Fire and Rescue Service

Effectiveness, efficiency and people inspection 2018/19

An inspection of Lincolnshire Fire and Rescue

Action Plan 2018 / 2019

Areas for improvement
Cause of concern (highlighted in red)

HMICFRS report sub-section (& page)	Area for Improvement / Cause of concern (red)	Activity	Output	Target date	Owner	Progress	R A G
Question 1 - How effective is the Service at keeping people safe and secure?							
1.1 - Understanding the risk of fire and other emergencies (page 9)	**1.1.1 - The service needs to improve how it engages with the local community to build up a comprehensive profile of risk in the service area**	1.1.1.1 - Develop Service Level Agreement (SLA) with the County Wellbeing Service	SLA signed	Dec-18	**AM P&P**	SLA completed	
		1.1.1.2 - Enhance presence in local GP surgeries to advertise services and support available	Main contact for County's GPs identified	Dec-18	**GM P&P**		
			GP materials developed to promote safe and well visits	May-19			
			Process for six monthly updates to GPs developed	May-19			
		1.1.1.3 - Develop/explore the volunteer sector	Requirements for generic volunteer role explored	Sep-19			
			Appropriate volunteer opportunities investigated with partners/agencies	Jun-19			
		1.1.1.4 - Review mechanism for gathering community risk information	Community Risk profile updated	May-19			
			Community engagement strategy developed				
			Process developed for staff to share information on known risks within their community				

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HMICFRS report sub-section (& page)	Area for Improvement / Cause of concern (red)	Activity	Output	Target date	Owner	Progress	RAG
1.2 - Preventing fires and other risks (page 11)	**1.2.1 - The service should evaluate its prevention work, so it understands the benefits better**	1.2.1.1 - Work with other FRS/NFCC to develop a generic evaluation process that will support LFR prevention activity	LFR evaluation process identified	Sep-19 Jun-19	**GM P&P**		
		1.2.1.2 - Conduct analysis of LFR's main prevention campaigns (cooking, smoking, heating, electrical,)	Report produced outlining activity and impact	Jun-19			
		1.2.1.3 - Conduct a Service led multi agency de-brief to share learning after a fire fatality or near miss	Post fatality or serious injury policy reviewed and embedded	May-19			
		1.2.1.4 - Review approach to community fire safety activity at on-call stations	Report produced outlining activity and impact	Oct-19			
	1.2.2 - The service should ensure it targets its prevention work at people most at risk, including those from hard-to-reach groups	1.2.2.1 - Establish mechanism to engage with hard to reach groups ie migrant community, seasonal	See 1.1.1.4 engagement strategy	Oct-19	**GM P&P**		
		1.2.2.2 - Evaluate the data currently available, with specific focus on drive times to ensure hard to reach areas are assessed for priority action.	Hard to reach communities based on drive times identified	Nov-19		Completed	
		1.2.2.3 - Engage with Priority groups identified as part of the data analysis in 3.2	Agree mechanisms to engage with priority communities	Nov-19			

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1.3 - Protecting the public through fire regulation (page 13)	**1.3.1 - The service should ensure it allocates enough resources to a prioritised and Risk-Based Inspection Programme (RBIP)**	1.3.1.1 - Confirm validity of current RBIP methodology	Methodology confirmed	Nov-18	**GM P&P**	Completed	
		1.3.1.2 - Implement revised Prevention and Protection (P&P) structure	Structure agreed	Nov-18	**AM P&P**	Structure agreed by SMB - Nov 19	
			Structure embedded	Aug-19			
		1.3.1.3 - Agree business case and secure funding for additional Fire Protection (FP) resources	Business case agreed	Nov-18		Business case agreed by SMB - Nov 18. Funding discussed at Resources Board - Jan 19	
			Funding approved	Jan-19			
			Additional FB officers in post	Sep-19			
		1.3.1.4 - Version 3 Flo-Suite fully implemented	Embedded witin LFR	Sep-19	**GM P&P**		
		1.3.1.5 - Ensure hazard spotting process remains fit for purpose	Process reviewed and report produced	May-19			
	1.3.2 - The service should assure itself that its enforcement plan prioritises the highest risks and includes proportionate activity to reduce risk. It should also include appropriate monitoring and evaluation	1.3.2.1 - Ensure Fire Service Guidance Note 27 remains fit for purpose	FSG Note 27 reviewed and updated	Mar-19	**GM P&P**		
		1.3.2.2 - Enhance engagement with all staff around potential enforcement activity	Engagement plan developed and agreed	Apr-19			
		1.3.2.3 - Evaluate effectiveness of FP activity	Evaluation process developed and agreed	Mar-20		Once national picture known	

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1.4 - Responding to fires and other emergencies (page 15)	**1.4.1 - The service has a plan in place to adopt National Operational Guidance (NOG), including joint and national learning, but needs to clearly communicate this throughout the organisation**	1.4.1.1 - Ensure NOG is understood and embedded throughout the	Engagement plan developed and agreed	Mar-19	**AM Response**		
		1.4.1.2 - Ensure Service Order 04 (Operations) is NOG compliant	Compliance confirmed	Feb-19			
		1.4.1.3 – Produce Response Framework document in line with NOG	Document produced	Apr-19			
		1.4.1.4 - Implement LFR Organisational Learning Board	Quarterly meetings schedule developed	Feb-19			
		1.4.1.5 - Evaluate effectiveness of NOG activity	Evaluation process developed and agreed	Oct-19			

HMICFRS report sub-section (& page)	Area for Improvement / Cause of concern (red)	Activity	Output	Target date	Owner	Progress	R A G
	**Question 3 - How well does the Service look after its people**

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3.1 - Promoting the right values and culture (page 28)	3.1.1 - The service should improve its mechanisms for staff to access specialist wellbeing support	3.1.1.1 - Complete wellbeing and Inclusion toolkit	Information collated	Mar-20	AM P&P	Depended on LCC website progress	
		3.1.1.2 - Raise manager awareness of routes and the process	Communications plan developed	Nov-19			
		3.1.1.3 - Review LFR Health & Wellbeing Framework	Updated and agreed\n\nCommunicated to staff	Nov-19			
		3.1.1.4 - Work collaboratively with Police/ EMAS to align where possible	Exploit any collaborative opportunities to work with Blue Light partners	Jun-19			
	3.1.2 - The service should ensure its values and behaviours are understood and demonstrated at all levels of the organisation	3.1.2.1 - Review whether LFR should adopt LCC values definitions	Review undertaken	Jun-19	CFO		
		3.1.2.2 - Develop Learning Management System (LMS) values package based on current Organisational Culture booklet	LMS package developed\n\nRolled out to stations	Jul-19\n\nSep-19			
		3.1.2.3 - Develop a plan to engage workforce on LFR values and behaviours	Develop a plan	Jun-19			

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3.2 - Getting the right people with the right skills (page 30)	3.2.1 - Lincolnshire Fire and Rescue Service needs to assure itself that it has systems in place for the effective recording and monitoring of training (By 31 July 2019 the service must ensure that suitable operational training is provided, assessed and recorded accurately and assure itself that all operational staff are competent in risk-critical skills)	3.2.1.1 - Undertake audit of risk critical training competence (breathing apparatus, incident command, driving, water)	Audit completed	Nov-18	AM CS		
		3.2.1.2 - Introduce new training recording system (PDRPro)	System procured Train the trainer course Phase 1 completed	Dec-18 Jun-19 Mar-20		System procured Train the trainer course attended (2 persons trained).	
		3.2.1.3 - Review quality assurance process for training content and delivery	Skills for Justice accreditation renewed	May-19			
		3.2.1.4 - Review the quality assurance of training delivery/sector competence on a quarterly basis	Review completed Evidence of CM/WM competence	Jan-19 Apr-19			
		3.2.1.5 - Identify method to record competence (as opposed to attendance) on PDRPro	Report completed	Jun-19			
		3.2.1.6 - Undertake corporate audit of training records	Audit / validation to be completed once all records are in place.	Apr-20			

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3.3 - Ensuring fairness and promoting diversity (page 31)	**3.3.1 - The service should assure itself that it has effective grievance procedures**	3.3.1.1.- Ensure LFR managing grievance policy (SO18) is up to date	Policy reviewed and agreed	Mar-19	**AM CS**		
		3.3.1.2 - Deliver investigator training	All SMs/equivalent FSS trained	Sep-19			
3.4 - Managing performance and developing leaders (page 33)	**3.4.1 - The service should put in place a specific process to identify, develop and support high potential staff and aspiring leaders**	3.4.1.1 - Review Organisational Development Procedure (ODP) 3.5	Procedure reviewed and agreed	Apr-19	**AM CS**		
		3.4.1.2 - Consider wider development programmes at lower level (GM) for the ELP (Green / Grey) / other LCC development programmes.	L&D framework to SMB	Sep-19			
		3.4.1.3 - Consider individual PDR for all On-call staff	Options paper to on-call resilience board	Sep-19			