

# West Midlands Fire and Rescue Authority

## Scrutiny Committee

**You are summoned to attend the meeting of Scrutiny Committee to be held on  
Wednesday, 27 March 2019 at 10:00**

**at Fire Service HQ, 99 Vauxhall Road, Nechells, Birmingham B7 4HW**

**for the purpose of transacting the following business:**

## Agenda – Public Session

- |   |   |                |
|---|---|----------------|
| 1 | To receive apologies for absence (if any)                       |                |
| 2 | Declarations of interests                                       |                |
| 3 | Minutes of the Scrutiny Committee held on 27.02.19              | <b>3 - 12</b>  |
| 4 | Review of Safeguarding  | <b>13 - 30</b> |
| 5 | Dispute Resolution  | <b>31 - 50</b> |
| 6 | Operational Assessment Improvement Register - March 2019 Update | <b>51 - 90</b> |
| 7 | Consideration of the Annual Report of the Scrutiny Committee    |                |
| 8 | Scrutiny Committee Work Programme 2018-19                       | <b>91 - 94</b> |

### **Distribution:**

Nicolas Barlow - Member, David Barrie - Member, Greg Brackenridge - Member, Kerry Jenkins - Member, Sybil Spence - Vice Chair of the Scrutiny Committee, Chris Tranter - Chairman, Ann Young - Member



Clerk Name: Karen Gowreesunker

Clerk Telephone: 0121 380 6678

Clerk Email: Karen.Gowreesunker@wmfs.net

**Agenda prepared by Stephen Timmington**

**Strategic Hub, West Midlands Fire Service**

**Tel: 0121 380 6680 email: [strategichub@wmfs.net](mailto:strategichub@wmfs.net)**

**This agenda and supporting documents are also available electronically on the West Midlands Fire Service website at [www.wmfs.net](http://www.wmfs.net)**



Minutes of the Scrutiny Committee

**27 February 2019 at 10:00 a.m.**  
**at Fire Service Headquarters, Vauxhall Road, Birmingham**  
**B7 4HW**

**Present:** Councillor Tranter (Chair).  
Councillors Barlow, Barrie, Brackenridge, Spence,  
and Young

**Apologies:** Councillor Jenkins  
S Middleton

**Observer:** Nil

**1/19 Declarations of Interest in contracts or other matters**

There were no declarations of interest.

**2/19 Minutes of the Scrutiny Committee held on 14 November 2018**

**Resolved** that the minutes of the meeting held on the 14 November 2018 be approved as a correct record.

At the November meeting, it had been agreed that the following points would be addressed:

- a breakdown and profile of call challenge would be provided to Members

It was noted that a report of the Service's approach to call challenge had been submitted to the Committee under item 5 of the agenda (see below).



- in relation to PI 21 The total number of injuries, further information regarding Breathing Apparatus communications would be provided to Members.

Gary Taylor, Assistant Chief Fire Officer provided an update to Members regarding Breathing Apparatus (BA) communications:

There had been 13 near hits reported for BA communication failures, nine of which had been related to tactical ventilation training at the Oldbury high rise training facility. The Service had worked together with Drager to investigate the causes for the near hits, with the aim to improve the reliability of BA communications.

Investigations had discovered that the amount of heat generated was not an issue but had found that the metal casing that formed part of the construction of the facility generated communication black spots. It was noted that although the number of near hits was high, the figure represented a small percentage when compared to the approximate 1500 incidents involving BA over the last four years (equating to 0.8% of incidents for 2017/18, and 0.3% to date in 2018/19).

In answer to Members' questions, the following points were raised:

- The communication black spots were a result of how the facility had been built, in that it was effectively a metal box, which was convenient and effective for the Service, but was not a type of construction that would be found publicly.
- It was possible for communication black spots to be present in other buildings and where identified, would be recorded within the appropriate Site Specific Risk Information (SSRI) for that particular premises. The tunnels at the Black Country Museum were one such example, where the SSRI had identified the need for additional resources to be put in place if an incident involving the tunnels were to occur.



### **3/19 Update on the Review of Safeguarding**

Alan Lotinga, Associate Consultant, West Midlands Association of Directors of Adult Social Care, provided an update and presentation on the progress made so far in the review of safeguarding.

The presentation covered the following areas:

- Overview of the brief and key lines of enquiry
- Outcomes expected
- Progress to date – current position
- Highlights – positives
- Highlights – areas for improvement
- Next steps

Mr Lotinga wished to thank Andrea Simmonds and Pete Wilson, plus all officers and Members who had contributed to and taken part in the review. Everyone involved had been open and constructive to improve, and keen to listen and learn. It was a sign of a healthy organisation.

It was noted that any outcomes of the review would remain proportionate (based on relatively limited resources serving a large population) and context would be provided to recommendations. The areas for improvement identified would be developed into recommendations.

The following points were raised as a result of the update and presentation:

- A Member noted that as a Service, safeguarding was not solely about the people it served, but also for those who delivered the services.
- A Member noted that it was vitally important that the outcomes of the review were raised and discussed with the representative bodies. In particular, considering the expanding roles of Fire and Rescue Services as a key part of the national framework. There needed to be sufficient training, guidance and support in place for staff.



- It was noted that a degree of clarity was required in terms of the difference between enforcing procedures with reference to the disciplinary policy and/or the conduct policy. It was not perceived that any individual would choose not to follow safeguarding procedures, but there was a risk that an individual did not follow such procedures due to a lack of awareness of them.
- The Metro Court Review highlighted an example of where the fire sector had not made the link between safeguarding and risk / vulnerability to fire. There was a need to educate the sector, as the innovative use of safeguarding legislation was another tool which Fire and Rescue Services could use to protect people from the risk of fire.
- It was confirmed that the recommendations from the review would be fed into the Competency Risk Assessments.

Gary Taylor, thanked Mr Lotinga for the work carried out to date and noted that the update and presentation had been very helpful and brought into focus a number of issues and that there was a need to fully understand safeguarding and the link with vulnerability to fire.

#### 4/19 **Analysis of Progress of Quarterly Performance against The Plan Quarter Three 2018/19**

Gary Taylor, Assistant Chief Fire Officer provided an overview of the report:

PI 1 The risk based attendance standard: performance was below target and below the lower tolerance (rated blue) with a quarterly figure of 4 minutes 43 seconds.

Attendance times for category two, three and four incident types remained well within the respective targets:

- Category 2 incident types: 5 minutes 31 seconds (target is under 7 minutes)
- Category 3 incident types: 4 minutes 58 seconds (target is under 10 minutes)



- Category 4 incident types: 6 minutes 36 seconds (target is under 20 minutes)

PI 2 The number of accidental dwelling fires: there had been 1203 incidents year to date. The Home Office had acknowledged that nationally the number of incidents were increasing. However, in the West Midlands the number of incidents year to date were the lowest ever recorded. It was noted that although a data quality check on a small number of incidents had found no errors, a larger check would be carried out at the end of the financial year to ensure the figures were correct.

PI 3 Injuries from accidental fires in dwellings (taken to hospital for treatment): there had been 17 injuries during quarter three, 35 year to date.

PI 4 The number of deaths from accidental dwelling fires: there had been four fatalities experienced year to date.

PI 5 The percentage of Safe and Well visits referred by our partners: performance was below target and below the lower tolerance level (rated red). Examination of the data had shown that the system that was used to track partnership referrals had been used to track additional work streams including initiatives and faulty smoke alarms. This had inadvertently skewed the figures and resulted in a lower than previously expected number of partnership referrals. More work to understand the situation would continue and the Service would have a more informed view of the issue come the end of the year.

PI 6 The number of Safe and Well points achieved by the Service: 238,091 Safe and Well points had been achieved year to date, above the target and the upper tolerance level (rated blue).

PI 7 The number of people killed or seriously injured (KSI) in road traffic collisions: delays with the data continued. It was hoped that more timely and robust figures would be available in the near future. The Service was a key stakeholder in the recently published West Midlands Regional Road Safety Strategy.



The suite of performance indicators for deliberate fires (PIs nine to 12) were all classed as performing within the tolerance levels or over performing. This reflected the proactive work undertaken by staff and partners to reduce the number of incidents.

PI 8 The number of deliberate fires in dwellings: there had been 170 incidents experienced year to date, above target but within the tolerance levels (rated green).

PI 9 The number of deliberate fires in non-domestic premises: performance was below the target and below the lower tolerance level (rated blue). Significant reductions in the number of deliberate fires had been observed at HMP Birmingham.

PI 10 The number of deliberate vehicle fires: performance was below target and within the tolerance levels. Although the number of incidents had spiked nationally, the numbers in West Midlands remained low.

PI 11 The number of deliberate rubbish fires: performance was below the target and below the lower tolerance level.

PI 12 The number of deliberate fires in derelict buildings: performance was below the target and below the lower tolerance level. It was noted that in addition to the securing of sites / target hardening, a number of sites were now in the process of being redeveloped which reduced the potential for these types of incident.

PI 13 The number of accidental fires in non-domestic premises: performance was above target but within the tolerance levels (rated green).

PI 14 The number of false alarm calls due to fire alarm equipment in dwellings and non-domestic premises: performance was above target and above the upper tolerance level. However, a significant reduction in the number of incidents had been observed compared to the previous quarter. It was noted that it was accepted that there were limited tolerances for premises but the Service liaised



with site managers to try to ensure that the number of incidents remained at a minimum.

Helen Sherlock, Senior Business Partner, People Support Services provided an overview of the people related performance indicators:

PI 15 The percentage of employees that have disclosed their disabled status: performance remained relatively constant with a disclosure rate of 94.7%. Performance was with the tolerance levels (rated green).

PI 16 The number of female uniformed staff: performance was just one below target and within the tolerance levels (rated green).

PI 17 The percentage of all staff from Black Minority Ethnic (BME) communities: performance was just below the target and within the tolerance levels (rated green).

PI 17 The percentage of uniformed staff from BME communities: 9.8% of uniformed staff were from BME communities, the same figure as quarter two and within the tolerance levels.

PI 18 The average number of working days / shifts lost due to sickness – all staff: performance was above the target and the upper tolerance level (rated red). An average of 2.27 working days/shifts per person were lost due to sickness during quarter three, equating to 6.02 year to date. The figure was significantly higher than the target and the figures for the previous year. Work was being undertaken to break the figures down into areas with a view to develop better understanding.

PI 19 The average number of working days / shifts lost due to sickness – uniformed and Fire Control staff: performance was above the target and the upper tolerance level (rated red). An average of 2.17 working days/shifts per person were lost due to sickness during quarter three, equating to 5.75 year to date, significantly above the target (and a 17.1% increase compared to the same period during 2017/18).



PI 20 The average number of working days / shifts lost due to sickness – non-uniformed staff: performance was above the target and the upper tolerance level (rated red). An average of 2.64 working days/shifts per person were lost due to sickness during quarter three, equating to 6.93 year to date. Again, sickness levels were significantly above target (representing a 40.9% increase compared to the same period during 2017/18).

Missing sickness details/data remained an issue and work was continuing to understand and improve.

It was noted that the work being undertaken to address the significant under performance would be reported back to the Committee as part of the quarter four update.

PI 21 The total number of injuries: performance was above target but within the tolerance levels (rated green). Slips, trips and falls remained the main cause of injuries (22 of 91 injuries). A 15% increase in near hit reports had been observed, reflecting a positive culture towards health and safety, and that members of staff felt confident to raise such issues. Issues regarding satellite navigation remained one of the main trends; the Service had emphasised to staff that this was an assistive solution and was an additional tool to accompany topography/local knowledge.

PI 22 The total number of RIDDOR injuries: performance was slightly below target and within the tolerance levels (rated green). One significant safety event had been recorded which was being jointly investigated by the Service and Fire Brigade's Union, and would be followed up by the Health and Safety Executive.

In answer to Members questions, the following points were raised:

- With regard to staff declaring their disability status, it was possible that some staff members were not declaring their status as they may not be confident about the system that holds the data. However, some staff members may simply not wish to declare, and



there is no mandatory requirement for a member of staff to declare such information.

- A Member asked if the information on protected characteristics could be broken down further and reported to the Committee. It was noted that:
  - Information regarding protected characteristics were recorded via sub-PIs.
  - The information was collected and reported through the quarterly performance review framework, which flowed into the Scrutiny Committee via this report.
  - The Service reported annually against the set of equality objectives. This could potentially be reported through the Committee.
  - Ways in which further information on protected characteristics could be reported to the Committee would be explored.
- The Chair noted that there was an open invite to all Members if they wished to attend the quarterly performance review meetings.

**Resolved** that the Committee noted:

- the status of the Service's key performance indicators in the third quarter of 2018/2019
- the progress made in delivering the three strategic priorities contained in The Plan 2018-2021
- the update on the performance information system.

It was agreed that:

- Ways in which further information on protected characteristics could be reported to the Committee would be explored

#### 5/19 **West Midlands Fire Service – Call Challenge**

Gary Taylor, Assistant Chief Fire Officer, presented a report on the Service's approach to call challenge:



The report had been submitted to the Committee as a result of a request raised by Members at the Committee's meeting held on 14 November 2018.

The report outlined the Service's Emergency Call Management protocol which was a generic system for the successful management of emergency calls based on the principle that an emergency call can be dealt with within three distinct stages (primary questions, assessment questions, and pre-arrival guidance). The overall aim of using the protocol was to ensure that the response was appropriate to the types of risk and calls attended, reducing the risk to responders and improving public safety.

6/19 **Scrutiny Committee Work Programme 2018-19**

The Committee noted the Work Programme for 2018/19.

The meeting finished at 11:56am.

Contact Officer: Stephen Timmington Strategic Hub West Midlands Fire Service 0121 380 6680
---



**WEST MIDLANDS FIRE AND RESCUE AUTHORITY**

**SCRUTINY COMMITTEE**

**27 March 2019**

1. **SCRUTINY REVIEW OF SAFEGUARDING**

Report of the Chief Fire Officer.

RECOMMENDED

1.1. THAT the Committee considers and approves the attached report and recommendations from the Independent Reviewer appointed to undertake the Scrutiny Review of Safeguarding

2. **PURPOSE OF REPORT**

For the Committee to receive the final report (Appendix 1) and the implementation action plan framework (Appendix 2) from the Independent Reviewer.

3. **BACKGROUND**

3.1 On 4 June 2018, the Scrutiny Committee were asked to consider commissioning a Scrutiny Review of Safeguarding within West Midlands Fire Service (WMFS).

3.2 The Committee were presented with a suggested approach and scope for the review which were agreed.

3.3 The Review commenced in December 2018 and concludes with the presentation of this report.

4. **EQUALITY IMPACT ASSESSMENT**

In preparing this report an initial Equality Impact Assessment has not been carried out. An initial Equality Impact Assessment will be required within the implementation of the recommendations.



5. **LEGAL IMPLICATIONS**

The Independent Reviewers report details WMFS statutory duties under the relevant safeguarding legislation.

6. **FINANCIAL IMPLICATIONS**

Financial implications are dependent upon how WMFS implements the recommendations agreed.

7. **ENVIRONMENTAL IMPLICATIONS**

There are no environmental implications arising from this report.

**BACKGROUND PAPERS**

Item 4 Scrutiny Committee 4 June 2018: Scrutiny Review of Safeguarding – Scoping Document

Item 4 Scrutiny Committee 12 September 2018 – Progress Update

Item 6 Scrutiny Committee 27 February 2019 – Presentation and verbal update

The contact name for this report is Gary Taylor (Assistant Chief Fire Officer), telephone number 0121 380 6006

PHIL LOACH  
CHIEF FIRE OFFICER



**Report to West Midlands Fire & Rescue Authority Scrutiny Committee 27<sup>th</sup> March 2019**

**Review of Safeguarding Arrangements**

**Author of report: Alan Lotinga, Associate Consultant, West Midlands Association of Directors of Adult Social Services (WMADASS)**

1. Introduction and Purpose of Report

1.1 The purpose of this report to review the West Midlands Fire Service's current arrangements for the safeguarding of children and adults in the West Midlands metropolitan area, and to make recommendations for action to improve those arrangements.

1.2 This report follows a presentation and discussion of interim findings at the last meeting of this Committee on 27<sup>th</sup> February.

2. Background

2.1 At its September 2018 meeting this Committee confirmed its agreement to commission and independent review of the Service's safeguarding arrangements, four main objectives or key lines of enquiry for the review, intended outcomes, and the Chair and three other Members agreed to contribute specifically and provide oversight to the review.

2.2 I would like to thank those Members and the Officer Stakeholder Group, and in particular Andrea Simmonds, Pete Wilson, Carol Morgan and Helen Sherlock for their help, support and openness with this review.

2.3 The agreed four main lines of enquiry were as follows:-

- **Leadership** – including whether the policy is owned by the most appropriate Senior Executive Team member so that safeguarding is seen as everyone's responsibility



- The WMFS **policy and procedures** (in particular Standing Order 1712) are compliant with the legislation, statutory guidance and addresses the learning from the Metro Court multi-agency review
- The whole **workforce** has the necessary skills and knowledge to identify safeguarding concerns within the context of their role and apply the policy and processes consistently and competently
- **Quality standards and monitoring processes** in place to ensure safeguarding concerns are identified and managed in accordance with WMFS Policy.

2.4 The outcomes or deliverables being sought from the review were:-

- Analysis of the current safeguarding arrangements within WMFS
- Produce a report providing analysis into the extent to which is WMFS compliant with the four elements of the key lines of enquiry within the scoping
- Make recommendations for action to address gaps and shortfalls and for improvement where required
- Present the analysis and recommendations to WMFRA Scrutiny Committee on 27th February 2019
- Finalise report and recommendations following WMFRA Scrutiny Committee by end March 2019

2.5 The Service approached WMADASS for an objective, independent reviewer and I was invited to submit a bid for this piece of work. I have a wide range of experience and knowledge in relation to the safeguarding of adults and children, both strategically and operationally, including as Director of Adult Social Care and Housing Options and Chair of the Birmingham Safeguarding Adults Board (SAB) up until December 2016. I am currently national Policy Co-Lead on Safeguarding Adults for ADASS.

2.6 My intended approach to this review was as follows:-

- A clear understanding of where we (West Midlands Fire Service) need to get to with regard to safeguarding arrangements
- An informed, objective assessment of where we are at now – in a format making it relatively easy to compare to where we need to get to



- A SWOT-type (strengths, weaknesses, opportunities and threat) analysis to identify gaps and shortfalls/threats between where we are and where we need to get to, but also key things to keep and strengthen, potential opportunities and relationships to develop further, and some thoughts/suggestions on what other partners etc might be able to do to help us. Mindful here that the scope of the review and, therefore, the format of the analysis and implementation plan needs to cover policy, training and development, roles and responsibilities, recruitment/selection/induction, governance/assurance/monitoring, and specific suggestions in relation to the future role of the WMFS Lead for Safeguarding.
- Converting this into a suggested implementation or action plan framework – to be developed into who needs to do what by when to get to where – and how progress can be monitored and reviewed.

2.7 In undertaking this review, I have been particularly mindful of the scale and breadth of the population served (a total population served of some 2.57 million people across seven metropolitan local authority areas, with a wide range of needs and population diversity), and the fact that you have to work with 14 different Safeguarding Boards or equivalent, with some quite different approaches and expectations. This is at time of austerity and increasing public expectations of public services. Also, the issues having to be faced by the Service are in the context that the most recent main legislation and statutory guidance governing/driving safeguarding – the Care Act 2014 and the Children and Social Work Act 2017 – make no mention of any specific statutory safeguarding responsibilities placed on the Fire Service. The primary safeguarding partners statutorily are Local Authorities, the NHS and Police. Having said this, of course, the Fire Service is expected to comply with or be mindful of an extensive list of other, related legal duties in the delivery of its services, including from:-

- Fire and Rescue Services Act 2004
- Human Rights Act 1988
- Mental Health Act 2007
- Mental Capacity Act 2005
- Children Acts 1989 and 2004
- Safeguarding Vulnerable Groups Act 2006 and the Protection of Freedoms Act 2012
- Public Interest Disclosure Act 1998
- Modern Slavery Act 2015
- Counter Terrorism and Security Act 2015
- Data Protection Act 1998



- General Data Protection Regulations 2018
- Police and Crime Act 2017

2.8 Reflecting this scale and breadth of these responsibilities and pressures, I have also been mindful of the necessary scale and complexity of the Service's staffing structure. As at January 2019 you employed, along with volunteers, 1889 people – 1395 of whom were uniformed, 63 in Fire Control and 431 non-uniformed – across five Service divisions or categories (Riders, Technical Rescue, Non-rider Service Delivery, Fire Safety, Support). Within these, I understand you now have some 26 Complex Needs Officers – a particularly important role supporting the Service's response to safeguarding issues.

2.9 The Care Act and Children Acts, and supporting statutory guidance provide extensive definitions and examples of what constitutes safeguarding but, in short, safeguarding describes all the work carried out to help people of all ages at risk to stay safe from abuse, harm or neglect, including self-neglect. Within this, clearly, such help and how it is provided varies considerably in safeguarding children as opposed to adults and for adults in particular the matter of their mental capacity/ability to make their own decisions and life-choices (and how that impacts on other people) is crucial.

### 3. Strengths

#### LEADERSHIP

3.1 You have a very clear and strong 2018-21 Community Safety Strategy: Safer, Stronger and Healthier with its Prevention, Protection and Response headings. You are here to protect people and keep them safe but, just as importantly, to contribute in all sorts of ways to prevent things going wrong and to help people, particularly vulnerable people, to lead the lives they wish to lead, and as independently as possible.

3.2 There is a clear determination, from the front-line, in support services, and right through to senior management to "add value" to local communities, in all sorts of ways, and to "do the right thing".



- 3.3 There is also a strong commitment to learn from major local and national reviews, and to feed into delivering better services and support. Linked to this and picking up from learning and actions from recent national and local multi-agency reviews I was asked to look at specifically, I feel the Service can share with other Forces some of its own learning from the Metro Court review (June 2018 report). I would suggest, in particular, a strong reinforcement of the connections between significant fire risk and the safeguarding of children and frail adults, and the need to take a proportionate, risk-based approach to the re-inspection and the enforcement measures following an instruction to vacate high-risk premises.
- 3.4 The Service has an excellent reputation with key partners and, for various reasons, your front-line officers are trusted by citizens probably more than any other professionals.
- 3.5 With regard to safeguarding specifically, hopefully this report will help, but the Service's approach and who needs to what in what circumstances is already being transformed and driven by a wider change and modernisation programme – Vulnerability to Fire. Important recent changes include the move from Vulnerable Persons Officer to the new Complex Needs Officer posts. It is early days, and such changes and the programme as a whole will be reviewed as it progresses and evaluated in due course.
- 3.6 Linked to major national and local developments over recent years, and as already mentioned, there is a strong emphasis, backed up by significant expertise and skills, on prevention, and some excellent innovations operating successfully in the Service eg the Safeside sites and services.
- 3.7 Significant practical progress and mutual benefit has been achieved in relation to adult safeguarding over the last year or two working with West Midlands Police, the Ambulance Service and the seven metropolitan local authority areas across the region, in the Adult Safeguarding Emergency Services Group. For example, agreeing a common Care Act Audit template.

#### POLICIES AND PROCEDURES



3.8 There are a number of very good, relevant and up to date policies operating. This includes your 1712 Safeguarding Policy, covering the safeguarding of children and adults, which is easily accessible via your MESH intranet system. There are also good cross-references to other relevant policies. For example, the Safeguarding Policy cross-references to the Service's policies on Equality and Diversity, Management of Information, Code of Conduct, Disciplinary Procedure and Criminal Records Information.

3.9 There are also some good support materials available to help staff and volunteers know what they need to do, and who to refer things to and how and when in relation to safeguarding issues – for example, simple flow-charts, pocket inserts.

3.10 There is an enthusiasm to focus more on supporting vulnerable people to achieve the outcomes they are looking for in a harm or risk of harm situation. For children's services and safeguarding this is known as focussing more on the "Voice of the Child"; for adults, the main approach is known as "Making Safeguarding Personal".

#### WORKFORCE ISSUES

3.11 As already stated above, I see (and have in the past in my previous role in Birmingham) consistently a genuine commitment and desire to "do the right thing" for vulnerable or potentially vulnerable people and their communities, and some excellent practice to celebrate and learn from.

3.12 I also see, just as importantly, a genuine concern to support your staff and volunteers in their safeguarding and wider welfare work and activities, and to promote and support their own health and wellbeing.

3.13 Recruitment and selection procedures, including the approach to seeking Enhanced DBS (Disclosure and Barring Service) check for key groups of staff, and the adult safeguarding competency framework appear to be sound and effective.

3.14 There is an impressive structure and range of safeguarding training and how it is delivered (for example, e-learning) available, with particular strong and effective links with Birmingham City Council's training and development service.



## OVERSIGHT AND ASSURANCE

- 3.15 The Service holds a significant amount of safeguarding and related data and intelligence in various parts of the organisation.

### 4. Areas for Improvement

#### LEADERSHIP

- 4.1 The leadership of the Service's safeguarding work rests currently with the Strategic Enabler (Prevention), supported by the Prevention and Partnerships Team. I would suggest consideration of re-locating that with more of a "cross-cutting" senior management role, as long as that role is supported properly with dedicated capacity and expertise to be able to carry out that leadership. The key point I make here is about the **location** of that leadership, not the capability of or support for the current post-holder. Safeguarding needs to be seen as everyone's concern not just the Prevention Team's.
- 4.2 Whilst excellent, the 2018-21 Community Safety Strategy could be more explicit about the Service's commitment to safeguard and protect vulnerable people, and not just under the Prevention heading. I would suggest this be considered as the Strategy comes up for review.
- 4.3 Whilst mutual progress has been made across the seven metropolitan areas of the West Midlands, I would suggest the Service presses for this progress on adult safeguarding to be extended and into children's safeguarding work. For example, I would suggest aiming for just two sets (on each for children and adults) of annual self-assessment templates and safeguarding concern referral forms, not 14. More generally, I would also recommend the Service makes top-level requests to the 14 Safeguarding Boards or equivalent, and with the seven local authorities directly, seeking confirmation of who, if at all, from the Service needs to cover the existing multitude of groups and meetings relating to safeguarding activities.

#### POLICIES AND PROCEDURES



4.4 I would suggest some relatively minor amendments/updates to the 1712 Safeguarding Policy, for example bringing things up to date on children's safeguarding following the Children and Social Work Act 2017 and with reference to the latest NFCC (National Fire Chiefs Council) guidance. I will share these suggested changes directly with your Officers.

4.5 I believe a key missing piece of policy guidance is in relation to "People in a Position of Trust" (or often abbreviated to PiPoT). This is a term that has tended in the past to be more familiar and applicable to children's services, i.e. 'People in a Position of Trust' are defined as those who work with children or young people, whether in a paid or a voluntary basis. How allegations of child abuse against people who work in a position of trust should be managed has been a key feature of children's safeguarding legislation, regulations and guidance for a number of years. Since the Care Act 2014, more emphasis has been placed on filling an important gap here in relation to the management of allegations of adult abuse against staff employed to work with adults at risk and more specifically:-

- What responsibilities public sector bodies have with regard to information in relation to a person alleged to have caused harm
- How they should exercise their duty of care towards adults at risk who may be at risk from the person alleged to have caused harm
- How to respect the human rights of the person alleged to have caused harm and to operate within the Data Protection Act.

It might help to illustrate this by example to clarify why I feel there is a gap in policies to fill. Fire Service Officers, having been invited to visit a particular home or setting, come across concerns about abuse (where the abused person might also be another member of Service staff) where the alleged abuser works for another agency – in the same area or another – in a position of trust e.g. they might be a teacher or a social worker or a care assistant. Officers need to be clearer what to do in such, hopefully, exceptional circumstances.

Again, I will share with your Officers a suggested framework for a Service PiPoT Policy to assist with this, to link directly to and from your Safeguarding Policy. The alternative is to continue to rely solely on the Service's Disciplinary Policy, which I would suggest is not intended or tailored to help on these important matters.



4.6 Whilst of course I would support the Service's wish to focus more on Voice of the Child/Making Safeguarding Personal, I would suggest strongly that you keep the approach here as simple as possible and relevant to the Fire Service and its "core business". I would also be wary here that this is about supporting vulnerable children and adults and their families/carers to get the outcomes or results they wish for, not about telling people what we think they need to do – no matter how well-intended this may be. Again, I will provide some suggestions on this for your Officers.

#### WORKFORCE ISSUES

4.7 I would recommend this report and recommendations be shared with the Service's Unions/Federations with a request that they help to jointly support the consideration and application of the workforce-related recommendations especially.

4.8 The widespread commitment to care for and support people as well as protect them is to evident across the Service and is, of course, to the credit of your workforce. However, I sense that a number of staff at the front-line may often feel the need to go "above and beyond" to help and support families and vulnerable individuals, particularly over the past few years of austerity. This, I would suggest, needs close monitoring as there is a danger of the Fire Service in effect being diverted from its core business and filling the gaps in services and support left by other agencies, and/or of this having a detrimental effect on the welfare of your staff. I would suggest a limited staff survey aimed at:-

- Highlighting particular areas of activity/care and support where there are service provision gaps or access to those services are unclear
- Using this to bring issues to the partnership forums or directly with those agencies who are obviously responsible
- Asking staff if they would find helpful any other support and actions, with their own welfare in mind eg simple reminders of their core responsibilities and the safeguarding essentials, where to go to and how for the more common instances
- where they feel they have to step in, re-assurance that "all of isn't your responsibility"

4.9 As I say above, the range and type of training is good, as is the adult safeguarding competency framework. However, with help from the seven metropolitan area Children's Safeguarding Board Managers/Leads, I would aim to extend the



competency framework to cover children's safeguarding, and I would also suggest the Service reviews quickly the list of training to identify those courses etc that should be mandatory and those where certain staff need to have periodic refreshes of that training/guidance (I understand currently only the modern slavery training is mandatory and most training is one-off).

- 4.10 Linked to this, I would recommend a more formal, regular review and evaluation of the impact of safeguarding and related training, and the various methods of delivery (eg e-learning, classroom, workshop etc), to ensure you are getting best value from the expenditure and the necessary time taken away from the front-line/workplace.
- 4.11 I would also recommend more co-ordinated and focussed sharing and learning from real-life local and, where helpful, national case studies – perhaps using your Tactical Decision Exercises and “one-minute briefings”.
- 4.12 I would suggest in particular that the Service considers places more emphasis on Mental Health Act/mental capacity awareness training, as this is a growing concern generally and where the consequences of not knowing what to do and/or where to ask for help in necessarily urgent and potentially stressful situations could be especially damaging.
- 4.13 I would recommend the Service considers working with the Sandwell Council's DBS checking service to discuss the feasibility of all staff, other than those approximately 70-80 currently having enhanced checks, undertaking a basic DBS check. If feasible, I would suggest this be staggered over a 3-year period as this would relate to some 1,800 people, and then they could be re-checked every 3 years. The annual extra cost to the Service would be approximately £15,600 plus any additional administrative costs charged by Sandwell Council.

#### OVERSIGHT AND ASSURANCE

- 4.14 There are some very clear and relevant policies, procedures, work-flow summaries, training and information helpful to promote and support good, consistent safeguarding practice, but these could be brought together better into a co-ordinated safeguarding section of the MESH intranet system, for quick and easy reference.



4.15 I would recommend a quick, focussed process review of the logging and recording of safeguarding concerns and alerts throughout the Service i.e. an “as is” compared to where you want “to be” process review, and the primary aim being to get to a “one record” approach – rather than continuing to risk omitting or duplicating these concerns by not picking them up or having parallel recording arrangements. If I can put this into some context, I understand Fire Control is currently logging about 110,000 total incidents of all types in a full year, and there are also some 30,000 safe and well checks each year. Fire Control are recording some 210 or so safeguarding concerns in the current year and emails to the Prevention Team suggest total safeguarding concerns of between 300-400 over the course of year. This suggests that safeguarding concerns, in terms of pure numbers not potential gravity/risk of course, represent up to only 0.3% of total West Midlands Fire Service activity. But is this about right? Which figures are the correct ones? How do you know if your policies, procedures and training are having the right effects?

4.16 To support this, I feel the Service should consider having a clearer, central 24/7 safeguarding “duty” process to triage, advise on concerns and thresholds, and to get more consistency i.e. where front-line and support staff and volunteers are not sure if they have a safeguarding concern/alert they can get advice quickly and the Service can limit what they call “near misses”.

## 5. Conclusions

5.1 In putting forward the above strengths and suggested areas for improvement across the four main lines of enquiry I was asked to cover, I have been particularly mindful of the increasing capacity and other resource constraints faced by the West Midlands Fire Service. Indeed, this and understandable rising expectations from members of the public are, of course, major challenges for most public sector bodies, and certainly the main partners of the Fire Service. I have, therefore, tried to be balanced and realistic in framing my recommendations and how to take them forward. For example, suggesting ways that other partners might be able to help more and/or where the Service might scale down or re-focus what it is currently doing. Nonetheless, some largely one-off additional expenditures or re-direction of capacity will be needed to action my recommendations, but I hope the Scrutiny Committee will agree that this is necessary for the Service to better meet its safeguarding responsibilities in the future.



5.2 I am also conscious, although this was not in my brief of course, that the Fire Service and its governance – including the future of this Committee - are approaching some major changes with regarding to the West Midlands Combined Authority and its responsibilities. I also hope, therefore, that in some small measure this review and report have been timely as well as useful.

## 6. Recommendations and Action Plan

6.1 I submit this report to the West Midlands Fire and Rescue Authority with the recommendations that it requests the West Midlands Fire Service to:-

- a) maintain and celebrate its safeguarding strengths, as summarised in section 3 above, and
- b) develop and deliver the Action Plan framework outlined in the attached Appendix, based in particular on the safeguarding areas for improvement summarised in section 4 above.

6.2 The Scrutiny Committee may also wish to consider asking the Service to report back on progress with these actions in the future – I would suggest initially after six months i.e. the end of September 2019.

Alan Lotinga

WMADASS Associate Consultant

March 2019.





Item 4

**Recommended Actions, Responsibility and Timescale**

STRENGTHS

Celebrate/inform all Service staff and volunteers of all the strengths and good practice highlighted in this report	Prevention Team	April 2019
Share key Service learning/messages from Metro Court Review nationally via NFCC	SET	April 2019

AREAS FOR IMPROVEMENT

Leadership

Consider location and dedicated support for the leadership of the Service's safeguarding activity	SET	June 2019
Make safeguarding priority more explicit in Community Safety Strategy	SET	At next review of Strategy
Work with Adult Safeguarding Emergency Group to establish equivalent Children's Group or extend existing Group to cover children's issues	Prevention Team	September 2019
Through these Groups, press for just two (one each for Adults and Children) annual self-assessment safeguarding assurance templates and safeguarding concern referral forms	Prevention Team with support from SET	September 2019
Through these Groups, supported by direct contact from CFO to the seven Local Authority CEOs, confirm which safeguarding-related boards and groups definitely require WMFS attendance, why, and at what level	Prevention Team with direct support from CFO	September 2019



## Policies and Procedures

Make relatively minor amendments to Safeguarding Policy 1712	AL to suggest to Prevention Team	End March 2019
Introduce a new People in Position of Trust (PiPoT) Policy	AL to suggest framework  Prevention Team to use that to draft new Policy	End March 2019  June 2019
Develop simple guidance for Officers to follow Voice of the Child/Making Safeguarding Personal approaches (focus on outcomes citizens are seeking)	AL to provide suggestions  Prevention Team to develop guidance/checklist from this	End March 2019  June 2019

## Workforce Issues

Share and discuss full report and recommendations with Unions/Federations with a view to jointly actioning workforce-related recommendations	SET/Joint Consultative Committee (JCC)	April 2019
Design, issue and collate returns from a short staff survey to identify perceived gaps in wider community safety and wellbeing services or access to these (to be raised with partners), and how staff themselves can be better supported in their welfare role	Prevention Team, HR Team and JCC	September 2019
Mirror Adult Safeguarding Competency Framework into a Children's Safeguarding Competency Framework	Prevention Team, HR Team with (new) Children's Emergency Services Group	September 2019



Review safeguarding-related training to decide which should be mandatory and which periodic (as opposed to just one-off) – with particular emphasis on Mental Health Act/mental capacity awareness	AL to suggest a short list  SET	End March 2019  June 2019
Review mix of types of safeguarding-related training	Prevention and HR Teams in conjunction with Birmingham Council Training and Development	June 2019
Introduce more co-ordinated and focussed use of case studies into TDEs and “one-minute briefings”	SET with proposals from Prevention Team	June 2019
Discuss and consider the feasibility of all staff undertaking at least a basic DBS check – approximate annual cost suggested £15,600 + any admin cost	HR Team and SET	June 2019

#### Oversight and Assurance

Bring together all safeguarding and related policies, procedures, guidance, flow-charts, training and other information in one co-ordinated section of MESH system	IT Team	June 2019
Undertake an “as is” compared to “to be” process-mapping review to ensure all safeguarding concerns are properly and fully logged through a “one record” approach	IT Team	June 2019
Introduce a central 24/7 safeguarding duty “triage” system to provide clarity and on consistency on what should be logged as safeguarding concerns and alerts	SET	September 2019







**WEST MIDLANDS FIRE AND RESCUE AUTHORITY**

**SCRUTINY COMMITTEE**

**27 MARCH 2019**

**1. DISPUTE RESOLUTION REPORT**

Report of the Chief Fire Officer

RECOMMENDED

- 1.1 THAT the contents of the Dispute Resolution Report for the period 1 July 2018 to 31 December 2018 are noted by the Scrutiny Committee.
- 1.2 THAT the Dispute Resolution Report noted by the Scrutiny Committee is submitted to the Joint Consultative Panel.

**2. PURPOSE OF REPORT**

To inform the Scrutiny Committee regarding the number, type and outcomes of discipline and grievance hearings and other dispute resolution including Employment Tribunal activity that have occurred during the period of 1 July 2018 to 31 December 2018.

**3. BACKGROUND**

- 3.1 This report provides a summary of the number, type and outcomes of disciplinary, grievance, debriefs, collective Grievances and any reported failure to agree or failure to consult.
- 3.2 Within this report we will identify any lessons learned. This considers feedback and regular discussions with Trade Unions/Representative Bodies and other employees within the Service. Feedback is also noted after case debriefs which we hold once a case has come to an end. Discussions frequently take place at Joint Consultative Committee and monthly Joint Working Party meetings.



#### 4. **SUMMARY OF CASES**

##### 4.1 **Grievances:**

9 New Grievances were received during this reporting period these were 5 received from Green Book Staff and 4 from Grey Book Staff.

##### 3 of the grievances related to allegations of Bullying and Harassment

2 of these were counter grievances relating to a current disciplinary investigation. These are both still ongoing at the time of writing this report.

1 was a grievance from an employee who had resigned from the service and the allegations were against a line manager where there were identified performance management issues with the employee. (This grievance was not upheld the employee appealed but did not attend the appeal meeting and has since left the Service, this matter is concluded and there is not a related Employment Tribunal).

##### 2 of the grievances related to working conditions both around the support they were receiving from their line managers and team.

1 was linked to a disciplinary investigation that was commenced into a person's time and record keeping (this grievance was not upheld and the employee did not appeal).

1 was from an employee who had left the service (this grievance was not upheld and the employee did not appeal this decision).

##### 4 related to issues around Terms and Conditions of employment.

1 related to a Green Book employee who had not been supported in an application to a Grey Book vacancy (this was not upheld at the grievance meeting and a subsequent appeal was submitted that was not upheld, the employee has taken a career break from the Service and there has been no related Employment Tribunal).

1 related to a female who was returning to work following maternity and the associated shift pattern (this grievance was resolved at the appeal stage and the employee's appeal was upheld).



1 was relating to an ongoing Disciplinary Process (the grievance was not upheld, the employee resigned prior to a Gross Misconduct meeting and there was no appeal received).

1 was relating to a temporary promotion reversion and transfer (this grievance was not upheld and there was no appeal received).

There was also a Collective Grievance raised from 2 watches on a station around the booking of leave, this was resolved in the information stages.

Whilst there were discussions that took place to look to resolve these matters informally all 9 Grievances went to a formal meeting (the outcomes are outlined above).

There have been no associated Employment Tribunal Claims relating to these Grievances.

In relation to the report from the previous period (Jan 18 - June 18) there were 3 outstanding appeals, all the appeals were heard in this current reporting period and the appeals were not upheld. The Service is currently managing 2 Employment Tribunals relating to these grievances.

Following analysis of the equality data there has been no impact on any specific group.

Business partners work very closely with line managers to identify any concerns at the earlier stages, which helps resolve issues informally.

Monthly breakdowns on all grievance cases are given at the Joint Working Party which is attended by trade unions and the relevant managers.

The report for the next reporting period will also report on the time taken for case management.

Debriefs have been undertaken for each of these cases or are planned for those that have reached a conclusion.



## 4.2 **Disciplinary:**

There were 21 cases (16 at Gross Misconduct and 5 at Misconduct); these related to 20 Grey Book employees and 1 Green Book employee. The cases are detailed as follows:

A single incident and related issues from this initial investigation from 1 station resulted in 14 disciplinary investigations. These investigations related to inappropriate use of social media including WhatsApp and Facebook.

10 were managed at Gross Misconduct and 4 managed as Misconduct.

This was fully investigated with 7 progressed to a formal hearing. These were allegations which were related to a breach of the Service's Core Values. The remaining 7 were not progressed to formal hearings but were managed through local performance management.

Of these 7 cases that were progressed to a hearing, there were: 1 Final Written Warning for 18 months, 4 First Written Warning for 6 months, 1 no case to answer and the final case is pending a hearing.

Given the significance of this investigation, there has been a decision taken to complete both individual debriefs to each of the separate cases but also to undertake a wider debrief to consider the impact of this case on the Service, Individuals, Resources and Organisation Learning. This debrief report will be included in the next Disputes Resolution Report.

The remaining **7** Cases were managed as follows:

**2** Gross Misconduct Investigation around operational practices in relation to a recall to a building fire (2 separate incidents). In both cases, they were progressed to a disciplinary hearing and both employees were issued with a Final Written Warning. Neither employee appealed the decision.



1 Gross Misconduct Investigation was following a complaint from a female member of the public who alleged that one of our employees has been abusive towards her. This progressed to a disciplinary hearing and the employee was issued with a 6-month written warning. There has not been an appeal.

1 Gross Misconduct Investigation was following several allegations from employees around sexual harassment. The employee resigned pending a Gross Misconduct Hearing. Following the resignation there was a hearing held in the employee's absence as they did not attend and the decision of that hearing was that had they not resigned they would have been dismissed from the Service.

1 Gross Misconduct Investigation was relating to an employee where it was alleged that there were inappropriate claims made by the employee for both time and travel reimbursement. This progressed to a hearing and the employee was awarded a Final Written Warning. There has not been an appeal.

1 Misconduct Investigation was relating to an employee who was in breach of the staffing protocols when booking leave. This matter was fully investigated and the outcome was an informal development plan. This did not progress to a hearing.

1 Gross Misconduct was around conduct and behaviour from an employee where it is alleged that they have been leaving their place of work and displaying inappropriate behaviour towards their work colleagues. This has been progressed to a hearing. There is no outcome at the time of writing this report.

The Service has not received an Employment Tribunal relating to any of the above disciplinary cases from any employees.

There were no hearing outcomes from the previous reporting period.

Debriefs have been undertaken for each of these cases or are planned for those that have reached a conclusion.



Out of the 21 Disciplinary Cases, 3 employees are women and 18 are men, with a variance of ages, race and religion. There has not been any impact on any particular group. Please refer to appendix 1 which has the full breakdown of equality data for each case.

People Support Services work very closely with the managers and trade unions and resolve issues at the very early stages, New managers are 'buddied up' when dealing with any disciplinary investigations which supports their development.

Monthly breakdown on all disciplinary cases are given at the Joint Working Party which is attended by Trade Unions and the relevant managers.

People Support Services Business Partners have regular meetings, discussions and dialogues with Trade Unions to keep them informed of any issues in an attempt to resolve them at an earlier stage. It is hoped this approach will assist in avoiding circumstances developing into disciplinary or grievances proceedings.

#### 4.3 **EQUALITY MONITORING**

##### Disciplinary

Gender Male 18, Female 3

Age 20-29 1, 30-39 9, 40-49 9, 50-59 2

Disability Yes 0, No 19, PNTS 2

Ethnicity White British 16, Asian/Asian British 2, White/Other White 1, Black or Black British 1 and Mixed White and Black 1.

##### Grievance

Gender Male 5, Female 4

Age 20-29 1, 30-39 3, 40-49 5

Disability Yes 0, No 9, PNTS 0

Ethnicity White British 6, Asian/Asian British 2 and Mixed White and Black 1.



## 5. **EMPLOYMENT TRIBUNALS**

The Service has 3 Employment Tribunals lodged in this period. 1 has subsequently been withdrawn following the Service's response.

The other 2 Employment Tribunals are relating to Grievances reported in section 4 of this report. Responses have been made to these claims and progress will be reported in the next period.

## 6. **DEBRIEFS AND LEARNING OUTCOMES**

The debrief form has now been embedded as a Microsoft form that is linked to our Organisation Intelligence Team. As soon as a debrief is completed the data is shared with this team and we work alongside the team to implement any feedback or improvements. This could be to policy or process.

We have amended the form to also capture data around how long cases are taking to complete and to look at the learning involved in minimising the impact of unnecessary delays.

When reviewing the debrief outcomes from this period, I have considered the previous debrief outcome report for information.

We have fully embedded the learning from the debrief report around the planning of availability of both investigating officers and welfare officers and we are seeing an improvements in the reduction of unnecessary delays. The feedback on the debriefs carried out demonstrates that there was appropriate support in place for the individuals.

There have been no suspensions in this reporting period to review.

We continue to consider and assess the proportionate allocation of Gross Misconduct Investigations and Misconduct. This assessment and decision making regarding the level of investigation takes place between senior line management, the Business Partner Team and the relevant Strategic Enabler to consider the level that a case is investigated. These discussions consider the definitions of Gross Misconduct in the Discipline Standing Order and the ACAS code of practise. These were discussed in the previous JCP session and are contained within our Disciplinary Policy. This is also discussed as part of the debriefing process.



We continue to support and promote the debrief process inclusive of the relevant Trade Unions to ensure we are continually reviewing practise and process to ensure the effective and efficient case management.

## 7. **POLICIES AND PROCEDURES**

The Disciplinary Standing Order has recently been consulted on and published for all employees to access. Trade unions and stakeholders have been fully involved when making any changes to this Standing Order.

The Grievance Standing Order has been reviewed and consulted on. Trade unions and stakeholders were fully involved whilst this was under review and consultation.

The Service has recently provided management training on a range of people management training including Discipline and Grievance, this was available to all supervisory managers and a supporting training package has been developed. This has been rolled out across the Service areas supported by the Business Partners.

## 8. **EQUALITY IMPACT ASSESSMENT**

In preparing this report an initial Equality Impact Assessment is not required and has not been carried out. The Service's Policies that are applied in all case management have been subject to full Equality Impact Assessments.

## 9. **LEGAL IMPLICATIONS**

There are no direct legal implications arising from this report.

## 10. **FINANCIAL IMPLICATIONS**

There are no financial implications to this report.



**BACKGROUND PAPERS**

Disciplinary Standing Order 2/1

Grievance Standing Order 2/2

Previous JCP reports Dispute Resolution Reports 0-16 and Review of Case Management Debriefs.

The contact officer for this report is Phil Hales, Deputy Chief Fire Officer, 0121 380 6907.

PHIL LOACH  
CHIEF FIRE OFFICER









Grievances

# West Midlands Fire and Rescue Service



## Scrutiny Committee

27<sup>th</sup> March 2019

Report of: The Chief Fire Officer

Audience: Scrutiny Committee

Content: Grievance, Disciplinary, Employment Tribunal activity & Other dispute resolution.

Dates covered: 1 July 2018 – 31 Dec 2018



Tribunals Service



## Purpose of this report:

To inform the Scrutiny Panel about the number, type and outcomes of discipline and grievance hearings and other dispute resolution including Employment Tribunal activity which have occurred during the period of 1 July 2018 to 31 December 2018.





# 9 Protected Characteristics





## 9 Grievances lodged from July – December 2018







### Gender Re-assignment

1 employees



0 employee has  
declared a disability



### AGE

Under 30 = 1 employee  
30-39 = 3 employees  
40 – 49 = 5 employees

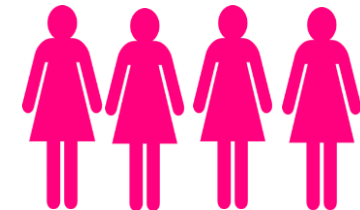
0 employees



Male employees 5



6 employees British white  
2 employees Asian/Asian British  
1 employee is black/british



4 female employees





### **21 Cases under Discipline**

16 Gross Misconduct  
5 Misconduct

#### **14 related to one incident:**

10 resulted in Gross misconduct  
4 Misconduct

#### **Remaining 7 cases out of the 21 cases:**

6 Gross misconduct  
1 misconduct

#### **Outcome from the 21 cases:**

18 month final written warning: 4  
6 month written warning: 5  
No case to answer: 2  
Pending an outcome: 1  
Resignation pending hearing: 1  
Development plans: 8





### AGE

-29 – 1 employee  
30-39 – 9 employee  
40 - 49 – 9 employee  
50-59 - 2 employees

0 employees



### Gender Re-assignment

0 employees



16 British White  
2 Asian British  
1 White/other  
1 Black/British  
1 Black/white

0 disability



18 male employees



3 female employees





**DISMISSED**

**There has been 1 employee dismissed  
within this reporting period:**





Tribunals Service



The Service has received **3**  
Employment Tribunal Claims.

1 has withdrawn  
2 relating to Grievances



Dispute Resolution Summary															
			Types of Grievance					Level				Outcomes			
Report No.	Date of Report	No of Grievances	Work Practice	Bullying/ Harassment	Org Change	Other	No of Discipline Investigations	Gross Mis-conduct	Mis-conduct	Other	No of Discipline Hearings	Dismissal	Final Written Warning	Written Warning	No Formal
5	Apr-13	17	2	4	6	5	12	8	1	3	4	2	2	0	0
6	Sep-13	7	2	2	3	0	8	5	2	1	8	5	1	0	1
7	Apr-14	7	0	0	6	1	15	14	1	0	4	1	2	1	0
8	Sep-14	13	0	9	4	0	21	20	1	0	9	2	5	2	0
9	Mar 15	8	0	3	5	0	13	13	0	0	15	4	4	3	4
10	Oct 15	3	0	1	2	0	4	4	0	0	2	2	0	0	0
11	Mar 16	8	2	4	1	1	4	4	0	0	2	0	1	1	0
12	Aug 16	11	7	3	1	0	30	22	8	0	8	1	1	2	16
13	Mar 17	4	0	3	1	0	9	8	1	0	7	4	1	2	2
14	Sept 17	2	1	0	1	0	13	13	0	0	3	0	0	2	1
15	Mar 18	6	4	2	0	0	8	7	1	0	5	1	0	4	0
16	Oct 18	5	5	0	0	0	14	11	3	0	9	2	6	1	0
17	Mar 19	9	5	4	0	0	21	16	5	0	12	0	4	5	3



**WEST MIDLANDS FIRE AND RESCUE AUTHORITY**

Item 6

**SCRUTINY COMMITTEE**

**27 MARCH 2018**

1. **OPERATIONAL ASSESSMENT IMPROVEMENT REGISTER**

Report of the Chief Fire Officer.

**RECOMMENDED**

THAT the Committee notes the progress made in addressing the areas for consideration detailed within the Operational Assessment (OpA) Improvement Register.

THAT the Committee notes the completion of the OpA Improvement Register.

2. **PURPOSE OF REPORT**

This report is submitted to provide members with an update on progress made in addressing the areas for consideration arising out of the Service's OpA and Fire Peer Challenge. All updates are detailed within the OpA Improvement Register (Appendix 1).

3. **BACKGROUND**

- 3.1 Members will recall that in the summer and autumn of 2016, the Service volunteered to take part in the OpA process. OpA consisted of a self-assessment and was assured by a Peer Challenge. OpA is designed to provide an understanding of the Service's performance across the range of its core activity and to provide assurance to both the Strategic Enabling Team and to members of the Fire Authority, as to the efficiency and effectiveness of the Service and to identify opportunities for improvement.
- 3.2 The Service undertook the self-assessment in the summer of 2016, submitting it to the Peer Challenge team in early September 2016. The Service received its Fire Peer



Challenge in October 2016 which was undertaken by a team of peers from across the fire sector and wider public sector.

In addition to challenging the self-assessment, the Peer Team considered six core questions under the heading of Leadership and Corporate Capacity (as per the OpA toolkit), as well as a number of key themes that the Service had requested the Peer Team consider in more detail.

- 3.3 The findings of the Peer Challenge Team were detailed within the West Midlands Fire Service (WMFS) OpA and Peer Challenge Report which was published in June 2017, and presented to Members at the meeting of the Fire Authority held on 26 June 2017. The report highlighted 36 areas for consideration. It was confirmed that the Service would develop an Improvement Register to record and monitor progress in addressing the areas for consideration, and that regular performance reports would be provided to the Scrutiny Committee.
- 3.4 The first OpA Improvement Register was submitted to the Scrutiny Committee in October 2017, with a subsequent update submitted in March 2018. This fourth, and final update for the period ending February 2019 is attached as Appendix 1 and details the progress made against the areas for consideration. A summary of the progress made in addressing the areas for consideration is detailed in paragraph 3.6.
- 3.5 Work as a result of the Improvement Register has been treated as normal business and, as such, has been integrated into the Service's existing planning and performance management frameworks. Actions resulting from this work have been implemented and managed via the 3PT (portfolio, programme, project, task) environment.
- 3.6 Of the 36 areas for consideration (38 including sub-areas 14a, b and c) within the Improvement Register and noted by the Scrutiny Committee at its November 2018 meeting:
- Seven areas for consideration had been completed in addition to the 23 areas for consideration already classed as completed prior to the November 2018 meeting of the Scrutiny Committee. These areas are shown with a grey



background.

- Eight areas for consideration have been addressed since the November Scrutiny Committee and have been classed as completed, requiring no further action for the purposes of the Improvement Register. These areas are shown with a green background.
- All 38 areas have now been marked as completed and the Improvement Register is now considered closed.

3.7 In accordance with the principles of OpA and in line with the West Midlands Fire and Rescue Authority's commitment to openness and transparency, the Improvement Register is available on the Service's Committee Management Information System.

#### 4. **EQUALITY IMPACT ASSESSMENT**

In preparing this report an initial Equality Impact Assessment is not required and has not been carried out. The matters contained within this report will not directly lead to and/or not directly relate to a policy change.

#### 5. **LEGAL IMPLICATIONS**

It is not a legal requirement to undertake OpA or a peer challenge. However, the Service is committed to performance improvement and is fully supportive of the sector driven approach of taking responsibility for its own performance improvement.

#### 6. **FINANCIAL IMPLICATIONS**

There are no direct financial implications arising from this report.

#### 7. **ENVIRONMENTAL IMPLICATIONS**

There are no direct environmental implications arising from this report.



## **BACKGROUND PAPERS**

Operational Assessment and Fire Peer Challenge Toolkit

Policy Planning Forum, OpA presentation by DCFO Phil Hales,  
5 September 2016

Policy Planning Forum, OpA Peer Challenge Feedback presentation  
by CFO Phil Loach, 12 December 2016

Item 16 Fire Authority 26 June 2017 – Operational Assessment and  
Peer Challenge Report

West Midlands Fire Service OpA and Peer Challenge Report  
(published June 2017)

Item 4 Scrutiny Committee 09 October 2017 – Operational  
Assessment Improvement Register

Item 6 Scrutiny Committee 26 March 2018 – Operational  
Assessment Improvement Register

Item 7 Scrutiny Committee 14 November 2018 – Operational  
Assessment Improvement Register

The contact name for this report is Karen Gowreesunker, Clerk to  
the Authority and Strategic Enabler Strategic Hub, contact number  
0121 380 6678.

PHIL LOACH  
CHIEF FIRE OFFICER



Strategic Leadership and Governance					
Number	Areas for Consideration	Progress in Addressing Areas for Consideration	Lead	When	Status
1.	Review of the Scheme of Delegation: A review of the Scheme of Delegation would provide some clarity about decision taking in the organisation. Peers felt that the role of Members could be enhanced further to provide this.	The scheme of delegations set out the Fire Authority's responsibilities in setting direction for WMFS. The delegations also set out the Chief Fire Officer's responsibilities in managing operations, workforce and allocation of resources to deliver against this strategy. However as governance for WMFS progresses, the future Reformed Fire Authority (RFA) and the ultimate transfer of governance to the Mayoral West Midlands Combined Authority (WMCA) will reshape the role of Members as numbers will reduce and therefore responsibilities will change.	SE Strategic Hub	RFA June 2018 (FRA AGM)  Mayoral WMCA Oct-Dec 2018	Progress of this work stream will be monitored via existing reporting mechanisms into full Fire Authority.  <b>Complete.</b>
2.	Members should be considered as change agents within the Service and on behalf of the community.	It is considered that this is already an expectation of all Members and more so Section 41 Members. Alignment to local fire stations supporting the delivery of preventative work as well as representing/being the voice of WMFS in local authorities, supporting the	SE Strategic Hub	RFA June 2018 (FRA AGM)  Mayoral WMCA Oct-Dec 2018	Progress of this work stream will be monitored via existing reporting mechanisms into full Fire Authority.  <b>Complete.</b>



		delivery of outcomes. Greater emphasis will be placed on expectations here from the Chair to ensure clarity. However, the changes outlined in number one above will have a great impact on the future role of Members as part of WMFRA and then the 'Fire Committee' in the Mayoral Governance options.			
3.	Allocating a member or two to various aspects of the Service so that they gain a far wider in-depth understanding of protection, prevention, equality and other areas so that when decisions are bought to the Authority, there are peers there who are recognised to have worked on the detail.	The approach of the Authority is for all members to have a rounded knowledge and understanding of strategy and progress in implementing this. This is supported through focused Policy, Planning Forums which support in depth information giving, as well as challenging question and answer sessions. There is a performance lead through the Chair of Scrutiny who also attends Corporate Performance Reporting forums quarterly. The Chair, Vice Chair and opposition leader currently have a focus specifically on governance change. There is a lead member who chairs the Joint Consultative Panel, thereby leading on employee relations as appropriate and the Chair of Audit champions risk and governance	SE Strategic Hub	RFA June 2018 (FRA AGM)  Mayoral WMCA Oct-Dec 2018	Progress of this work stream will be monitored via existing reporting mechanisms into full Fire Authority.  <b>Complete.</b>



		<p>Generally all Members are appraised of progress against strategy and particularly Section 41 Members, to support leadership across the 7 constituent Local Authority areas.</p> <p>As governance for WMFS progresses, the future Reformed Fire Authority (RFA) and the ultimate transfer of governance to the Mayoral West Midlands Combined Authority (WMCA) will reshape the role of Members. Membership of the RFA will reduce and therefore responsibilities will change. Introducing this suggested approach will be revisited on the move to a RFA in June 2018.</p>			
4.	The Fire Authority could offer more constructive challenge to the senior management team.	All Authority forums including the Policy Planning Forum and full Fire Authority meetings provide a forum for challenge and/or questions. The Policy Planning Forum in particular is an engagement forum used to ensure Members' awareness and ongoing involvement which enables challenge from Members.	SE Strategic Hub	No further action	<b>Complete</b>



5.	<p>Early engagement around the Fire Reform agenda with Members and Staff will help WMFS develop both its strategies for further reform and the organisations longer term vision.</p> <p>Development needs of Members need to be considered (in light of Home Office Fire Reform programme).</p>	<p>This is a developing conversation with members and has particular focus in Policy Planning Forum and Fire Authority due to the Authority's journey to governance change. Early engagement and progress reporting has taken place and continues in a timely way, with a focus on the delivery of an efficiency plan and governance change.</p>	SE Strategic Hub	Continuing.	<p>This action has been absorbed into wider Member development and will continue to be progressed.</p> <p><b>Complete.</b></p>
6.	<p>Some time spent on inward reflection by Strategic Enabling Team (SET) about its role and how this could be developed would be beneficial.</p> <p>Some SET members and other staff stated that there was a lack of clarity about SET's role.</p>	<p>The role of SET is continually evolving and developing. An example of where the clarity and role of SET has been strengthened is through the adoption of the approach to project management through 3PT.</p> <p><b>March 2018 Update:</b> The ongoing 12 monthly review process of SET conducted by the CFO enables SET to evaluate its approach and effective delivery of the strategy. 3PT now provides the focus on the value delivered through the team.</p> <p>Regular development sessions are identified and delivered</p>	SE People	Ongoing	<b>Complete.</b>



		<p>through the team utilising a range a range of internal and external delivery methods.</p> <p>Based on this ongoing approach to the development of SET this consideration can be closed.</p>			
7.	<p>The Service should review how change is being implemented and how it can engage more fully with staff.</p> <p>The pace of change within WMFS has been significant in recent years. It might now be time for the organisation to review how change is being implemented and how it can engage more fully with the whole workforce. More opportunities for staff from different teams to problem solve in task and finish would help to a) eliminate barriers to change, and b) to review and revise new systems in the light of experience.</p> <p>There may be more opportunities to share learning and experience</p>	<p>How change is being implemented and how the Service can engage more fully with staff is deeply embedded into the work force reform programme that has commenced and is currently ongoing. This is an agreed priority within SET.</p> <p>Communication of change and the vision, both internally and externally is work that is ongoing and being implemented through:</p> <ul style="list-style-type: none"> <li>• Shaping the Communication function to the 3PT environment in order to maximise value released within all areas of the organisation</li> <li>• Driving change through digital technology</li> <li>• Workforce reform programme</li> </ul> <p>This work will also be embedded within the rolling Communications Strategy and the 3PT</p>	<p>SE Corporate Communications</p> <p>SE People</p> <p>SE Strategic Hub</p>	<p>Within our 3 year rolling strategy and a VUCA environment this is being absorbed into everyday activities and 3PT</p>	<b>Complete.</b>



	<p>better, and spread good practices more widely across stations and teams.</p> <p>The organisation needs to think about how it communicates its vision both internally and to the community. Members have a role to play here to. Clearer communications on change proposals might be considered to assist with organisational change implementation for staff and members. Seeking the views of members and staff on this point may well provide ideas for how communications could be improved.</p>	<p>environment through projects – for example the Digital Strategy.</p> <p><b>March 2018 Update:</b>  3PT has been embedded amongst the SET and is being established across middle manager levels/project managers.  This approach provides for a robust and comprehensive approach to change which embraces the whole workforce in leading and managing change, including at a task level.  Communication sits at the core of enabling the effectiveness of this approach.  Work continues with the review of communications and the introduction of open forums. This enables middle managers to come together and seek clarity regarding messaging and organisational position. It also enables two way communication and feedback from middle managers which is then fed back to SET. Additionally, feedback from 'What's Happening Visits' and other communication streams are considered at SET regularly.</p>			
--	--	--	--	--	--



		<p><b>October 2018 Update:</b></p> <p>3PT has been embedded amongst the SET and is being established across middle manager levels/project managers.</p> <p>This approach provides for a robust and comprehensive approach to change which embraces the whole workforce in leading and managing change, including at a task level.</p> <p>Communication sits at the core of enabling the effectiveness of this approach.</p> <p>Work continues with the review of communications and the introduction of open floor forums and, coupled with Microsoft Applications (O365), these will enable middle managers to come together and seek clarity regarding messaging and organisational positions. It also enables two way communication and feedback from middle managers which is then fed back to SET. Additionally, feedback from 'What's Happening Visits' and other communication streams are considered at SET regularly.</p>			
--	--	--	--	--	--



		<p>The recent Trade Dispute has provided a platform for comprehensive discussions with the FBU and agreements reached in relation to Industrial Relations, Health and Safety and a cultural review. The dispute has also marked a review of current strategy in a very focused way to understand how strategy can be delivered, within a balanced budget, given withdrawal of new entrant contracts and therefore health commissioning activities/contracts. Communication visits have supported communications at the outset of the dispute and commence now post dispute. This enables communication to all staff as the strategy is in stages of review to enable understanding and contribution.</p>			
<b>Local Context and Priorities</b>					
<b>Number</b>	<b>Areas for Consideration</b>	<b>Progress in Addressing Areas for Consideration</b>	<b>Lead</b>	<b>When</b>	<b>Status</b>
8.	The Service should now be reflecting on how it can tell its story and its successes even better.	This piece of work has started and is ongoing. Our digital strategy will support this. This piece of work has many dependencies not least work force reform (as it will be our	SE Corporate Communications	Reviewed through consultation and engagement on an annual basis through partners,	<b>Complete</b>



		<p>employees who are our greatest ambassadors). Community membership is being reviewed to understand how our members can play their part in this area for consideration</p> <p><b>March 2018 Update:</b> Progress remains the same as previously reported.</p> <p><b>October 2018 Update:</b> Progress remains the same as previously reported.</p> <p><b>February 2019 Update</b> Following internal review additional resource identified for a period of 12 months to, in particular, aid external communications objectives. An assurance review has been commissioned to review our strategy and delivery of our communications strategy through 3PT. As a result, this area has been marked as completed for the purposes of the Improvement Register.</p>		<p>businesses and communities.</p> <p>April 2019</p> <p>March / April 2019</p>	
9.	WMFS now needs a major programme of engagement with wider partners to ensure they have the same understanding of issues	Stakeholder analysis is being developed and implemented through the wider communications strategy to determine which partners have	SE Prevention SE Corporate Communications	Continuous, via day to day partnerships	<b>Complete</b>



	<p>before detailed options are worked up and decisions taken.</p> <p>It is important for WMFS to understand the priorities of its potential local and regional partners and to consider the language that is used so as to help create the right conditions for active collaboration. Local Authorities and health organisations all have different languages and cultures. WMFS needs to understand what outcomes and targets partners are working to and what they are seeking to achieve. It will also be important to define WMFS' role, the added value and evidence based outcomes when working with others.</p>	shared priorities in order to develop combined outcomes.			
10.	<p>Consider revisiting regional collaboration as a partnership led from the community perspective.</p> <p>Considering the Thomas Review, there is an opportunity to revisit this as</p>	<p>The regional collaboration document is still available and the corporate memory is there. Currently there is no political desire for this outside of WMFS and therefore this should be closed with the ability to update and refresh this document so it is</p>	SE Portfolio	N/A	<p>Will not be progressed further at this time.</p> <p><b>Complete</b></p>



	a partnership led from the community perspective.	available and up to date when required.			
11.	<p>Ensure the value of the response standards is quantified and that it is well understood by the community and wider fire sector.</p> <p>WMFS needs to do more work on ensuring its value is quantified and well understood by the community and the wider fire service sector.</p> <p>The response target has been appropriate for WMFS but may not be appropriate for the wider fire and rescue sector. It is important therefore, for the service to distinguish localised response need within its IRMP to demonstrate community risk need further.</p> <p>The Service may come under pressure to review its SDM as budgets become more constrained. The response time is valued by the community so it is</p>	<p>Survivability research helps us to understand the value but this needs to be communicated effectively. This will not be a one-off action but rather a continual area of work for all SET members when</p> <p>There is going to be an NFCC programme (managed through the CPO) to look at community risk management. This will programme will lead to a national toolkit in relation to an IRMP. This will help us to promote and understand the importance of response times to survivability against risk. This programme will be delivered over three years.</p> <p>Our current IRMP clearly identifies response times in different areas and links to survivability. This is a publicly available interactive digital tool.</p>	<p>SE Portfolio</p> <p>SE Response</p>	N/A	<p>This is an on-going area of work linked to our IRMP and communication through all SET members</p> <p><b>Complete</b></p>



	important that its value continues to be well understood by the community and by the wider fire sector.				
12.	<p>Retention of organisational memory:</p> <p>There is a need for the Service to consider its next generation of leaders so that they understand the story and the Service's unique selling points. How to best transfer knowledge from those either leaving the Service or changing roles within it.</p>	<p>This is being addressed through delivering change and projects through the 3PT environment. This will enable the organisation to have an audit trail (corporate memory) to the changes that have been made.</p> <p>In addition this is being supported through communication strategy and the ability to communicate change and the vision, both internally and externally.</p> <p><b>March 2018 Update:</b> 3PT is now embedded within the organisation and will provide the audit trail to our change programme.</p>	SE People	Within our 3 year rolling strategy and a VUCA environment this is being absorbed into everyday activities and 3PT	<b>Complete</b>
<b>Financial Planning and Viability</b>					
<b>Number</b>	<b>Areas for Consideration</b>	<b>Progress in Addressing Areas for Consideration</b>	<b>Lead</b>	<b>When</b>	<b>Status</b>
13.	The Service should develop more robust financial delivery plans within its overall financial strategy.	<p>Financial strategy links to the business strategy (3 year cycle).</p> <p>Level of financial certainty linked to the current Comprehensive</p>	SE Finance and Resources	Mar 2018	<b>Complete</b>



	<p>The Service would benefit from having a more visible long term financial strategy (5-10 years), a medium term financial plan (2 to 5 years) and a short term financial plan in year.</p> <p>The organisation also needs to be clear on the difference between budget strategy and a longer term financial strategy. It needs to consider its resource mix as well as the affordability of its assets. By mapping out a long term strategy it can model different scenarios and see how they evolve.</p>	<p>Spending Review (CSR), up to 2019/20.</p> <p>The budget is set for 2018/19 and consideration will be given to setting a long term financial strategy beyond the current CSR period, possibly up to 5 years.</p> <p><b>March 2018 Update:</b> No funding announcements were made beyond 2019/20 within the February 2018 Finance Settlement. In addition, the outcome of the recently launched Fair Funding Review could impact from 2021 onwards. Given this level of volatility over the next few years it is not considered appropriate/meaningful to produce financial plans over a 5-10 year period</p>			
14 a	<p>The Service's Efficiency Savings Plan, commissioned budgets, contingencies, and intrinsic business acumen:</p> <p>Peer team not fully convinced about the deliverability of the Service's Efficiency Savings Plan – strong</p>	<p>The Service's Efficiency Plan was submitted to the Home Office in October 2016.</p> <p>The financial settlement for 2017/18 to 2019/20 reflects the acceptance of that efficiency plan.</p> <p>The efficiency plan will be monitored and / if where</p>	<p>SE Finance and Resources</p> <p>SE Business Development</p>	<p>Reviewed as part of annual budget process.</p> <p>Reported annually through assurance report.</p>	<b>Complete</b>



	<p>reliance on growing other funding streams. Corporate Risk Register has identified the risks of having to maintain contracts. However, there are more detailed risks around commission budgets being used to underpin the cost of core staff. The Corporate Risk Register should reflect that level of risk and the Service should consider contingencies for how it might manage if those commissions are not sustained. These risks need to be articulated better in a coherent delivery plan that is properly monitored and enforced.</p>	<p>appropriate, adjusted to achieving the overall savings of circa £10m.</p> <p>The actual achievement of the efficiency plan against projections will 'formally' be monitored and provided as part of the Fire Authority's assurance statement.</p> <p>Corporate risk is managed around each specific commissioned service; through the Corporate Risk Register and through the 3PT environment. Mitigation and delivery is managed through planned activities, business continuity plans and through reviewing strategic approaches to new areas of business as our knowledge and understanding of different Business Development work streams increase. These will be presented through the innovation section of 3PT and also through project initiation documents to SET.</p>			
14 b	<p>The Service's Efficiency Savings Plan, commissioned budgets, contingencies, and intrinsic business acumen:</p>	<p>WMFS business activity is aligned to The Plan which clearly sets out its objectives aligned to delivering services in a risk based approach. Delivering services to the most vulnerable are therefore</p>	SE Business Development	N/A	<p>Monitored and reviewed on a continual basis as part of routine Business Development processes.</p>



	<p>There is a need to consider the risk of creating perverse financial incentives. WMFS should seek to work with commissioning agencies to ensure no perverse incentives are built into contracts to ensure the most vulnerable remain protected.</p>	<p>central to the motivations of creating new services. WMFS will always consider how we can undercut the market price offering value for money; utilising the public pound more effectively and delivering excellence in service delivery. It is difficult to understand what therefore is intended by the of the term 'perverse'. The Business development section has been created to seek a £2m deficit in funding, support the Service Delivery Model, specifically supporting a 5 minute response time and whole-time Fire Service to enable this. From a community perspective and from an employee perspective, WMFS areas of new business seeks to support our people and communities.</p> <p><b>March 2018 Update:</b> The Business Development activity is fully managed through the 3PT framework; ensuring that all decision making is made aligned to the organisations strategy and therefore focused on delivering value release of our objectives.</p>			<b>Complete</b>
--	---	---	--	--	-----------------



		This is further supported to Business processes that have been introduced.			
14 c	<p>The Service's Efficiency Savings Plan, commissioned budgets, contingencies, and intrinsic business acumen:</p> <p>Currently the organisation appears to be weak concerning intrinsic business acumen. This could be bought in to help deliver the income generation target.</p>	<p>The Business Development team have developed a Business Development strategy; is developing a number of business processes and frameworks to support the wider organisation in understanding of Business Development and increase business acumen.</p> <p>These are new areas of work for all with no existing pathway or footprint of delivery. As such, officers are learning through emergent ways and sharing best practice and experience with each other using the Business Development officers; SharePoint and Office 365. The SET team and Group Commanders are now much more conversant in the business activity of the organisations and this is now naturally being cascaded to Station and Watch Commanders. As things evolve we will seek to engage with organisational learning to facilitate cross team development sessions and build this into the work of the leading excellence programme.</p>	SE Business Development	Within our 3 year rolling strategy with a project approach and milestones.	<b>Complete</b>



		<p><b>March 2018 Update:</b> In addition, this work is a project within the 3PT environment where all SET members have the opportunity scrutinise business decision making aligned to our strategy. Our commissioning framework is established we are now developing our commercial and Social Value and Sponsorship streams.</p> <p><b>October 2018 Update:</b> Following the current cessation of health related commissioned activities, the Authority is reviewing its strategy in relation to business development. Whilst some low level business opportunities will be continued within functional departments, there is now a question over the need of a specific business development team. A business development assurance review has been commissioned by the Chief Fire Officer, this review is due to be completed on 31/10/18. The outcomes of this review will impact on the specific need for further specialist business skills.</p>			
--	--	---	--	--	--



		<p><b>February 2019 Update:</b></p> <p>There has been an assurance review of the Services approach to business development. Following this review the current structure for business development has been removed and a new approach to business and commercial work will be developed through the review of the Strategic Enabling Team, due to be completed in April 2019</p>			
<b>Service Delivery and Outcomes for the Community</b>					
<b>Number</b>	<b>Areas for Consideration</b>	<b>Progress in Addressing Areas for Consideration</b>	<b>Lead</b>	<b>When</b>	<b>Status</b>
15.	It would serve the Service well to continue to analyse and adapt the business case for working in the community. A performance management framework with inputs, outputs and outcomes would ensure greater sustainability of service delivery.	<p>This area will form part of the ongoing work regarding the Integrated Risk Management Plan Toolkit.</p> <p>This work forms part of a larger programme which is being delivered through the Central Programme Office on behalf of the National Fire Chiefs Council. As a result, this is an area of work that WMFS does not own but contributes to as a key stakeholder. Timescales for the programme are three years.</p>	SE Portfolio	3 year programme	<p>Area will be progressed but forms part of larger national programme.</p> <p><b>Complete</b></p>



16.	<p>Transformational change:</p> <p>Programme management needs to be more apparent and consistent. It was not entirely clear to the peers who is actually responsible for the transformation programme in the organisation and how it is monitored and understood. Risk awareness needs to be better understood at every level. There were a number of examples where it appeared that change had been implemented but there had been no subsequent planned review to make sure that the change was delivering the intended outcomes or benefits.</p>	<p>The 3PT approach will create clear lines of responsibility and accountability. This will also capture risks and issues and review progress against product delivery and value realisation.</p> <p>This area will be actioned through the 3PT environment which will enable greater programme management.</p> <p><b>March 2018 Update:</b> 3PT is now live across the organisation which enables us to see the value being delivered within a controlled environment.</p>	SE Portfolio	Early 2018.	<b>Complete</b>
17.	<p>Conscious culture change away from bureaucracy:</p> <p>One risk is that SET members are often only sighted on their own area. Another risk is lack of consistency with managers interpreting frameworks differently.</p>	<p>The 3PT approach will enable cohesion and a wider strategic view. The strategic intent is that 3PT balances our approach looking at 20% process and 80% leadership. This provides the balance between leadership and process.</p>	SE Portfolio	The 3PT toolkit is available	<b>Complete</b>



18.	<p>The Service should consider the resources required within support areas.</p> <p>Empowerment down from the CFO is welcomed but the organisation might now require more resources in support areas to deliver the benefits intended.</p>	<p>The 3PT environment which is being implemented will help us to understand resource requirements against value. This will include financial metrics.</p> <p>March 2018 Update: 3PT now includes the ability to assign resources and understand capacity.</p>	SE Portfolio	Early 2018.	<b>Complete</b>
<b>Prevention and the Health Agenda</b>					
<b>Number</b>	<b>Areas for Consideration</b>	<b>Progress in Addressing Areas for Consideration</b>	<b>Lead</b>	<b>When</b>	<b>Status</b>
19.	<p>Prevention and the health agenda: Is the organisation sufficiently well equipped to carry out falls response and other wellbeing activities?</p> <p>What started as a 'business development' issue, is now mainstream 'prevention' activity, but also has health and safety implications. The health, safety and welfare issues appear to be getting lost between the Health and Safety</p>	<p>The initial work of the Falls Improvement Group was completed within the 12 week time frame and Falls Response Improvement has now been initiated as a project in the 3PT environment. Led by HQ Prevention, an internal stakeholder group has mapped out the falls response process.</p> <p><b>March 2018 Update:</b> This work stream is captured within the 3PT environment and</p>	<p>SE Prevention</p> <p>SE People</p> <p>SE Business Development</p>	<p>Mar 2018</p> <p>This work is a project within the 3PT environment.</p> <p><b>October 2018</b> Work has ceased on this workstream.</p>	<b>Complete.</b>



	<p>department, the Prevention department, and the Business Development department.</p> <p>Some further training and specialist support is needed for staff providing the falls response service. Specifically, staff would welcome training from agencies who are used to dealing with issues such as end of life care.</p>	<p>is being delivered through the health project.</p> <p><b>October 2018 Update:</b> The decision of the Fire Authority's Executive Committee in June 2018 to remove New Entrant Contracts effectively meant the withdrawal from the wider health work / alternative funding through commissioned health activity. As a result, the Service is no longer in the position to deliver against the wider health agenda. This will be supported by potential changes to the Prevention plan around health and wellbeing.</p> <p>This workstream will cease and will not be pursued under the current circumstances. Therefore, this area for consideration is closed.</p>			
20.	<p>The Service to consider the implementation of a wider prevention strategy, broadening its focus.</p> <p>A wider prevention strategy would help set and capture expected outcomes. The focus on health could be</p>	<p>There have been recent developments in this area including conversations with wider health partners. We are building positive relationships with representatives from Public Health England (PHE) and Health Education England with a view to identifying mutual objectives. We</p>	SE Prevention	<p>Changed from Nov 2017 to June 2018.</p> <p><b>October 2018:</b> Work on this workstream has ceased.</p>	<b>Complete.</b>



	<p>broadened from health to well-being to work on issues like skills and housing needs with other partners.</p>	<p>are also exploring the possibility of a part time secondment of a PHE specialist to work with the Prevention and Business Development teams to focus on developing the strategy and building capacity around commissioning.</p> <p><b>March 2018 Update:</b> Progress of this work stream continues and is being delivered in the 3PT environment, predominantly through the vulnerability from fire project.</p> <p><b>October 2018 Update:</b> The decision of the Fire Authority's Executive Committee in June 2018 to remove New Entrant Contracts effectively meant the withdrawal from the wider health work / alternative funding through commissioned health activity. As a result, the Service is no longer in the position to deliver against the wider health agenda. This will be supported by potential changes to the Prevention plan around health and wellbeing.</p> <p>This workstream will cease and will not be pursued under the current circumstances. Therefore,</p>			
--	---	---	--	--	--



		this area for consideration is closed.			
21.	Through the Combined Authority there is an opportunity to lead the use of data to drive performance.	<p>WMFS is developing a 'Digital Strategy' which will allow us to capitalise on realistic digital opportunities in a way that will optimise our ability to release value through the corporate plan.</p> <p>The strategy will support the WMCA economic and community outcomes and subsequent benefits are set out in the public service reform digital strategy paper.</p> <p>Once the Digital Strategy is agreed it will be delivered through the Service's 3PT approach. This project will be on-going whilst WMFS transfers into the WMCA and beyond.</p>	<p>SE Strategic Hub</p> <p>SE Organisational Assurance</p>	Ongoing	<b>Complete</b>
<b>Fire Control</b>					
<b>Number</b>	<b>Areas for Consideration</b>	<b>Progress in Addressing Areas for Consideration</b>	<b>Lead</b>	<b>When</b>	<b>Status</b>
22.	<p>Consider lessons learnt from the change programme:</p> <p>It will be important for WMFS to consider the lessons learned from this</p>	Lessons have been learnt and considered as part of evaluation of change programme, and will be implemented when and where applicable / required.	SE Response	Continuous	<p>Lessons learnt and issues raised will be considered in future change management processes.</p> <p><b>Complete</b></p>



	change programme both for future collaborations / mergers and other internal change management processes. It may also want to explore whether the new Cultural Framework developed for Fire Control actually aligns with desired cultural norms in the two organisations.	The cultural framework developed for Fire Control does align with the desired cultural norms in WMFS and Staffordshire FRS.			
23.	Further alignment of mobilisation protocols would be a natural evolution for the Fire Control service. Currently there are different operating procedures for WMFS and Staffordshire FRS. Standard operating procedures across the two organisations could be established.	<p>Mobilisation protocols and operating procedures continue to be aligned across WMFS and Staffordshire FRS wherever applicable and practicable.</p> <p><b>March 2018 Update:</b> There is a shared commitment to align protocols as appropriate and in instances where service improvements can be identified. This is achieved through effective working relationships between SFRS and WMFS and through quarterly ops board.</p> <p>It is recognised that absolute alignment may not be possible as the Service Delivery models for both organisations are different (wholetime/retained).</p> <p><b>October 2018 Update:</b></p>	SE Response	Continuous.	<b>Complete</b>



		As some of these alignments continue to evolve they are captured within a separate project and can be considered complete for the purposes of the Operational Assessment and Improvement Register.			
24.	The Service should consider whether its fall back systems would be sufficiently resilient in the event of catastrophic failure.	<p>There is an ongoing review of the Business Continuity Arrangements within Fire Control to understand where enhanced arrangements may be possible. Whilst this review is ongoing we remain confident in current arrangements as evidenced by the outcomes from recent testing and exercising and an improved secondary control facility the current arrangements remain appropriate.</p> <p><b>March 2018 Update:</b> There have been improvements made in this area through an extension of fall back arrangements. As a standalone improvement this is not hugely significant however Thames Valley have expressed a shared commitment and desire to move to more technologically advanced fall back arrangements in the same manner as WMFS. This</p>	SE Response	<p>Changed from Dec 2017 to Dec 2018.</p> <p>October 2018 Update: upon the transition of the Vision 4 mobilising system.</p>	<b>Complete</b>



		<p>partnership therefore provides a platform for this to happen.</p> <p><b>October 2018 Update:</b> All steps that are able to be completed at this time have been completed and we are now awaiting the transition to the Vision 4 mobilising system to enable the improvements to be implemented.</p>			
<b>Training and Development</b>					
<b>Number</b>	<b>Areas for Consideration</b>	<b>Progress in Addressing Areas for Consideration</b>	<b>Lead</b>	<b>When</b>	<b>Status</b>
25.	The Service should consider reflecting on the Distributed Training Model (DTM), how it is working, allowing staff to fully understand it.	<p>We have continued to listen to staff and improve the DTM. We are currently carrying out a holistic review to the DTM approach through organisational assurance. The DTM review is in the 3PT environment with the completion date of 1 September 2017.</p> <p><b>March 2018 Update:</b> Organisational Assurance DTM review completed with a number of considerations that are now being progressed through 3PT.</p> <p><b>October 2018 Update:</b> The DTM review has been completed with standardised</p>	SE People	<p>DTM review will be completed 1 September 2017 (complete).</p> <p>Considerations working to a key milestone of 01 April 2018.</p> <p><b>October 2018:</b> It is anticipated this item will be signed off as complete in the third quarter of 2018/19.</p>	<b>Complete</b>



		<p>assessments now being completed and the number of Station Based Assessors being provided. It is anticipated this will be signed off as complete in the third quarter of the year.</p> <p><b>February 2019:</b> Completed.</p>			
26.	<p>The Service should consider its training resources:</p> <p>Training resources are stretched. Availability of Level 1 Instructors is an issue once sickness and annual leave is taken into account. Trainer skill is also an issue. Trainers being drawn away from their watch can have an impact upon watch staffing. There is a shortage of Level 3 specialist trainers which could be an organisational risk.</p>	<p>We have reviewed and improved the way in which Station Based Training (SBT) is being delivered. This will also be part of the Distribute Training Model (DTM) review.</p> <p>This has included the removal of level 1, 2 and 3 to station based trainers and subject matter advisers. This has provided greater clarity for station personnel and enabled us to gain a clear picture of the numbers of SBTs across core subject matters. Further work is being carried out regarding the quality assurance of the delivery of training - this is also being reviewed as part of the organisational assurance review. Further work is being carried out regarding the qualification and QA framework.</p>	SE People	<p>DTM review will be completed 1 September 2017 (complete).</p> <p>Implementation of the framework to be completed – proposed date 1 April 2018.</p> <p><b>October 2018:</b> Framework has been implemented and the levels of Station Based Assessors increased where appropriate. It is anticipated this will be signed off in the third quarter of 2018/19.</p>	<b>Complete</b>



		<p><b>March 2018 Update:</b> Organisational Assurance review has been completed (linked to task 25). The considerations from the review are being taken forward, of which the resourcing of the DTM has been considered and increased where appropriate.</p> <p><b>October 2018 Update:</b> Standardised assessments have been implemented with the necessary number of Station Based Assessors increased where appropriate.</p> <p><b>February 2019 Update:</b> Good progress has been made and this task will now be monitored through the quarterly assessment of standardised assessments. Therefore, marked as complete.</p>			
27.	The peer team felt that having to organise training for one or two people at a station as a result of devolved training is not particularly efficient.	This is part of our approach to the Distributed Training Model and Arrive to Perform (A2P). It will form part of the Organisational Assurance review of training.	SE People	DTM review will be completed 1 September 2017.	Will be progressed as part of review of DTM.  <b>Complete</b>
28.	The Service should review the value and effectiveness of the large scale weekend training exercises as an assurance method.	The delivery of the exercises is the responsibility of the Station Commander and Command Area. The ongoing assessment and evaluation of learning	SE People  SE Response	Ongoing	<b>Complete.</b>



	<p>Consideration should also be given to the role at exercises of the SET member with responsibility for training.</p> <p>The value of the large scale weekend training exercises as an assurance method is questionable. An evaluation of this exercise should be carried out to assess its value.</p> <p>The SET member with responsibility for training takes part in these training exercises, but as a 'trainee', rather than as a training manager assessing the whole process and its value. It would appear that nobody is taking the 'helicopter view' and seeing whether or not it needs revising and improving.</p>	<p>outcomes and intelligence is being delivered through organisational intelligence.</p> <p>The standard and delivery of exercises through operational excellence is led through SE Response and Service Delivery.</p> <p><b>March 2018 Update:</b> Progress remains the same as previously reported.</p> <p><b>October 2018 Update:</b> Simulations continue to be delivered and monitored through service delivery and operational excellence with a move to simulations taking place across the week. No further considerations in relation to this outcome are required.</p>			
29.	<p>Introduction of new fitness standards and tests could be an organisational risk once the policy is in place but before all members of staff are tested. The implementation plan needs to consider this.</p>	<p>The implementation plan considered the impact to staff with a six month lead in time and support was provided to all staff through Occupational Health.</p> <p>The assessment has now been in place for 8 months and has been</p>	SE People	N/A	<b>Complete.</b>



		received positively with no organisational impact. No further action will be taken outside of ongoing monitoring of performance.			
30.	The Service should pursue a more holistic view of succession planning and talent in the organisation. There is a risk of inconsistency in the access to opportunity across the organisation that the Service may want to consider.	We are developing our approach to progression following further feedback through Organisational Assurance.	SE People	DTM review will be completed 1 September 2017. Proposed action plan/improvements will then be agreed.	Will be progressed as part of review of DTM.  <b>Complete</b>

#### Equality and Diversity

Number	Areas for Consideration	Progress in Addressing Areas for Consideration	Lead	When	Status
31.	<p>Positive action and achieving a fully representative workforce:</p> <p>We suggest that positive action is an area where more focus could be placed, for example, with greater use of minority role models in internal and external communications.</p> <p>Achieving a fully representative workforce is</p>	<p>Our approach is being developed. We are working with the Fire Service College with regards to our marketing and long term approach to positive action. This will complement the approach to embedding Diversity Inclusion Cohesion and Equality (DICE) and positive action within the Service.</p> <p>Positive action is an agreed area of assessment at our scrutiny meetings with the next update</p>	SE People	<p>Started 1/4/17</p> <p>Is reviewed quarterly as part of the Quarterly Performance Review process.</p> <p><b>October 2018:</b> Once the Scrutiny thematic review of positive action and firefighter recruitment is</p>	<b>Complete</b>



	<p>a long term project and the organisation would probably benefit from having a bold strategy for this with realistic time scales linked to their objectives and milestones.</p>	<p>being provided in November 2017.</p> <p>Targets are set across the next 4 years to match our ambition against time frames and achievability.</p> <p>The success of positive action will be assessed through the ongoing attraction and recruitment process.</p> <p><b>March 2018 Update:</b> Good progress is being made with regards to positive action and recruitment. Further details are provided through the reporting of the positive action and recruitment review to Scrutiny Committee (available CMIS).</p> <p><b>October 2018 Update:</b> High levels of performance are being maintained in relation to positive action. A further report will be submitted to the Scrutiny Committee with the theme of positive action anticipated to be closed due to good progress being made.</p>		<p>complete, it is anticipated this item will be closed (in the third quarter of 2018/19).</p>	
--	---	---	--	--	--



		<b>Feb 2019 Update:</b> The thematic review for positive action is now complete and signed off by the Fire Authority. Good progress has been made in relation to attraction and selection of underrepresented groups.			
32.	Apprentice scheme - the Service should consider lessons learned from the cadet scheme.  The organisation will be launching a new apprenticeship scheme which has huge potential for encouraging diversity. It should consider lessons learned from the cadet scheme where senior cadets tend not to be from protected groups.	The development to apprenticeships is being developed. Recruitment pathways to include community members, volunteers and cadets are being considered through the apprenticeships policy.  The introduction of the recognised apprenticeship framework for firefighters is still be developed nationally. We are still awaiting the recognised framework.  <b>March 2018 Update:</b> We are still continuing to develop our approach and understanding of the apprenticeship scheme, of which the recruitment pathways will be considered once we have an established framework.  <b>October 2018 Update:</b> Apprenticeship policy and approach is now in place.	SE People	Potential for the introduction of Apprenticeships will be Jan 2018.	<b>Complete.</b>



33.	<p><b>Equality Forums:</b></p> <p>There may be an issue around the capacity of the forum leads, as they take part in their own time. Some additional time resource and even an activity budget would enable them to broaden their DICE activities and other positive action initiatives in support of organisational strategies.</p>	<p>In support of the approach to embed Diversity Inclusion Cohesion and Equality (DICE) and the delivery of positive action, we are continuing to enable stations to deliver and have accountability for DICE. Our approach will be to have a number of outcomes to be delivered through stations which will be assessed. This is being trialled at 10 stations over the next 6 months. This will also support the forum leads and provide improved resources.</p> <p><b>March 2018 Update:</b> We are working closely with the equality forums which now includes the 'FireOut' forum for Lesbian, Gay, Bisexual and Transgender members of staff. We have recently agreed terms of reference for the groups and an allocated budget for each group that can be accessed to support community engagement activities, and learning and development.</p> <p><b>October 2018 Update:</b> Item remains ongoing at this time.</p>	SE People	<p>Trial concluded Feb 2018</p> <p>Review new arrangements in June 2018.</p> <p>Ongoing.</p> <p><b>February 2018:</b> Completed.</p>	<b>Complete</b>
-----	--	---	-----------	--	-----------------



		<p><b>February 2019 Update:</b> Terms of reference have now been agreed with each group – this will enable us to plan and identify resource requirements for the coming year. Therefore, marked as complete for the purposes of the Improvement Register.</p>			
34.	The organisation needs to ensure that Individual Personal Development Records (IPDR) are consistently applied across the organisation.	<p>No specific work has been carried out in this area. The application of IPDRs continues to be applied through managers.</p> <p><b>March 2018 Update:</b> The application of IPDRs continues to be delivered through managers.</p> <p><b>October 2018 Update:</b> An IPDR toolkit is being developed. A further update will be provided as part of the next update to the Committee.</p> <p><b>February 2019 Update:</b> This will now be an area of improvement within the IPDR, WPA project within 3PT. Therefore, marked as complete for the purposes of the Improvement Register.</p>	SE People	<p>Ongoing</p> <p><b>February 2019:</b> Completed.</p>	<b>Complete</b>



35.	The Service may wish to take the opportunity to evaluate its maternity and paternity provisions to evaluate the new pay arrangements during maternity leave to see whether they have influenced when mothers return to work and how many fathers are taking paternity or joint leave.	<p>This evaluation will be carried out in the third quarter of 2017/18.</p> <p><b>March 2018 Update:</b> Evaluation has not been conducted within this quarter, however it is our intention to review this policy.</p> <p><b>October 2018 Update:</b> Evaluation has not been conducted within this quarter due to a focus on the conclusion to the trade dispute. It is our intention to review this policy.</p> <p><b>February 2019 Update:</b> This will be delivered through the business partner team within People Support Services. Therefore, marked as complete for the purposes of the Improvement Register.</p>	SE People	<p>June 2018</p> <p>Ongoing</p> <p><b>February 2019:</b> Completed.</p>	Complete
36.	The Service should consider carrying out analysis of its equality objectives against the time needed to achieve them, to help manage expectations.	We have set ourselves clear and ambitious targets against workforce profiling analysis that are assessed through the Quarterly Performance Review process. This has enabled us to understand the achievability of our ambition.	SE People	Ongoing	Complete







**WEST MIDLANDS FIRE AND RESCUE AUTHORITY  
SCRUTINY COMMITTEE WORK PROGRAMME 2018/19**

<b>Date of Meeting</b>	<b>Item</b>	<b>Responsible Officer</b>	<b>Completed</b>
<b>2018</b>			
05 September 2018	Analysis of Progress of Corporate Performance against The Plan for Quarter 1 2018/2019	Director of Service Delivery	12.09.18
Rescheduled to 12 September 2018	Review of Safeguarding	Director of Service Delivery	12.09.18
	Consideration of Work Programme	Chair Of Scrutiny Committee	12.09.18
10 October 2018	Dispute Resolution Monitoring	Strategic Enabler People Support Services	10.10.18
	Operational Assessment Improvement Register	Strategic Enabler Strategic Hub	Rescheduled to 14.11.18
14 November 2018	Analysis of Progress of Corporate Performance against The Plan for Quarter 2 2018/2019	Director of Service Delivery	14.11.18
	Diversity, Inclusion, Cohesion & Equality	Strategic Enabler	



	Update	People Support Services	14.11.18
	Review of Positive Action and Firefighter Recruitment	Strategic Enabler People Support Services	14.11.18
	Operational Assessment Improvement Register	Strategic Enabler Strategic Hub	14.11.18
<b>2019</b>			
<b>Date of Meeting</b>	<b>Item</b>	<b>Responsible Officer</b>	<b>Completed</b>
27 February 2019	Analysis of Progress of Corporate Performance against The Plan for Quarter 3 2018/2019	Director of Service Delivery	27.02.19
	Review of Safeguarding (update)	Working Group / Director of Service Delivery	27.02.19
27 March 2019	Dispute Resolution Monitoring Report	Strategic Enabler People Support Services	
	Operational Assessment Improvement Register	Strategic Enabler Strategic Hub	

[ILO: UNCLASSIFIED]  
March 2019



	Consideration of the Annual Report of the Scrutiny Committee  Review of Safeguarding	Chair of Scrutiny Committee  Working Group / Director of Service Delivery	
05 June 2019	Analysis of Progress of Corporate Performance against The Plan for Quarter 4 2018/2019  Diversity, Inclusion, Cohesion & Equality Update  Annual Report of the Scrutiny Committee	Director of Service Delivery  Strategic Enabler People Support Services  Chair of Scrutiny Committee	

To report as appropriate:

- Review of positive action and firefighter recruitment
- Review of safeguarding

Note: separate meetings of any review working group are to be scheduled if and when required



