

<b>REPORT TO THE FIRE AUTHORITY</b>	
<b>DATE:</b> 14 December 2009	<b>REFERENCE:</b>

<b>SUBJECT: Operational Assurance of Service Delivery – Peer Assessment Report 2009/10</b>
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**SUMMARY:** The final report arising from this year’s Operational Assurance of Service Delivery peer assessment process has now been received. This year’s report focussed on 2 of the 7 Key Lines of Enquiry – Health & Safety and Training & Development. Whilst the report concludes that the Authority’s arrangements for meeting its responsibilities in these two areas can be categorised as being “Established”, it encourages the Authority to continue to progress the matters recorded as “Areas for Development”. The report, together with a summary of the main findings, is attached for Member’s information.

OBJECTIVES		IMPLICATIONS	
More than an Emergency Service		Operational Risk Management	x
Trusted & Respected by our customers	x	Community Risk Reduction	x
Saving Lives, Protecting Communities	x	Service Control	x
Managing within Budget		Civil Contingencies & Resilience	
Allocate Resources to Priorities	x	Finance & Procurement	x
Efficiency savings		People and Organisational Development	x
Alternative funding & resources		ICT	x
Managing People	x	CCMS	
Risk Reduction Planning	x	Transport	
Partnership Working	x	Corporate Risk	x
Effective & Empowered People	x	Estates	x
		Sustainability & Environment	
		Welsh Language	
		Legal	x
		Governance	
		Equality & Diversity	x
		Representative Body Consultation	

**COMMENTS/OBSERVATIONS ON THE ABOVE OBJECTIVES/IMPLICATIONS:**

There remain significant implications to the Authority of not continuing to progress the areas for development that have been highlighted by the Operational Assurance process.

**RECOMMENDATIONS:**

That Members note the findings and areas for development detailed in the Peer Assessment Team report; and that the areas for development will be progressed, the rate of which will be subject to resource availability.

**BACKGROUND PAPERS USED IN PREPARATION OF THIS REPORT:**

Operational Assurance of Service Delivery – Peer Assessment Report 2009/10.

Report Author(s) and Designation	Deputy Chief Fire Officer Phil Coleman
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## **OPERATIONAL ASSURANCE OF SERVICE DELIVERY – PEER ASSESSMENT REPORT 2009/10**

### **Summary of Areas for Development**

Members will be aware that the Peer Assessment Team undertook their assessment of the Service in October 2009. The assessment focussed on two of the seven Key Lines of Enquiry – Health and Safety and Training and Development.

Whilst the report concludes that the Authority's arrangements for meeting its responsibilities in these two areas can be categorised as being "Established", it encourages the Authority to continue to progress the matters recorded as "Areas for Development".

The attached report contains the detail, but the main Areas for Development can be highlighted as:-

### **Health and Safety**

- Staff to receive the appropriate level of accident investigation training
- Corporate Risk Department to consider more active engagement with other safety critical areas of service delivery
- Improve welfare facilities at Earlswood as a matter of urgency
- Lessons from the Operational Learning System to be used to better effect

### **Training & Development**

- Investigate whether existing training capacity is adequate to meet its safety critical training needs
- Ensure that adequate physical assets are available to support the risk critical training requirements
- Need for a more co-ordinated approach to Training Needs Analysis
- Service should ensure there is a robust system for confirming maintenance of competence in incident command, particularly where firefighters ride in charge of appliances
- Review of current system for data capture
- Data capture, particularly at RDS stations, would benefit from an enhancement to the current IT infrastructure and on-station facilities

# **OPERATIONAL ASSURANCE OF SERVICE DELIVERY**

## **PEER ASSESSMENT REPORT 2009-2010**

### **MID AND WEST WALES FIRE AND RESCUE AUTHORITY**

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**Date** 5th November 2009

## **BACKGROUND**

“As “Best Value” Authorities, FRAs have statutory duties under the Local Government Act 1999 to secure continuous improvement and report on their performance. The Assembly Government’s approach to performance management is delivered through the Wales Programme for Improvement (WPI) and guidance on how this should be applied to FRAs was issued under cover of circular W(FRS)(07)15 which was issued on 29 November 2007.

The assessment of a FRA’s operational arrangements for service delivery is undertaken through self-assessment which is then tested and challenged through peer-assessment undertaken by other FRAs in Wales. The focus for this is determined annually by the Welsh Assembly Government (WAG), while the process is set out in separate WAG Guidance. WAG and WAO representatives participate in the peer teams with ‘observer’ status. The outcomes of the operational self- and peer-assessment processes are fed into a Joint Risk Assessment by the FRA, WAO and peer assessors, leading to the development of an Annual Action/Improvement Plan by the FRA and a Regulatory Plan by the WAO.

For 2009-10 operational assurance of service delivery (OASD) has covered an examination through self-assessment of all operational issues in the Key Lines of Enquiry (KLOEs) identified in a derived version of the new CFOA/CLG toolkit. Peer assessors have undertaken a detailed assessment of two of the seven KLOEs; which are Health and Safety and Training and Development. This report covers the Peer Team’s observations and findings in these two areas.

Following an initial examination of Mid and West Wales Fire and Rescue Authority’s written assessment of its own performance against the relevant KLOEs and the associated documentary evidence, the Peer Assessment Team (PAT) spent the week of the 5th to the 9th October 2009 on-site conducting the peer assessment. This involved examining additional documents, viewing electronic systems, visiting premises and conducting interviews and meetings with a range of Service employees and one member of the Authority. This culminated in an initial feedback session with the Chief Fire Officer and senior managers on the 9<sup>th</sup> October to discuss the PAT’s observations and conclusions, followed by the development of this final report, agreed between the PAT Leader and the Service.

## **SUMMARY**

The PAT concluded that Mid and West Wales Fire and Rescue Authority’s arrangements for meeting its responsibilities in relation to health, safety and welfare and for training, development and assessment corresponded to all the ‘established’ descriptors in the relevant sections of the OASD guidance.

The PAT’s findings are presented in this report in the order in which the Key Questions appear in the issued toolkit. Recorded ‘Areas for Development’ include some that the Authority has already recognised, and are included here to encourage continued progress in addressing these.

## **SUMMARY OF MAIN POINTS HIGHLIGHTED DURING THE PEER-ASSESSMENT**

### **Key Question 5.1 – Health, Safety and Welfare (HSW) Arrangements**

- The Authority's high level of commitment to HSW is reflected in its comprehensive and well-communicated HSW policy and effective welfare arrangements. It has an established system of timely review of policies, and has recently reviewed its standard operating procedures to link them to generic risk assessments.
- To move the Authority into the 'Advanced' category there needs to be greater clarity as regards how the HSW policy is embedded throughout the organisation in terms of its integration with some other policies/strategies, e.g. training delivery, core skills and incident command competence.

### **Key Question 5.2 – Management Structures and Arrangements to Support HSW**

- structures and arrangements. The Authority has nominated an elected member to act as Health and Safety Champion; there is a highly-regarded Corporate Risk Team in place; and clear communication channels exist to reinforce the sense of responsibility for HSW throughout all tiers of management.
- Further integration, support and control of risk-critical activity would reduce the Authority's level of exposure to risk. The PAT wished to encourage the Service to find ways of achieving tighter control of the reassessment of firefighters over a range of skills.

### **Key Question 5.3 – HSW Plans, Targets, Procedures and Practices**

- The Authority has established procedures and practices in place to ensure that safety critical information is captured and disseminated to staff. A confidential helpline service is provided for staff, although not all are aware of its existence.
- The Service acknowledges that there are inadequacies in the welfare facilities at the Earlswood Training Centre, which now need to be addressed as a matter of urgency. Also, there is some lack of clarity over the level of detail required when completing an Accident Investigation report and when reporting 'near misses'.

### **Key Question 5.4 – Measurement and Evaluation of HSW Activities**

- The Authority has processes in place for measuring, evaluating and disseminating a range of health and safety related information, and Members have a high level of awareness of HSW-related performance through the PRAC.
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## **SUMMARY OF MAIN POINTS HIGHLIGHTED DURING THE PEER-ASSESSMENT (continued)**

### **Key Question 6.1 – Training, Development and Assessment (TDA) Policies**

- The delivery of training and development is supported by a range of policies. ADCs can now be accessed by support staff as well as operational staff, and PPDRs are mainstreamed throughout the Service to support individual development.
- The Service would benefit from a clear and current bespoke training strategy linked to policy to deliver organisational objectives, as a lack of clarity in differentiating between training policy and training strategy could hinder the achievement of successful implementation.
  
- The Service has recently introduced a new structure (POD) for managing its TDA activities, which has real potential to deliver/support improved TDA. Furthermore, the Authority's commitment to improving TDA can be demonstrated by recent support through the allocation of budget.
- The intended benefits of the new structure are yet to be fully realised, however, and unless capacity constraints are addressed there is a risk that full compliance in risk-critical training may never be achieved.
  
- A number of positive developments have taken place in TDA within the Service, and a service-wide risk-critical training and assessment programme has been developed.
- It was not clear, however, whether the Service-wide training programme could be delivered within the current training capacity, and the Service would benefit from undertaking a detailed analysis of training requirements to identify the scale of any backlog in risk-critical training.
  
- The Service has introduced a number of positive developments to support the measurement and evaluation of TDA activities. There is evidence that staff on fire stations are now using the new electronic system (PDR Pro) to record training and development and incident-related activities.
- The Service uses three electronic recording systems to capture information relating to training, development and operational activities of its staff, but the information that is inputted into these systems appears to be inconsistent and partial and is difficult to validate. The Service would therefore benefit from undertaking a review of the various systems. Data capture, particularly at RDS stations, would benefit from an enhancement to the current IT infrastructure and on-station facilities.

Also, the Service would benefit from having a process in place for evaluating the performance of instructional staff and the content of courses.

## KLOE 5 – Health and Safety

How well is the Authority ensuring its responsibilities for health, safety and welfare are met?

### **Key Question 5.1**

*Does the FRA have clearly defined and effective arrangements to take account of its health, safety and welfare responsibilities?*

<u>ISSUES/FINDINGS</u>	<u>AREAS FOR DEVELOPMENT</u>
<ul style="list-style-type: none"> <li>• The Health and Safety Policy meets relevant statutory requirements and is clearly accessible to all staff on the BiS.</li> <li>• The Health and Safety Policy outlines staff H&amp;S responsibilities.</li> <li>• Welfare arrangements are effective and well communicated to operational staff.</li> <li>• There is an established system of timely review of policies.</li> <li>• There is a high level of commitment to establishing a health and safety culture.</li> <li>• There has been a recent major review of operational procedures (SOPs) to link them to generic risk assessments.</li> </ul>	<ul style="list-style-type: none"> <li>• There is some lack of clarity in how the Health and Safety Policy supports some other areas of risk critical activity e.g. incident command, training and development strategy, risk critical training and estates management.</li> </ul>

### **SUMMARY OF PAT TEAM FINDINGS**

A comprehensive HSW policy is in place and is implemented. However, the HSW policy appears not to be fully integrated with some other policies/strategies e.g. training delivery, core skills and incident command competence, which means that H&S cannot be considered to be fully embedded across the organisation.

Developing		Established	X	Advanced	
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## KLOE 5 – Health and Safety

How well is the Authority ensuring its responsibilities for health, safety and welfare are met?

**Key Question 5.2**

*Do effective management structures and arrangements exist within the FRA to support the development and implementation of Health, Safety and Welfare activities?*

<u>ISSUES/FINDINGS</u>	<u>AREAS FOR DEVELOPMENT</u>
<ul style="list-style-type: none"> <li>• The service has nominated an elected member as a Health and Safety Champion.</li> <li>• The Corporate Risk Team is highly regarded throughout the service.</li> <li>• Heads of departments are clear about the part they play in relation to the development and implementation of HSW activities.</li> <li>• All county commands have H&amp;S committees which provides clear channels of communication as regards HSW issues, and reinforces the sense of responsibility throughout all management tiers of the organisation.</li> <li>• HSW advice and reporting forms are available on BiS and the procedures are well understood.</li> </ul>	<ul style="list-style-type: none"> <li>• The Service needs to ensure that staff receive the appropriate level of accident investigation training to ensure consistency of approach.</li> <li>• The Corporate Risk Department should consider more active engagement with other safety critical areas of service delivery e.g. training.</li> <li>• There is an acknowledgement that the reassessment of fire fighters over a range of skills could be more tightly controlled. The Service now needs to find ways to achieve this.</li> </ul>

**SUMMARY OF PAT TEAM FINDINGS**

Management and arrangements exist within the FRA to support the development and implementation of HSW activities. However, further integration, support and control of risk critical activity would reduce the Authority’s level of exposure to risk.

Developing		Established	X	Advanced	
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## KLOE 5 – Health and Safety

How well is the Authority ensuring its responsibilities for health, safety and welfare are met?

### **Key Question 5.3**

*Does the FRA have established effective plans, challenging targets, procedures and practices in relation to Health, Safety and Welfare?*

<u>ISSUES/FINDINGS</u>	<u>AREAS FOR DEVELOPMENT</u>
<ul style="list-style-type: none"> <li>• The CorVu performance management system is used as a tool for target setting throughout the organisation.</li> <li>• Pro-active welfare arrangements have been put in place, and staff have open access to services. A confidential helpline service for staff offers additional health advice and support.</li> <li>• A range of systems have been introduced for capturing and disseminating information and guidance, e.g. Safety Alerts and 'near miss' reporting.</li> <li>• Programmes of workplace Health and Safety inspections and audits are being undertaken, and the outcomes are utilised.</li> </ul>	<ul style="list-style-type: none"> <li>• There is a lack of clarity about the level of detail required when completing an Accident Investigation and when reporting 'near misses', both of which give rise to inconsistent reporting.</li> <li>• The service would benefit from raising the awareness of staff to the confidential helpline.</li> <li>• The Service acknowledges that there are inadequacies in the welfare facilities at the Earlswood Training Centre. These now need to be addressed as a matter of urgency.</li> </ul>

### **SUMMARY OF PAT TEAM FINDINGS**

There are established procedures and practices in place to ensure that safety critical information is captured and disseminated to staff. A dedicated confidential helpline service is provided as part of the Occupational health service.

The self assessment has identified the remedial steps that need to be taken to improve performance in this area.

Developing		Established	X	Advanced	
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## KLOE 5 – Health and Safety

How well is the Authority ensuring its responsibilities for health, safety and welfare are met?

### **Key Question 5.4**

*Does the FRA have a robust process for measuring and evaluating the effectiveness and improving performance of its Health, Safety and Welfare activities?*

<u>ISSUES/FINDINGS</u>	<u>AREAS FOR DEVELOPMENT</u>
<ul style="list-style-type: none"> <li>• Health and safety information is captured to review performance and identify trends. Information is disseminated to staff and members via regular monthly and quarterly updates.</li> <li>• A draft Annual H&amp;S Report has been prepared for publication as a new initiative.</li> <li>• A Safety Alert system is used to highlight areas of under-performance as well as to raise awareness of potential H&amp;S risks.</li> <li>• The service uses information gained from horizon scanning to inform its practices and procedures.</li> <li>• Members have a high level of awareness of performance in relation to HSW (through the PRAC) .</li> <li>• An Operational Learning System has been put in place and identifies issues arising from operational incidents.</li> </ul>	<ul style="list-style-type: none"> <li>• A consistent policy would clarify the extent of the discretion that Operational Monitoring Officers have as to whether or not to attend particular incidents.</li> <li>• The full range of H&amp;S information necessary for strategic planning to reduce risk across all areas of service activity does not appear to be considered as a health and safety responsibility/function. e.g. gaps in safety critical training.</li> <li>• The service should consider whether the lessons from the Operational Learning System are being used to the best effect.</li> </ul>

### **SUMMARY OF PAT TEAM FINDINGS**

The Service has processes in place for measuring, evaluating and disseminating a range of H&S information. However, the Service would benefit from a review of these processes to ensure that all relevant H&S-related information, from all relevant sources, is considered at appropriate levels in the organisation.

Developing		Established	X	Advanced	
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## KLOE 6 – Training and Development

How well is the Authority ensuring its responsibilities for training, development and assessment of its staff are met?

### **Key Question 6.1**

*Does the FRA have clearly defined and effective policies to take account of its training, development and assessment responsibilities?*

<u>ISSUES/FINDINGS</u>	<u>AREAS FOR DEVELOPMENT</u>
<ul style="list-style-type: none"> <li>• A range of policies exists to support the delivery of training and development.</li> <li>• Support staff can now access ADCs.</li> <li>• A PPDR policy is in place, with PPDRs mainstreamed throughout the Service to support individual development.</li> </ul>	<ul style="list-style-type: none"> <li>• The service should review the current T&amp;D policy to reflect changes in the organisational structure.</li> <li>• The service would benefit from a clear and current bespoke training strategy linked to policy to deliver organisational objectives.</li> <li>• The ADC policy should be amended to reflect access for support staff to ADCs.</li> <li>• Clarity is required within policy as to assessment criteria/ maintenance of competence in risk critical activities e.g. Incident Command.</li> </ul>

### **SUMMARY OF PAT TEAM FINDINGS**

There is evidence of a lack of clarity between training policy and training strategy which may hinder the achievement of successful implementation.

Developing		Established	X	Advanced	
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## KLOE 6 – Training and Development

How well is the Authority ensuring its responsibilities for training, development and assessment of its staff are met?

### **Key Question 6.2**

*Do effective management structures and arrangements exist within the FRA to support the development and implementation of training, development and assessment activities?*

<u>ISSUES/FINDINGS</u>	<u>AREAS FOR DEVELOPMENT</u>
<ul style="list-style-type: none"> <li>• The Service has recently introduced a new structure for managing its training and development activities.</li> <li>• The Service recognises the need to consider different ways of working to increase capacity and flexibility in its training provision.</li> <li>• It is encouraging to note that the service recognises the need to maintain sufficient numbers of competent BA instructors to support training delivery (with funding having recently been provided for this purpose).</li> <li>• The Service’s commitment to improving T&amp;D can be demonstrated by recent support through the allocation of budget.</li> </ul>	<ul style="list-style-type: none"> <li>• The intended benefits of the restructure (POD) are yet to be fully realised.</li> <li>• The service should investigate whether or not its existing training delivery capacity is adequate to meet its safety critical training needs.</li> <li>• The service should ensure that adequate and suitable physical assets are available to support its risk critical training requirements.</li> <li>• Training provision would benefit from a more co-ordinated approach to Training Needs Analysis</li> </ul>

### **SUMMARY OF PAT TEAM FINDINGS**

The new structure has real potential to deliver/support improved training and development within the service. However better sharing of information at appropriate levels between the three sections of the new POD structure would speed up this process. Unless capacity constraints are addressed within the training and development structure there is a risk that full compliance in risk critical training may never be achieved.

Developing		Established	X	Advanced	
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## KLOE 6 – Training and Development

How well is the Authority ensuring its responsibilities for training, development and assessment of its staff are met?

### **Key Question 6.3**

*Has the FRA established effective plans, challenging targets and procedures and practices in relation to training, development and assessment?*

<u>ISSUES/FINDINGS</u>	<u>AREAS FOR DEVELOPMENT</u>
<ul style="list-style-type: none"> <li>• A service-wide risk critical training and assessment programme has been developed.</li> <li>• PPDRs are in place to determine individual development needs.</li> <li>• Local Training Needs Analyses based on local risks are used to formulate annual station training plans.</li> <li>• The service has strengthened its ADC process through the introduction of additional practical elements prior to promotion.</li> <li>• Training collaboration group (TCG) resources are available at all stations.</li> <li>• Devolved budgets at County Command level provide flexibility for station based training provision in line with station risk profile e.g the provision of vehicles for RTC training.</li> </ul>	<ul style="list-style-type: none"> <li>• The service should undertake a detailed analysis of training requirements to identify the scale of any backlog in risk critical training.</li> <li>• The service should ensure that there is a robust system for confirming maintenance of competence in Incident Command at all levels, particularly where fire fighters ride in charge of appliances.</li> <li>• The service should ensure that a clear process is in place so that BA training activities reflect operational procedures (e.g. as has recently been demonstrated with the use of thermal imaging cameras for compartment fire fighting).</li> </ul>

### **SUMMARY OF PAT TEAM FINDINGS**

It was clear that a number of positive developments have taken place in training and development within the service. However it was unclear to the PAT team whether the service-wide training programme could be delivered within current training capacity.

Developing		Established	X	Advanced	
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## KLOE 6 – Training and Development

How well is the Authority ensuring its responsibilities for training, development and assessment of its staff are met?

### Key Question 6.4

*Does the FRA have a robust process for measuring and evaluating the effectiveness and improving performance of its training and development activities?*

<u>ISSUES/FINDINGS</u>	<u>AREAS FOR DEVELOPMENT</u>
<ul style="list-style-type: none"> <li>• Despite an extended period between the provision of training and the availability on station of the PDR Pro system there is evidence that staff on fire stations are now using PDR Pro to record T&amp;D and incident activities.</li> <li>• There is a structured station audit system in place that provides information on performance.</li> <li>• Stations are using the skills matrix (front end of CorVu) as the planning tool for the greater part of station activity, including training.</li> <li>• The NVQ regime within the Service provides an effective system for the evaluation of WDS fire fighters in development against National Occupational Standards.</li> <li>• External agencies are used to audit and validate areas of training and development e.g. Edexcel and Training Services Wales.</li> </ul>	<ul style="list-style-type: none"> <li>• The Service would benefit from a review of the various systems it is currently using to capture similar/duplicate T&amp;D data.</li> <li>• The Service should introduce a process for evaluating the performance of instructional staff and the content of courses.</li> <li>• Lessons learned from operational activity (i.e. the Operational Learning System) should influence training delivery.</li> <li>• Data capture, particularly at RDS stations, would benefit from an enhancement to the current IT infrastructure and on-station facilities.</li> </ul>

### SUMMARY OF PAT TEAM FINDINGS

It is clear from the evidence that the Service has made a number of positive developments to support the measurement and evaluation of T&D activities.

The Service uses three recording systems to capture information relating to the training, development and operational activities of its staff, however the information that is inputted into these systems appears to be inconsistent, partial and is difficult to validate.

Clear control/responsibility for inputting risk critical training data is required to facilitate accurate and consistent forecasting for training.

Developing		Established	X	Advanced	
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