious accidents [over 28 days] per 1000 employees) and H2 (number of working days/shifts lost to accidents per 1000 employees [excluding Retained Duty System employees]) were both red for the quarter as the result of one accident resulting in 46 days lost when a wholetime firefighter slipped on a fire station floor during routine activities.

RESOLVED:
That the progress made on Human Resources Programmes and Performance be acknowledged.

15-16/HR/023 Health and Safety Annual Report 2014/15

SOC Rogers presented the Service's Health and Safety Annual report for 2014/15. There had been a significant reduction in the amount of time lost as a result of workplace accidents during the year and the number of vehicle collisions.

The Service held a RoSPA Platinum Level 4 Award following an audit in January 2014 and was continuing to put the recommendations made in the audit report in place. The value of putting the Service thorough another audit, given the high level of resources required and the limited number of staff in the Health and Safety Team, was discussed.

Safety Critical Bulletins had been published during the reporting period on hydraulic retarders and disc brakes and fire hydrants – bolted plastic/nylon outlets. Information that was not safety critical included Critical Update Messages which were distributed through the LearnPro system. There had also been 12 Critical Update Messages during the reporting period.

SOC Rogers reported on the use of active monitoring in the Service. This was a proactive method of measuring safety performance against set standards. This was also carried out at operational incidents such as the recent fire at Richbell Court in Bedford's Harpur Ward. The fire on the 14th floor had been contained quickly and the operation had seen the successful work with a number of partners including the Police, Ambulance Service and BPHA.

RIVO was used as part of the formal debriefing system following operational incidents.

RESOLVED:
That the Health and Safety Annual be received and that it be noted that, as a result of the significant amount of work undertaken by the Service to promote and improve health and safety in the organisation, Members requested that the high level of reassurance they felt in reading this report be recorded.

15-16/HR/024 Third Annual Report on the Public Sector Equality Duty

Ms J Burnett, the Diversity Adviser, presented the third annual report on the Public Sector Equality Duty and reported on progress made against the Single Equality Scheme Action Plan.

She drew Members' attention to the positive action activities carried out by the Service. This included the focus groups with women firefighters discussed earlier in the meeting and the Faith Based Football Programme.

She commented that the work undertaken within the organisation had both an internal and external focus.

The Service also maintained a list of over 100 individuals who were female or from minority backgrounds that the Service were able to engage with.

ACO Evans reported that the actions arising from the Single Equality Scheme Action Plan 2015/16 covered all of the Service's functional areas and that work to progress equality was embedded across the organisation.

RESOLVED:
That the submitted report be received and the work done to embed equality across the Service be recognised.

15-16/HR/025 Findings from the Employee Survey 2014/15

Ms J Burnett, the Diversity Adviser, submitted the results of the Employee Survey 2014/15. There had been an increase from the previous survey in 2011/12 in almost every survey area.

The increase on positive responses around worklife balance from 37% to 65% was noted and ACO Evans advised that the previous survey had taken place during the time when the change to 24 hour shift patterns was being consulted on.

She drew Members' attention to the high percentage of employees who, having had an appraisal, agreed that their appraisal was properly conducted (91%) and identified clear targets for them (85%). Both these figures had increased significantly in comparison to the previous survey.

Ms D Clarke, Head of Human Resources, reported that the percentage of appraisals completed was now over 90% throughout the Service.

Ms Burnett advised that one of the areas of consideration arising from the survey results was that there had been an increase in the percentage of employees who disagreed that they were normally treated fairly at work in relation to age, disability and race/colour/ethnic origin/nationality. Further work would need to be undertaken to determine whether this was contextual or if there were any issues that needed to be addressed.

There had also been an increase in the percentage of employees who felt that they were treated unfairly because they belonged to a union.

Members were advised that Employee Surveys reflected the climate at the time and required triangulation for action. This survey had taken part during a National Dispute.

In response to a question, ACO Evans advised that taking part in training for the marauding terrorist firearm team had recently been removed from the mandate for action short of strike which was ongoing.

RESOLVED:
That the outcomes of the 2014/15 Employee Survey be noted and that the 2015/16 Action Plan be approved.

15-16/HR/026 Corporate Risk Register

SOC T Rogers presented his report on the Corporate Risk Register. There had been no updates to individual risk ratings relevant to Group since the last meeting.

He reported on the change to CRR25 (if operational personnel either individually or collectively at any or all levels do not meet the minimum level of competence to safely deal with the full range of incidents which may be encountered, then there is the potential to cause significant injury or even deaths to our staff). Electronic development portfolios had been introduced for all roles up to Service Operational Commander. A bespoke recovery plan for the restoration of critical training and development activities had been developed as part of the Service's business continuity arrangements. The risk had been reduced from 5 to 4 accordingly.

Members were reminded that the recent audit of the Service's Business Continuity and Risk Management had resulted in a green audit opinion.

It was suggested that paper copies of the Corporate Risk Register no longer be circulated at meetings of the Group and that this information be displayed on the screen at the front of the room.

RESOLVED:
1. That the development of the Service's Corporate Risk Register in relation to Human Resources be noted and approved.
2. That the Group no longer receives paper copies of the relevant extracts from the Corporate Risk Register and that this information be displayed on the screen at the meeting.
3. That the other Policy and Challenge Groups and the Audit and Standards Committee consider implementing (2) above at their meetings.

15-16/HR/027 Work Programme 2015/16

Members received the Work Programme for 2015/16. It was noted that the Health and Safety Annual Report would need to be removed from the Work Programme for the December meeting of the Group as it had been considered at this meeting.

It was suggested that, in addition to the scheduled programme of station visits, which were open to all Members of the Authority, a tour of all the stations, to take place in one day, should be arranged for Members.

RESOLVED:
1. That the Work Programme be received.
2. That the Fire and Rescue Authority consider a Members' station tour.

15-16/HR/028 PDR Pro Demonstration

Watch Commander Daniels, Development Support, provided a demonstration of the PDRPro and LearnPro systems. These had initially been introduced into the Service in 2005 to run alongside paper training records.

PDRPro was redesigned in 2010 to improve its interactivity and ease of use. LearnPro was the e-learning module software. Modules were developed in-house and were added to the system as required.

Employees had an individual logins to access their own home pages. The home page showed all the training required for the attainment and maintenance of the competencies required for the job role. This was separated into sections for sub-roles and training activities and showed attainment status. Flags highlighted when training was required within the next six months.

A column had recently been introduced listing all the centrally delivered training run by the Training Centre.

Although individual employees were able to create and amend their records on PDRPro, the Training Centre held all the genuine training records in the event of any discrepancies.

It was noted that all the training on the home page was the safety critical training which was recorded in the performance indicators submitted quarterly to this Group.

GC Moores advised that Captivate was being used to introduce more video and audio into the training modules and to develop a library of case studies.

In response to a question about liaison with local authorities and care homes about fire safety training and fire prevention, ACO Evans advised that DCFO Ranger should be approached to discuss where there might be links between Prevention and Protection and care homes.

GC Moores stated that the e-learning platforms were designed to underpin the competencies required and that practical assessment also took place during specialist courses, operational incidents and simulations.

RESOLVED:
That the presentation be received.

The meeting finished at 11.52am.

This page is intentionally left blank

For Publication

Bedfordshire Fire and Rescue Authority
Human Resources Policy and Challenge
Group
16 December 2015
Item No. 5

REPORT AUTHOR: **ASSISTANT CHIEF OFFICER (HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT)**

SUBJECT: **HUMAN RESOURCES PROGRAMME AND PERFORMANCE 2015/16 QUARTER TWO (APRIL TO SEPTEMBER 2015)**

For further information
on this Report contact:

Adrian Turner
Service Performance Analyst
Tel No: 01234 845022

Background Papers:

Previous Human Resources Quarterly Programme and Performance Summary Reports

---

Implications (tick✓):

LEGAL	✓	FINANCIAL	✓
HUMAN RESOURCES	✓	EQUALITY IMPACT	✓
ENVIRONMENTAL	✓	POLICY	✓
CORPORATE RISK	Known ✓	OTHER (please specify)	
	New	CORE BRIEF	

Any implications affecting this report are noted at the end of the report.

PURPOSE:

To provide the Human Resources Policy and Challenge Group with a report for 2015/16 Quarter 2, detailing:

1. Progress and status of the Human Resources Programme and Projects to date.

2. A summary report of performance against Human Resources performance indicators and associated targets for Quarter Two 2015/16 (1 April 2015 to 30 September 2015).

RECOMMENDATION:

Members acknowledge the progress made on Human Resources Programmes and Performance and consider any issues arising.

1.   Programmes and Projects

1.1   Projects contained in this report have been reviewed and endorsed in February 2015 by the Authority's Policy and Challenge Groups as part of their involvement in the annual process of reviewing the rolling four-year programme of projects for their respective areas in order to update the CRMP in line with the Authority's planning cycle.

1.2   The review of the current programme of strategic projects falling within the scope of the Human Resources Policy and Challenge Group has confirmed that:

➢   All existing projects are complete;

➢   All new projects will be within the medium-term strategic assessment for Human Resources areas; and

➢   The current programme is capable of incorporating, under one or more existing projects, all anticipated additional strategic improvement initiatives relating to Human Resources over the next three years.

1.3   Full account of the financial implications of the Human Resources programme for 2015/16 to 2018/19 has been taken within the proposed 2015/16 Budget and Medium-Term Financial Plan, as presented to the Authority for agreement in February 2015.

1.4   No new Human Resources projects have been added in this period (progress on the HR and Payroll system is covered under Business Systems Improvement and reported to the Corporate Services Policy and Challenge group). However, for information purposes progress on the delivery of the HR and Payroll system is included in Appendix A.

1.5   Other points of note, and changes for the year include the following:

➢   The Corporate Management Team monitors progress of the Strategic Projects monthly. The Strategic Programme Board reviews the Programme at least twice a year with the next Programme Board review scheduled for 11 March 2016.

1.6   Appendix A gives a summary of status to date. No exception reports were submitted during this period, and there are currently no exceptions outstanding. The status of each project is noted using the following key:

Colour Code	Status
GREEN	No issues. On course to meet targets.
AMBER	Some issues. May not meet targets.
RED	Significant issues. Will fall outside agreed targets.

2.   Performance

2.1   In line with its Terms of Reference, the Human Resources Policy and Challenge Group is required to monitor performance against key performance indicators and associated targets for areas falling within the scope of the Group. It has been previously agreed by the Group, that in order to facilitate this, it should receive quarterly summary performance reports at each of its meetings.

2.2   This report presents members with the performance summary outturn for Quarter Two 2015/16 which covers the period 1 April to 30 September 2015. Performance is shown in Appendix B. The indicators and targets included within the report are those established as part of the Authority's 2015/16 planning cycle.

2.3   The status of each measure is noted using the following key:

Colour Code	Exception Report	Status
GREEN	n/a	Met or surpassed target
AMBER	Required	Missed but within 10% of target
RED	Required	Missed target by greater than 10%

3.   Summary and Exception Reports Q2 2015/16

All performance indicators achieved their target, except for:

3.1   **EQ1 Percentage of new entrants to the operational sector to be women. (Due to budget constraints this will be measured in relation to retained recruitment only)**

There were No RDS women firefighters recruited during quarters 1 and 2; there was only 1 male firefighter recruited in the same period. We have three females starting the RDS course on Monday 9 November 2015. Two for Potton Station and one for Sandy. This will be reflected in the quarter 3 results.

3.2 **T1 - Percentage of station based operational personnel that have attended an assessed BA course within the last two years.**

Falls below 98% target by 8%, the additional attendance required to meet 98% target equates to 30 personnel. Overall, 36 personnel require attendance, 30 of whom are currently nominated to attend future programmed courses.
6 personnel require nomination and attendance.

Improving results from Q1 (84%) to Q2 (90%).

Breathing Apparatus Refresher course places have been increased from 10 to 12 where specific requests have been made and additional courses running.

Since 1st January 2015, 36 available places on Breathing Apparatus Refresher courses have been unfilled.

Discussion with Borough and Station Commanders continue to improve understanding and awareness of nominations, maximise capacity on all courses and encourage a pro-active attitude toward safety critical course attendance.

3.3 **T8b - Percentage of Safety Critical Maintenance training programme completed by RDS operational personnel via PDRpro within last 12 months.**

3% short of target of 92% for Retained Duty System personnel, this equates to 4 personnel who have not completed all modules of Safety Critical Training programme.

Discussion with Borough and Station Commanders continues to ensure all operational personnel undertake and record safety critical training as required.

3.4 **H2 - Number of working days/shifts lost to accidents per 1000 employees (excluding Retained Duty System employees).**

Target missed by 9%. There was a total of 20 accidents reported resulting in 38 days/shifts lost during Quarter 2 2015/16. One accident involving a slip on the same level, accounted for 71% (27 days) of days/shifts lost. It should be noted that the Quarter 2 figure for H2 is a significant improvement from Quarter 1 where the target was missed by 36%.

ZOE EVANS
ASSISTANT CHIEF OFFICER (HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT)

HUMAN RESOURCES AND DEVELOPMENT PROGRAMME REPORT

Project Description	Aim	Performance Status	Comments
Business Systems Improvement	Optimise the use of existing business systems and replace where appropriate.	**Green**	**HR & Payroll System:** The Fire Authority, in their meeting of 21 October 2015, approved additional funding £74,000 to provide additional support to run the HR System Project due to new and continued work pressures on the HR Team. Indicative system and service costs have been received from the system provider and Greater Manchester Fire and Rescue Service. These are being evaluated. In the meantime a technical visit has taken place with the prospective system provider to assess their technical provision and security arrangements. The outcome of this assessment was positive. Our approach to integration is under way following this visit and dialogue with the provider is progressing. An options appraisal is now being prepared to consider the way forward in respect to the Service element of the project with include Payroll and System support services.

SUMMARY OF HUMAN RESOURCES PERFORMANCE QUARTER TWO 2015/16

	Measure			2015/16 Quarter 2					
No.	Description	Aim	Full Year Target	Five Year Average	2014/15 Q2	Q2 Actual	Q2 Target	Performance against Target	Comments
	Human Resources								
EQ1	A % of new entrants to the operational sector to be women. (Due to budget constraints this will be measured in relation to retained recruitment only).	Higher is Better	7%	6.25%	12.5%	0%	7%	Red	Only one recruit (male) so far this year
EQ2	Recruitment of minority ethnic staff across the whole organisation	Higher is Better	8%	14.86%	18.75%	10%	8%	Green	10 Recruits included one ethnic minority
HR1	The percentage of working time lost due to sickness	Lower is Better	3.6%	n/a	3%	3.1%	3.6%	Green	13% better than target
HR1b	% working time lost to sickness excluding long term Sickness	For Info Only		n/a	3.44%	3.15%	For Info Only		
HR3a	% of returned appraisal documents to HR within 3 months of reporting year within 3 months of reporting year (end September) Support staff & Station Managers and above	Higher is Better	75%	n/a	n/a	91%	75%	Green	21% better than target
HR3b	% of returned appraisal documents to HR within 3 months of reporting year (end September) Fire-fighters/ Crew & Watch Managers	Higher is Better	50%	n/a	n/a	99%	50%	Green	98% better than target

Item 5.6 Appendix B

SUMMARY OF HUMAN RESOURCES PERFORMANCE QUARTER TWO 2015/16

Measure				2015/16 Quarter 2						
No.	Description	Aim	Full Year Target	Five Year Average	2014/15 Q2	Q2 Actual	Q2 Target	Performance against Target	Comments
Staff Development										
T1	Percentage of station based operational staff that have attended an assessed BA course within the last two years	Higher is Better	98%	96%	93%	90%	98%	Amber	Missed target by 8%
T2	Percentage of EFAD qualified firefighters that have attended EFAD Assessment course within the last three years	Higher is Better	98%	96%	100%	98%	98%	Green	Achieved target
T3	Percentage of station based operational staff that have attended Water First Responder course within the last three years	Higher is Better	98%	75%	93%	98%	98%	Green	Achieved target
T4	Percentage of station based operational staff that have attended Compartment Fire Behaviour course within the last three years	Higher is Better	98%	88%	99%	98%	98%	Green	Achieved target
T5	Percentage of station based operational Emergency Care for Fire and Rescue trained personnel that have attended a requalification course within the last three years.	Higher is Better	98%	n/a	88%	98%	98%	Green	Achieved target

SUMMARY OF HUMAN RESOURCES PERFORMANCE QUARTER TWO 2015/16

Measure				2015/16 Quarter 2					
No.	Description	Aim	Full Year Target	Five Year Average	2014/15 Q2	Q2 Actual	Q2 Target	Performance against Target	Comments
Staff Development (cont.)									
T6	**Percentage of station based operational Working at Height Operators that have attended a Working at Height recertification assessment within the last three years.**	Higher is Better	70%	n/a	29%	75%	70%	Green	7% better than target
T7	**Percentage of Flexible Duty Officers that have attended an assessed Incident Command Assessment within the last 12 months.**	Higher is Better	98%	n/a	100%	100%	98%	Green	2% better than target
T8a	**Percentage of Safety Critical Maintenance training programme completed by W/T operational personnel via PDRPro within last 12 months.**	Higher is Better	92%	n/a	93%	93%	92%	Green	1% better than target

T8b	Percentage of Safety Critical Maintenance training programme completed by RDS operational personnel via PDRPro within last 12 months.	Higher is Better	92%	n/a	88%	89%	92%	Amber	Missed target by 3%

APPENDIX B

SUMMARY OF HUMAN RESOURCES PERFORMANCE QUARTER TWO 2015/16

Measure				2015/16 Quarter 2					
No.	Description	Aim	Full Year Target	Five Year Average	2014/15 Q2	Q2 Actual	Q2 Target	Performance against Target	Comments
Staff Development (Cont.)									
T8c	Percentage of Safety Critical Maintenance training programme completed by Control personnel via PDRPro within last 12 months.	Higher is Better	92%	n/a	74%	93%	92%	Green	1% better than target
T8d	Percentage of senior management roles (SC to AC) personnel attainment in maintaining core, operational safety critical training modules within a rolling 12 month period.	Higher is Better	92%	n/a	n/a	95%	92%	Green	3% better than target
Health and Safety									
H1	Number of serious accidents (over 28 days) per 1000 employees.	Lower is Better	5.84	2.40	0.00	1.94	2.92	Green	34% better than target

Item 5.10 Appendix B

H2	Number of working days/shifts lost to accidents per 1000 employees (excluding Retained Duty System employees).	Lower is Better	438.66	262.43	164.68	238.60	219.33	Amber	Missed target by 9%
H3	Number of 24 hour cover periods lost to accidents per 1000 Retained Duty System (Full Time Equivalent) employees.	Lower is Better	760.59	333.51	188	159.57	380.30	Green	58% better than target

Notes: The comments column on the right hand side shows a comparison of actual against target as a percentage, it should be noted that all targets are represented as 100% and the actual is a percentage of that target.

Item 5.11 Appendix B

This page is intentionally left blank

For Publication

Bedfordshire Fire and Rescue Authority
Human Resources Policy and Challenge
Group
16 December 2015
Item No. 6

REPORT AUTHOR: **ASSISTANT CHIEF OFFICER (HUMAN RESOURCES**
AND ORGANISATIONAL DEVELOPMENT)

SUBJECT: **NEW INTERNAL AUDIT REPORTS**

For further information
on this report contact:

Karen Daniels
Service Assurance Manager
Tel No: 01234 845013

Background Papers:

Baker Tilly Strategy for Internal Audit
Bedfordshire Fire and Rescue Authority 2015/16 to 2017/18

Implications (tick ✓):

LEGAL		FINANCIAL	✓
HUMAN RESOURCES		EQUALITY IMPACT	
ENVIRONMENTAL		POLICY	
CORPORATE RISK	Known ✓	OTHER (please specify)	
	New	CORE BRIEF	

Any implications affecting this report are noted at the end of the report.

PURPOSE:

To present the final report on internal audits completed since the last meeting of the Human Resources Policy and Challenge Group.

RECOMMENDATION:

That Members receive the attached internal audit report and endorse the associated management comments/actions which will be added to the Audit and Governance Action Plan Monitoring report.

Item 6.1

1.   Background

1.1   Internal audits are completed in accordance with the Internal Audit Annual Plan agreed by the Audit and Standards Committee.

1.2   Each internal audit report details:

- the specific audit conducted;
- the scope of the audit,
- an assessment of the controls in place to manage the relevant objectives and risks;
- the auditors recommendations and priority of these; and
- an action plan which has been agreed with the appropriate Functional Head and approved by the relevant Principal Officer for incorporation into the Audit and Governance Actions Monitoring report.

1.3   All Internal audit reports are presented to the appropriate Policy and Challenge Group for endorsement of the actions arising.

2.   Internal Audit Reports

2.1   The Appendix to this report presents the internal audit report on:

2.1.1   Training and Development of Operational Staff (completed on 3 September 2015 and report finalised on 13 November 2015) – Conclusion Amber/Red – Partial Assurance.

2.1.2   The actions arising from these audits will be incorporated as 'new' actions within the Audit and Governance Actions Monitoring Report in March 2016 for on-going monitoring by the Policy and Challenge Group

2.1.3   Any slippage or other exceptions arising will also be reported to and monitored by the Audit and Standards Committee.

ZOE EVANS
ASSISTANT CHIEF OFFICER (HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT)

THE POWER
OF BEING
UNDERSTOOD

BEDFORDSHIRE FIRE AND RESCUE AUTHORITY

Training and Development of Operational Staff

FINAL

Internal Audit Report: 2.15/16

13 November 2015

RSM

CONTENTS

Debrief held	3 September 2015	**Internal Audit team**	Daniel Harris, Head of Internal Audit Suzanne Lane, Senior Manager Alan Grisley, Assistant Manager Anand Mistry, Senior Auditor
Draft report issued	21 September 2015		
Responses received	13 November 2015		
Final report issued	13 November 2015	**Client sponsor**	GC Ian McLaren, Training and Development Manager
		Distribution	Zoe Evans, Assistant Chief Officer GC Ian McLaren, Training and Development Manager

Page 24

1   EXECUTIVE SUMMARY

1.1 Background

A risk based review of the training and development processes in place for operational staff within the Bedfordshire Fire and Rescue Service (the Service) was undertaken as part of the approved internal audit plan for 2015/16. The review was designed to review the controls in place that help to manage the following risk present on the services risk register:

'If operational personnel either individually or collectively at any or all levels do not meet the minimum level of competence to safely to deal with the full range of incidents which may be encountered, there is the potential to cause significant injury or even deaths to our staff.'

Training is delivered either through an e-learning package or via face to face sessions and aims to be a finite intervention to meet a specific need. Development is concerned with ensuring that a person's ability and potential are grown and realised through the provision of learning experiences or through self-managed learning.

The Service has in place two IT systems (PDRPro and Service MIS) which in collaboration manage and record the progress of each member of staff in completing their training and development to become 'competent' in their role.

Competence is assessed against National Occupational Standards (NOS) which has been mapped to each operational role and provides the foundation on which the IT systems have been developed.

1.2 Conclusion

The testing undertaken during this review found that the Service has in place comprehensive systems for monitoring the compliance of their operational staff in meeting national competencies and training objectives however we found a significant lack of compliance by assessors in reviewing and scrutinising the evidence uploaded by firefighters which reduces the level of assurance we can provide on the quality of the records maintained.

Internal Audit Opinion:

Taking account of the issues identified, the Board can take partial assurance that the controls to manage this risk are suitably designed and consistently applied.

Action is needed to strengthen the control framework to manage the identified risk(s).

Page 25
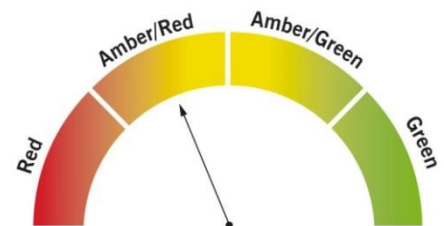
1.3 Key findings

The key findings from this review are as follows:

Systems and Processes

The Service has in place two IT systems (PDRPro and Service MIS) which together capture the training and development records for all operational staff. PDRPro is built upon National Occupational Standards (NOS) which set out the minimum training and competencies needed by a member of staff to effectively and safely undertake their role within the service.

Operational staff are responsible for regularly updating PDRPro to evidence the completion of training requirements and the use of key competencies. It is the role of assessors to review a proportion of the evidence uploaded to ensure that it adequately meets the requirements as set out within the NOS. Where gaps are identified, the managers should engage with the individual to help them develop their skills and maintain their competencies.

Compliance

Indicator	II Year Target	Q1 Actual
The percentage of Safety Critical Maintenance training programme completed by W/T operational personnel via PDRPro within last 12 months.	92%	94%
The percentage of Safety Critical Maintenance training programme completed by RDS operational personnel via PDRPro within last 12 months.	92%	89%

Although the compliance figures above show the Service performing fairly well in meeting safety critical training, our testing undertaken during this review found a significant weakness in the compliance of assessors in reviewing and assessing the quality of the evidence being uploaded to PDRPro. In eight out of the ten cases sampled, little to no management reviews could be evidenced.

As assessors are not actively monitoring and challenging the submissions, there is a risk that training needs are not identified by the assessors or by the staff reflecting on their own requirements which could ultimately increasing the risk to the safety of staff and the public. In addition to this, in the event of an incident that results in the death of a firefighter, the Service may be unable to evidence that a sufficient review of the competence of staff was undertaken; this could expose the Service to significant reputational and financial losses. This has resulted in a **High** priority action.

Reporting

A review of the reporting arrangements found that although assurance is provided to management on a regular basis regarding the volume of evidence being uploaded against the expected amount of evidence. However, no reporting was being undertaken on the level of assessment being undertaken. As discussed earlier, there is a significant compliance issue in this area.

Through discussion with the Workforce Development Manager and the Development Support Officer, we were informed that the Service does not have the capability to run such reports. The Service was in discussions with the system provider to produce this management information.

There is a risk that, although management are assured on the volume of information being captured by PDRPro, they are not receiving assurance that the information is of sufficient quality and this could result in areas where competence is low going unidentified with potential impacts on the safety of staff and the public. This has resulted in a **Medium** priority action.

In addition to the **one high and one medium priority** action noted above, we have also identified **five low priority** findings which are detailed further in sections 2 and 3.

Page 26

1.4 Additional information to support our conclusion

Risk	Control design*	Compliance with controls*	Agreed actions		
			Low	Medium	High
If operational personnel either individually or collectively at any or all levels do not meet the minimum level of competence to safely to deal with the full range of incidents which may be encountered, there is the potential to cause significant injury or even deaths to our staff	4 (7)	3 (7)	5	1	1
Total			**5**	**1**	**1**

* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

1.5 Additional feedback

Suggestion

Service Order Review Dates

The Service could update the service orders to capture their next review date as agreed on the FSE234 review form and captured within the promulgation review spreadsheet.

Good practice for further consideration

Meeting Agenda Packs

The organisation prepares agenda packs for each meeting. The agenda pack contains all of the reports and papers to be considered as part of the meeting and is sent out to all attendees prior to the meeting so that they can review the documents and identify the areas that they wish to challenge.

A copy of the agenda pack is uploaded to an appropriate section of the organisations intranet (internet where appropriate) so that an appropriate record of reports, papers and minutes is retained for evidentiary purposes.

Page 27

2 ACTION PLAN

Categorisation of internal audit findings	
Priority	**Definition**
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may, with a high degree of certainty, lead to: Substantial losses, violation of corporate strategies, policies or values, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

The table below sets out the actions agreed by management to address the findings:

Ref	Findings summary	Priority	Actions for Management	Implementation date	Owner responsible
1	Review of the Volume 9 documents found that a number were overdue for review.	Low	The Head of Training and Development will ensure that the overdue Volume 9 policies and procedures are reviewed and updated where necessary in the timeliest manner.	June 2016	Head of Training and Development

Page 28

2	Testing found that in eight out of ten cases, we could not see a sufficient review and verification of competency and training evidence.	High	The Head of Operations, with the aid of the Training and Development Team, will develop a strategy and action plan to engage assessors and increase the quality and volume of assessments undertaken on PDRPro with regards to both competence completion and the achievement of training outcomes. Regular audits will be undertaken to provide assurance that assessments and verifications are taking place to ensure PDRPro clearly demonstrates competence and the achievement of training outcomes.	December 2015 (Plan) March 2016 (compliance) June 2016 (audit)	Head of Operations The Training and Development Team
4	We found that the course review documentation found that there was no space to record the next review date.	Low	The Quality Support and Training Administrator will update the Review/Amendment Log to capture the minimum next course review date.	June 2016	Quality Support and Training Administrator
5	The planned audit cycle for assuring the quality of service critical training had not been reflected within the Training and Development policies and procedures.	Low	The Health and Safety Advisor and the Course Delivery Manager will work together and put in place a consistent plan to ensure that all service critical training delivered locally is assessed at regular intervals.	June 2016	Health and Safety Advisor Course Delivery Manager
6a	Review of the terms of reference for the ODT and SDMT found that they were not comprehensive and fully set out their roles and responsibilities.	Low	The Executive Director that leads on Governance will review and develop the terms of references for the teams to ensure that they clearly identify their roles and responsibilities and, their reporting requirements.	June 2016	The Executive Director that leads on Governance

6b	Review of the relevant reports found that no information was being presented to assure management that sufficient assessments and verifications where being undertaken.	Medium	The service will continue discussions with PDRPro to develop the ability to run reports which can provide assurance that assessments and verifications are being undertaken.	March 2016 (compliance) June 2016 (audit)	Training and Development Manager
6c	Review of the calculation process found that a simple average was being used where a weighted average would be more appropriate.	Low	When calculating the compliance statistics, the Admin Assistant will use the weighted average calculation method.	March 2016 (compliance) June 2016 (audit)	Training and Development Admin Assistant

3 DETAILED FINDINGS

This report has been prepared by exception. Therefore, we have included in this section, only those risks of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Ref	Findings summary	Priority	Actions for Management	Implementation date	Owner responsible
1	Review of the Volume 9 documents found that a number were overdue for review.	Low	The Head of Training and Development will ensure that the overdue Volume 9 policies and procedures are reviewed and updated where necessary in the timeliest manner.	June 2016	Head of Training and Development
2	Testing found that in eight out of ten cases, we could not see a sufficient review and verification of competency and training evidence.	High	The Head of Operations, with the aid of the Training and Development Team, will develop a strategy and action plan to engage assessors and increase the quality and volume of assessments undertaken on PDRPro with regards to both competence completion and the achievement of training outcomes. Regular audits will be undertaken to provide assurance that assessments and verifications are taking place to ensure PDRPro clearly demonstrates competence and the achievement of training outcomes.	December 2015 (Plan) March 2016 (compliance) June 2016 (audit)	Head of Operations The Training and Development Team
4	We found that the course review documentation found that there was no space to record the next review date.	Low	The Quality Support and Training Administrator will update the Review/Amendment Log to capture the minimum next course review date.	June 2016	Quality Support and Training Administrator
5	The planned audit cycle for assuring the quality of service critical training had not been reflected within the Training and Development policies and procedures.	Low	The Health and Safety Advisor and the Course Delivery Manager will work together and put in place a consistent plan to ensure that all service critical training delivered locally is assessed at regular intervals.	June 2016	Health and Safety Advisor Course Delivery Manager

Page 31

6a	Review of the terms of reference for the ODT and SDMT found that they were not comprehensive and fully set out their roles and responsibilities.	Low	The Executive Director that leads on Governance will review and develop the terms of references for the teams to ensure that they clearly identify their roles and responsibilities and, their reporting requirements.	June 2016	The Executive Director that leads on Governance
6b	Review of the relevant reports found that no information was being presented to assure management that sufficient assessments and verifications where being undertaken.	Medium	The service will continue discussions with PDRPro to develop the ability to run reports which can provide assurance that assessments and verifications are being undertaken.	March 2016 (compliance) June 2016 (audit)	Training and Development Manager
6c	Review of the calculation process found that a simple average was being used where a weighted average would be more appropriate.	Low	When calculating the compliance statistics, the Admin Assistant will use the weighted average calculation method.	March 2016 (compliance) June 2016 (audit)	Training and Development Admin Assistant

Page 32

APPENDIX A: SCOPE

Scope of the review

To evaluate the adequacy of risk management and control within the system and the extent to which controls have been applied, with a view to providing an opinion. The scope was planned to provide assurance on the controls and mitigations in place relating to the following risk:

Objective of the area under review	Risks relevant to the scope of the review	Risk Source
To develop our employees and create a safe, fair and caring workplace for our staff.	If operational personnel either individually or collectively at any or all levels do not meet the minimum level of competence in safely to deal with the full range of incidents which may be encountered, particularly areas of competencies relating to: • Incident Command; • Use of Breathing Apparatus; • Compartment Fire Behaviour; • Water related incidents; • High-Rise incidents; and • Work at Height. There is the potential to cause significant injury or even deaths to our staff.	Risk Register

When planning the audit, the following areas for consideration and limitations were agreed:

Areas for consideration:

• A review of service training and development policies and procedures.

• The use of training needs assessments at each level of the Service and how these are used to build training programmes and courses.

• The use of personal training assessments and how these are monitored to ensure the assessment and the training is completed.

• Compliance with mandatory training and refresher training, and how they are monitored.

• The assessment of new recruits for their operational skills and knowledge and identification of training requirements, including the completion of required training.

• A review of the assessment of the competence of trainers within the Training Dept. and at Stations.

• Review of methods for evaluating the adequacy and effectiveness of the training provided.

• Review of reporting covering training needs and completion of mandatory training have been completed, using sample testing to review the accuracy of those reports.

Page 33

Limitations to the scope of the audit assignment:

• Testing has been conducted on a sample basis only based on records and reporting completed in the last 12 months.

• Testing has focussed only on fire service Officers and has not included fire service Staff.

• We have not commented on the type or appropriateness of the training delivered; only note the progress that has been recorded against training plans in place.

• We have not commented on the competence of trainers, only that a process is in place to assess the completeness and from the review of a sample that the process is being followed.

• No information that can identify a member of staff will be retained for Internal Audit files.

• Our work does not provide any guarantee against material errors, loss or fraud or provide an absolute assurance that material error, loss or fraud does not exist.

Page 34

APPENDIX B: FURTHER INFORMATION

Persons interviewed during the audit assignment:

• GC Ian McLaren, Training and Development Manager

• GC Joe Clayton, Training Centre Commander

• StnC Ivan Finch, Course Delivery Manager

• StnC Kevin Moores, Workplace Development Manager

• WC Simon Daniels, Development Support

• Shirley King, Quality Support and Training Administrator

• Julie Sears, Competence and Development Admin Assistant

Documentation reviewed during the audit assignment:

• Service Order Volume 9: Training and Staff Development (incl. Learning, Training and Development Policy)

• Training and Development Structure Diagram

• Bedfordshire Fire and Rescue Service Staff List

• Staff Training Records via PDRPro and Service MIS

• Operational Delivery Team, Service Delivery Management Group, Corporate Management Team and, Combined Fire Authority Terms of Reference, minutes and papers which relate to training compliance.

• Course Content and Materials Folders

FOR FURTHER INFORMATION CONTACT

Name: Suzanne Lane

Email address: suzanne.lane@bakertilly.co.uk

Tel: 07720 508148

Name: Alan Grisley

Email address: alan.grisley@bakertilly.co.uk

Tel: 07528 970123

rsmuk.com

For Publication **Bedfordshire Fire and Rescue Authority Human Resources Policy and Challenge Group**
16 December 2015
Item No. 7

REPORT AUTHOR: **HEAD OF SAFETY AND STRATEGIC PROJECTS**

SUBJECT: **CORPORATE RISK REGISTER**

For further information   Service Operational Commander Tony Rogers
on this Report contact: Head of Safety and Strategic Projects
Tel No: 01234 845163

Background Papers: None

Implications (tick ✓):

LEGAL			FINANCIAL	
HUMAN RESOURCES			EQUALITY IMPACT	
ENVIRONMENTAL			POLICY	
CORPORATE RISK	Known	✓	CORE BRIEF	
	New		OTHER (please specify)	

Any implications affecting this report are noted at the end of the report.

PURPOSE:

To consider the Service's Corporate Risk Register in relation to Human Resources.

RECOMMENDATION:

That Members note and approve the review by the Service of the Corporate Risk Register in relation to Human Resources.

---

1.   Introduction

1.1   Members have requested a standing item to be placed on the Agenda of the Policy and Challenge Groups for the consideration of risks relating to the remit of each Group. In addition, the Fire and Rescue Authority's (FRA) Audit and Standards Committee receives regular reports on the full Corporate Risk Register.

1.2   An extract of the Corporate Risk Register showing the risks appropriate to the Human Resources Policy and Challenge Group together with explanatory notes regarding the risk ratings applied is appended to this report.

2. Current Revisions

2.1 The register is reviewed on a monthly basis during the Service's Corporate Management Team (CMT) meetings and by CMT members between these meetings if required. A copy of the risks relevant to the Human Resources Policy and Challenge Group are attached for your information and approval.

2.2 Changes to individual risk ratings in the Corporate Risk Register: All risks that are reported to the Human Resources Policy and Challenge Group have been reviewed and there are no risk updates to report to Members.

2.3 Updates to individual risks in the Corporate Risk Register:

- **CRR25: If operational personnel either individually or collectively at any or all levels do not meet the minimum level of competence to safely deal with the full range of incidents which may be encountered, then there is the potential to cause significant injury or even deaths to our staff:** The Service's Internal Auditors, RSM, recently undertook a review that included the CRR25 Risk with the draft report being presented to the Head of Training and Development in October 2015. The report stated that '*the Service has in place comprehensive systems for monitoring the compliance of their operational staff in meeting national competencies and training objectives'*. The report contains several recommendations that are currently being addressed. Following the approval of the draft report it will be presented to Members as per normal reporting arrangements.

- **CRR40: If there is a retirement of a large number of operational officers over a short period of time then we lose significant operational and managerial experience within the Service which could ultimately affect our Service Delivery and wider corporate functionality in the shorter term:** The Corporate Management Team, in particular the Head of Human Resources and the Head of Training and Development regularly review the establishment figures and on a planned quarterly basis to ensure that the Service has strategies in place to maintain staffing levels. Following a review of the establishment, including the recent turnover of staff retirements and leavers, a Wholetime Firefighter recruitment campaign has been agreed and is currently underway to be realised in 2016.

3. Information Security Management System Project

3.1 The Information Security Management System project that is reported to the Corporate Services Policy and Challenge Group as a corporate project and to the Audit Standards Committee as an Annual Governance Statement action has now been completed.

AREA COMMANDER TONY ROGERS
HEAD OF SAFETY AND STRATEGIC PROJECTS

Explanatory tables in regard to the risk impact scores, the risk rating and the risk strategy.

Risk Rating

Risk Rating/Colour	Risk Rating Considerations / Action
Very High	High risks which require urgent management attention and action. Where appropriate, practical and proportionate to do so, new risk controls must be implemented as soon as possible, to reduce the risk rating. New controls aim to: • reduce the likelihood of a disruption • shorten the period of a disruption if it occurs • limit the impact of a disruption if it occurs These risks are monitored by CMT risk owner on a regular basis and reviewed quarterly and annually by CMT.
High	These are high risks which require management attention and action. Where practical and proportionate to do so, new risk controls *should* be implemented to reduce the risk rating as the aim above. These risks are monitored by CMT risk owner on a regular basis and reviewed quarterly and annually by CMT.
Moderate	These are moderate risks. New risk controls should be considered and scoped. Where practical and proportionate, selected controls should be prioritised for implementation. These risks are monitored and reviewed by CMT.
Low	These risks are unlikely to occur and are not significant in their impact. They are managed within CMT management framework and reviewed by CMT.

Risk Strategy

Risk Strategy	Description
Treat	Implement and monitor the effectiveness of new controls to reduce the risk rating. This may involve significant resource to achieve (IT infrastructure for data replication/storage, cross-training of specialist staff, providing standby-premises etc) or may comprise a number of low cost, or cost neutral, mitigating measures which cumulatively reduce the risk rating (a validated Business Continuity plan, documented and regularly rehearsed building evacuation procedures etc).
Tolerate	A risk may be acceptable without any further action being taken depending on the risk appetite of the organisation. Also, while there may clearly be additional new controls which could be implemented to 'treat' a risk, if the cost of treating the risk is greater than the anticipated impact and loss should the risk occur, then it may be decided to tolerate the risk maintaining existing risk controls only.
Transfer	It may be possible to transfer the risk to a third party (conventional insurance or service provision (outsourcing)), however it is not possible to transfer the responsibility for the risk which remains with BLFRS.
Terminate	In some circumstances it may be appropriate or possible to terminate or remove the risk altogether by changing policy, process, procedure or function.

Item 7.3

For Publication

**Bedfordshire Fire and Rescue Authority
Human Resources Policy and
Challenge Group
16 December 2015
Item No. 8**

REPORT AUTHOR: **HEAD OF SAFETY AND STRATEGIC PROJECTS**

SUBJECT: **SERVICE GYMS AND EQUIPMENT**

For further information
on this Report contact:

Service Operational Commander Tony Rogers
Head of Safety and Strategic Projects
Tel No: 01234 845163

Background Papers: None

Implications (tick ✓):

LEGAL			FINANCIAL	
HUMAN RESOURCES			EQUALITY IMPACT	
ENVIRONMENTAL			POLICY	
CORPORATE RISK	Known	✓	OTHER (please specify)	
	New			

Any implications affecting this report are noted at the end of the report.

PURPOSE:
To provide Members with an overview of the provision and use of fire station gyms across the Service.

RECOMMENDATION:
That Members note the report.

---

1. <u>Introduction</u>

1.1 Following a recent station visit by Members, an enquiry was raised into the provision and use of Service gyms and the arrangements in place to provide such facilities. This paper, in response to the enquiry, provides Members with an overview of the arrangements in providing station gyms, including equipment and maintenance and the arrangements in place for operational staff to assist in maintaining their fitness and the use by support staff as part of working for the Service.

2. Background

2.1 Firefighting is a physically demanding occupation that requires higher levels of fitness than most other occupations; as such the National Role Maps set out specific requirements for operational employees to maintain levels of personal fitness to carry out their tasks as safely and effectively as possible.

2.2 The Authority recognises the importance for operational employees to maintain their fitness in accordance with the National Occupational Standards and the important role fitness has in supporting wider well-being for all employees.

2.3 The support mechanisms provided by the Authority to assist operational staff in maintaining their fitness is afforded in a number of ways:
- Provision of Gyms on all Fire Stations across the Service;
- Provision of appropriately trained staff to deliver and support fitness training;
- Provision for fitness training for Wholetime, Day Crewing, Day Duty and Flexible Duty Staff and access to equipped gymnasiums on all stations for Retained Duty System Staff and for support staff;
- Yearly fitness assessment and development to maintain the standards of personal fitness required for operational employees; and,
- Processes and support for operational employees who have fallen below the required fitness standards including development and support available to regain the necessary levels of fitness.

2.4 The support arrangements as detailed in 2.3 above for operational staff to maintain their fitness is facilitated by the provision of an Occupational Health Unit and an Occupational Health Practitioner with access to a Service Doctor, a Service Physical Fitness Advisor and Watch Physical Training Instructors. The report focusses on fitness but there are other preventative and proactive support facilities in place such as 3 yearly medicals, asbestos screening, an Employee Assistance Programme, confidential advice and guidance, physiotherapy and soft tissue treatment.

2.5 Whilst all of these arrangements provide a holistic approach to supporting the physical wellbeing of operational staff, it is emphasised that the use of Service gym facilities, health and lifestyle advice and voluntary fitness assessments through the Service Physical Fitness Adviser equally apply to all employees.

3. Provision of Service Gyms, Equipment and Use

3.1 Finance, resources and policies are in place to provide appropriate gyms and gym facilities. These facilities include physical training equipment, suitable clothing and footwear for operational employees with recent completed refurbishments to Kempston and Bedford Fire Station gyms as part of the Authority's Capital Programme with a scheduled refurbishment to Luton Fire Station Gym in 2017/18. In addition to the scheduled refurbishments the

Property Team undertakes a 'Conditions Review' within a yearly maintenance budget to address issues across the whole of the Service's estate.

3.2   The Service Physical Fitness Advisor provides advice to management on policy matters concerning fitness related issues which is disseminated to Stations via normal management routes including the Physical Training Instructors attached to Stations who provide instruction on the safe and effective use of physical training equipment.

3.3   The Service Physical Fitness Advisor has a revenue budget that is used for the annual servicing of all station gym equipment and a capital budget that is used for the procurement of new equipment. Following the annual service a report is provided that is used as the basis for any equipment replacement that is coming to the end of its life. The basis of this decision is made in relation to maintenance and repair costs balanced against purchase of new equipment. As part of maximising financial resources the Service has previously accepted free gym equipment from gym equipment providers or training establishments. The decision to accept free gym equipment is based upon a number of factors that include the condition, the potential servicing costs to maintain it and its suitability. All such offers are investigated.

3.4   All new gym equipment is CE (European Conformity) marked and approved prior to procurement. Once procured or received as per all gym equipment, it is then maintained and inspected yearly including certification and risk assessed in line with the Service's health and safety obligations.

3.5   The Service has robust procedures for the reporting and removal of defective gym equipment with budgets for annual servicing, maintenance and equipment replacement when required.

3.6   The Service provides access for fitness training for employees that include:
- Wholetime Shift System - One 60-minute period per 24hr shift cycle;
- Day Crewing Shift System - Two 40-minute periods within the working week;
- Day Duty and Flexible Shift Systems - Two 40-minute periods within the working week;
- Retained Duty system - Access to equipped gymnasiums on all stations; and,
- Green Book Employees - Access to Fitness facilities utilising the flexitime scheme.

4   Station Gym Standards

4.1   Whilst there are no set mandatory standards for the provision of gyms, for example, the type of building construction; there are basic requirements that have been incorporated into service station gyms which include:
- The layout of Station gyms are designed to allow safe use at all times;
- Appropriate safety rules are prominently displayed along with the maximum occupancy numbers and the names and locations of the nearest First Aiders;

- All station gyms are provided with adequate lighting, ventilation, and means of heating and are cleaned at suitable intervals for the delivery of fitness training and regularly inspections; and,
- The implementation of local conditions, for example the pre-heating of gyms that are not attached to the Station's main heating system prior to scheduled use during cold periods.

5   Review of Station Gym Premises

5.1   A site survey of all Station Gyms was conducted in September 2015 by the Property Team which included the assessment of a range of factors encompassing gym location, heating, ventilation, flooring and lighting etc. .

5.2   The outcome of the review concluded that all station gyms were found to be in good condition. Where remedial works were required these have been actioned (See 6.1 below).

6   Actions Being Taken

6.1   The Property Team undertake an annual full 'Conditions Survey' for all station sites which include station gyms. Following the most recent survey in September 2015 the survey found *remedial works* required at Ampthill Fire Station gym which are being actioned. None of the remedial works found during the survey had been reported previously as defects to the Property Team. Within the 'Conditions Review' recommendations were made to check the flat roof areas for Luton and Toddington station gym areas as the roofs are projected to be approaching their end of life and may require works.

7   Conclusion

The provision of gyms across the Service assists operational staff in the maintenance of their fitness standards helping them undertake their role safely and effectively and provide support staff with access to fitness facilities.

The Property Team's Conditions Survey and the Property Defect Reporting process assists in identifying any actions or improvements required.

The focus for the Property Team for 2016/17 are gyms with flat roof areas that are scheduled for replacement as they come to the end of their projected life and will form part of any future capital works if required. The annual servicing of all station gym equipment is currently underway; following completion, any equipment that is no longer serviceable will be replaced or sourced following a cost benefit analysis by the Service Physical Fitness Advisor.

8   Implications

8.1   Corporate Risk: Known. The Service assists operational staff in maintaining
         their high levels of fitness through the provision of station gyms as well as
         providing access to facilities as part of the wider well-being agenda.
         However, maintenance of fitness is a personal obligation for all employees to
         remain fit for role.

SERVICE OPERATIONAL COMMANDER TONY ROGERS
HEAD OF SAFETY AND STRATEGIC PROJECTS

This page is intentionally left blank

For Publication

**Bedfordshire Fire and Rescue Authority
Human Resources Policy and Challenge
Group
16 December 2015
Item No. 9**

REPORT AUTHOR: **ASSISTANT CHIEF OFFICER (HUMAN RESOURCES
AND ORGANISATIONAL DEVELOPMENT)**

SUBJECT: **REVIEW OF HUMAN RESOURCES POLICY AND
CHALLENGE GROUP EFFECTIVENESS 2015/16**

For further information
on this Report contact:

Karen Daniels
Service Assurance Manager
Tel: 01234 845013

Background Papers: None

Implications (tick ✓):

LEGAL			FINANCIAL	
HUMAN RESOURCES			EQUALITY IMPACT	
ENVIRONMENTAL			POLICY	
CORPORATE RISK	Known	✓	OTHER (please specify)	
	New		CORE BRIEF	

Any implications affecting this report are noted at the end of the report.

PURPOSE:

To review the Group's effectiveness in 2015/16.

RECOMMENDATIONS:

That:
1.   Members consider the effectiveness of the Group; and
2.   The recorded Minutes of the meeting be fed into the facilitated meeting to be
held on 27 January 2016 to review the Fire Authority's effectiveness in
2015/16.

---

1.   <u>Introduction</u>

1.1   The Fire Authority publishes an Annual Review of its Effectiveness and
Record of Member Attendance. This Review and a resultant Action Plan are

included in the Fire Authority's Annual Governance Statement, which forms part of the Statement of Accounts.

2. 2015/16 Review of Effectiveness

2.1 On 24 September 2015, the Audit and Standards Committee considered proposals for a review of the Fire Authority's effectiveness in 2015/16 and agreed a Form of Review Questionnaire to be completed by Members for discussion at a facilitated meeting on 27 January 2016.

2.2 Members also agreed a recommendation from an internal audit conducted by RSM Tenon that the Policy and Challenge Groups and the Audit and Standards Committee review their own effectiveness to feed into the annual review of the Fire Authority. It was agreed that Members should be sent the questionnaire via email for completion prior to the meetings of the Policy and Challenge Groups and the Audit and Standards Committee to facilitate the compilation of responses at each meeting.

2.3 Members may therefore wish to consider the effectiveness of the Group by reviewing the responses to the questionnaire and agree that the recorded Minutes of the meeting be fed into the facilitated annual review meeting of the Fire Authority to be held on 27 January 2016.

2.4 In this regard, it should perhaps be noted that Members have agreed a cycle of work for the Group and, at each meeting, consider if there are any reviews or reports they wish to commission.

ZOE EVANS
ASSISTANT CHIEF OFFICER (HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT)

This page is intentionally left blank

For Publication

**Bedfordshire Fire and Rescue Authority
Human Resources Policy and Challenge
Group
16 December 2015
Item No. 10**

REPORT AUTHOR: **ASSISTANT CHIEF OFFICER (HUMAN RESOURCES
AND ORGANISATIONAL DEVELOPMENT)**

SUBJECT: **WORK PROGRAMME**

For further information
on this report contact:

Karen Daniels
Service Assurance Manager
Tel No: 01234 845013

Background Papers: None

Implications (tick ✓):

LEGAL			FINANCIAL	
HUMAN RESOURCES			EQUALITY IMPACT	
ENVIRONMENTAL			POLICY	
CORPORATE RISK	Known	✓	OTHER (please specify)	
	New		CORE BRIEF	

Any implications affecting this report are noted at the end of the report.

PURPOSE:

To report on the work programme for 2015/16 and to provide Members with an opportunity to request additional reports for the Human Resources Policy and Challenge Group meetings.

RECOMMENDATION:

That Members consider the work programme for 2015/16 and note the 'cyclical' Agenda Items for each meeting.

**ZOE EVANS
ASSISTANT CHIEF OFFICER (HUMAN RESOURCES AND ORGANISATIONAL
DEVELOPMENT)**

HUMAN RESOURCES POLICY AND CHALLENGE GROUP: PROGRAMME OF WORK 2015/16

Meeting Date	'Cyclical' Agenda Items		Additional / Commissioned Agenda Items	
	Item	Notes	Item	Notes
16 December 2015	• Audit and Governance Action Monitoring Report • New Internal Audits Completed to date • Human Resources Performance Monitoring Report and Programmes to date • Corporate Risk Register • Review of the Fire Authority's Effectiveness • Work Programme	Note Baker Tilly name change to RSM from Oct 2015		

Meeting Date	'Cyclical' Agenda Items		Additional / Commissioned Agenda Items	
	Item	Notes	Item	Notes
15 March 2016	• Audit and Governance Action Monitoring Report • New Internal Audits Completed to date • Human Resources Performance Monitoring Report and Programmes to date • Approve Annual HR Performance Indicators and Targets for 2016/17 • Annual Equality and Diversity review and report • Corporate Risk Register • Work Programme			

HUMAN RESOURCES POLICY AND CHALLENGE GROUP: PROGRAMME OF WORK 2016/17

Meeting Date	'Cyclical' Agenda Items		Additional / Commissioned Agenda Items	
	Item	Notes	Item	Notes
June 2016	• Election of Vice Chair • Terms of Reference • Audit and Governance Action Monitoring Report • New Internal Audits Completed to date • Human Resources Performance Monitoring Report and Programmes to date • Absence Year End Report • Draft 2016-17 Corporate Health and Safety Objectives • Occupational Accidents Year End Report • Annual Report of Provision of External Training • Review of Employee Assistance Programme • Public Sector Equality Scheme Review • Corporate Risk Register • Work Programme			

Meeting Date	'Cyclical' Agenda Items		Additional / Commissioned Agenda Items	
	Item	Notes	Item	Notes
September 2016	• Audit and Governance Action Monitoring Report • New Internal Audits Completed to date • Human Resources Performance Monitoring Report and Programmes to date • Health and Safety Annual Report • Corporate Risk Register • Work Programme			
January 2017	• Audit and Governance Action Monitoring Report • New Internal Audits Completed to date • Human Resources Performance Monitoring Report and Programmes to date • Corporate Risk Register • Review of the Fire Authority's Effectiveness • Work Programme			

10.5

This page is intentionally left blank