No.	HMI Page	Area for improvement	Required outcomes	Action to achieve required outcomes	Update – October 2022	Responsible function	Timescale	RAG
1	17	The Service should assure itself that it has procedures in place to record important operational decisions made at incidents, and that these procedures are well understood by staff.	Operational decisions are logged consistently Staff understand how to log decisions.	Ops Response Functional Plan Deliverable 8: The Operational Assurance Team (OAT) will liaise with the Operational Procedural Review Team (OPRT) and the Command Department to confirm and understand current procedures in place to record operational decisions and offer support if they are in need of review from information/learning gathered from operational incidents.	July 2022 update Health and Safety liaised with OPRT, WM Command Department and our Learn Pro developer regarding decision logging. PREPOL01- Incident Command Policy has been reviewed which references Decision logging. Service Instruction 0739 - Decision Logging is in place – reviewed by Operational Assurance. (SI review date: 27/08/24). A trial for body worn cameras to assist with the recording of decisions (ending November 2022) is still running. Information has been found as part of fact finding, but results expected November 2022. Command Learn Pro is available on the Portal. 'Decision Logging' is found in additional modules also. ICCM, ICWM, reference contemporaneous notes and recording of decisions via the Vision Boss mobilising system is made.	Response	Q4 2022/23	
			communication of procedures to operational crews and, if required, create literature to ensure understanding. Review of understanding to be provided through the	procedures to operational crews and, if required, create literature to ensure understanding.	In Incident Command Support Management (ICSM) input, reference is made to having a member of the command support team scribe for meetings and for carrying out a written decision log when resources permit. Review found that available resources for the recording of decisions were: Vision Boss, Decision log books, Dictaphone, officers note books, Incident Command Unit white boards (photographed), body worn cameras, Resilience Direct.			

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assurance programme and monitoring of incidents

Process to be reviewed with information provided to OPRT and the Command Department to continue the learning cycle.

October 2022 update

Review of all foundation policy, procedure and guidance completed along with supporting gap analysis, looking at what the policy says and where we comply or require improvement.

It was identified in SI 0739 that 'Incidents of 6 pumps or over where the Incident Command Unit (ICU) is mobilised will automatically generate the need for an Incident Decision Log to be completed.' Compliance review captured using two year data analysis to see where criteria has been met in relation to ICU mobilisations vs decision log completion. Review extended to where decision logs have been completed vs what has been received in Ops planning once complete (SI 0739). Review also found that the new prints of the decision log books state for the books to be returned to Ops Assurance which is a printing error (Ops Planning). Ops Assurance has not received any decision log books.

Body Cameras have not been used at any incident for the purpose of recording decisions other than that of Technical Command Assessments (trial ends Nov 2022).

Information and Q&A on Decision Logging have been incorporated as part of the current quarterly Station Manager Audit (Sept-Dec) with monthly feedback at standardisation.

HMICFRS Action Plan 2021	
NINICENS ACTION Plan 2021	A questionnaire for all Officers has been constructed and will be published in the last week of October for 2-3 weeks; this will provide additional data to indicate the level of understanding of the decision logging process. Key meeting scheduled between GM H&S/OA (deliverable owner) and GM Operational Policy, intelligence & planning (decision logging owner). Meeting will review Service policy against gap analysis and plan for immediate improvement actions where required. Operational Assurance officers monitor decision when actively monitoring/attending incidents. This also forms point of discussion during
	Operational Assurance Team morning meetings. Jan 2023 update – Operational Response – A Review of decision logging findings and survey responses undertaken by Response as per the Functional Plan, shared with Preparedness and presented to Operations Board in December. Subsequent meeting held between key stakeholders from Response/Preparedness to confirm governance and assurance arrangements moving forward – Service Instruction to be updated. Decision logging input given to Station Manager cohort at last standardisation

HMICFRS Ac	tion Plan 2021	
HMICERS AC	tion Plan 2021	meeting based on recent findings. Expectations set in relation to complying with SI 0739 and next steps outlined to ensure these become embedded (underpinned by work being completed by Preparedness). Decision logging featured in Q3 Operational Assurance Team (OAT) daily audit and has
		remained in Q4 to provide elements of assurance on pervious input focussing on awareness, understanding and compliance. Decision logging remains a focus for review of incidents through OAT morning meetings and active monitoring at incidents by Operational Assurance officers. As work is entwined with Preparedness, an update which compliments this has been provided:
		Jan 2023 update – Operational Preparedness – Following review of the questionnaire and Operations Board presentation. It was agreed for Operational Preparedness to review and update the SI and supporting E-learning modules. Governance arrangements have now been updated regarding decision logging to ensure more robust audit and assurance is in place. This will be performed by the OA team where incidents meeting the criteria will be highlighted and scrutinised.
		To embed and ensure compliance with the Service Policy, TDA will incorporate a command seminar in first quarter 2023 on decision logging and incorporate the use of decision logging in command assessment

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					and exercises. All officers will be re-issued a new decision log book and fire control will have access to a revised electronic decision log in addition to hardcopy.			
					April 2023 update Decision logging has seen a significant improvement in the final quarter of the 2022/23 period. Operational Assurance have continued to assure, through audit and the Operational Assurance Team morning meetings, the completion of decision logs in line with Service Instruction 0739 (Decision Logging). In excess of 20 decision logs had been completed, assured and stored in the correct location during this quarter. Senior officer grab bags which were issued have supported completion of decision logs by officers having instant access to the correct equipment/ materials. Assurance of both completion and compliance with SI 0739 is now business as usual.			
2	36	The Service should assure itself that it has an effective succession planning mechanism in place for all roles	There are succession planning mechanisms for all roles; Grey, Green and Red Book.	POD Functional Plan Deliverable 3.1: To work with functional leaders to ensure each area has a workforce plan and is able to understand the resourcing opportunities within their teams.	July 2022 update The organisational People Plan 2021-24 includes actions relating to the development of succession plans across all functional areas. Work will commence in Qt 3 2022/23 on this action. The Gateway process has been reviewed as part of the work associated with embedding the Leadership Message. Documentation is currently being updated and this will be re-launched in Autumn 2022.	People and Organisational Development	Feb 23	

HMICFRS Action Plan 2021						

ПІЛІС	FRS Action Plan 2021		-	
		Review the Gateway		
		process	October 2022 update	
			Succession planning mechanisms for all	
			roles; Grey, Green and Red Book. Director	
			of People and Organisational Development	
			(POD) confirmed that this will be achieved	
			by February 2023.	
			January 2023 update	
			A toolkit to support departmental	
			succession planning in association with the	
			completion of their appraisals is currently	
			being finalised to meet the February 2023	
			target date.	
			10.000	
			Further information in relation to the	
			Gateway and individuals' personal	
			development will also be circulated to all	
			staff	
			April 2023 update	
			The gateway procedure has been reviewed	
			amended and approved by SLT. Revised	
			guidance to Green/Red and Grey book	
			employees has been issued and this is now	
			complete	
			The Succession Planning Policy has also	
			been completed and approved by SLT and	
			individual departmental meeting are	
			currently being held to look at future	
			requirements and plan future workforce.	
			This piece of work is completed and will be	
			monitored and supported on a regular basis	
			moving forward as business as usual	

38	The Service	Equality impact	This is built within the	July 2022 update	People and	2022	
	should ensure it	assessments are	People Plan and	A new Equality Impact Assessment (EIA)	Organisational		
	has robust	carried out in a	Equality plan, taking	template has been developed in line with	Development		
	processes in	consistent way.	the NFCC model and	the National Fire Chief's Council (NFCC)			
	place to	Staff understand	working with all	best practice guidance. This new template			
	undertake	when and how to	interested parties	has been launched and all newly created			
	equality impact	carry out an EIA	including staff	and updated EIAs developed as part of			
	assessments	Actions are agreed	Networks to produce	policy development and annual review use			
	and review any	and delivered.	a robust mechanism	the new template.			
	actions agreed		for use by all	Reports will not progress for ratification if			
	as a result.		managers, and clarity	an appropriate EIA has not been			
			in relation to content	completed.			
			and completion				
			timescales to be	October 2022 update			
			brought to	Equality Impact Assessments are carried			
			SLT/Authority upon	out in a consistent way. Staff understand			
			completion	when and how to carry out an EIA. Actions			
				are agreed and delivered. Actions:			
				Director of POD to refresh/reissue			
				reminders about new EIA processes.			
				Director of POD suggested Strategic			
				Leadership Team (SLT) sign off reports at			
				SLT meetings only when an EIA is attached.			
				January 2023 update			
				The process agreed in October by SLT which			
				restricts reports progress without an			
				Equality Impact Assessment is now in place.			
				April 2023 update			
				The new EIA process is now fully functional			
				and MFRS is not up to date in relation to all			
				required EIA that need to be undertaken.			
				Action complete			

As well as the three formal areas for improvement detailed above, when reviewing the report, officers identified other areas where the Service could improve. Many of these areas reflected work that is already in progress and included in MFRS plans, but these actions are summarised in this plan for completeness.

	14	As well as the	Prevention	Prevention	July 2022 update	Prevention	Q2 2022/23	
		three formal	partnerships are	Functional Plan	Liverpool University staff have interviewed			
		areas for	consistently	Deliverable 5	all department heads.			
		improvement	evaluated for		The evaluation questions will consider the			
		detailed above,	efficiency,	We will enhance how	following factors:			
		when reviewing	effectiveness and	we evaluate our role	 What resources we are investing 			
		the report,	benefit to the	to understand its	into the 'Safeguarding and High			
		officers	public.	effectiveness and	Risk' and 'Home Safety' pillars?			
		identified other		benefit to the public	The main tasks being undertaken			
		areas where the		through all of our	by each pillar.			
		Service could		partnership working.	The intended outcomes/benefits of			
		improve. Many			undertaking these activities.			
		of these areas		A consistent process	Whether data is available to			
		reflected work		and methodology for	demonstrate these benefits.			
		that is already in		evaluation will be				
		progress and		presented for the	A final report will be prepared and			
		included in	t	consideration of SLT	delivered to Community Risk Management			
		MFRS plans, but		members. Liverpool	Board for further consideration by the end			
		these actions		University have	of year.			
		are summarised		agreed to review				
		in this plan for		current partnership	October 2022 update			
		completeness.		work and evaluate	Prevention Partnerships are consistently			
				effectiveness and	evaluated for efficiency, effectiveness and			
				benefit to public.	benefit to the public. Still some gaps			
					around evaluation. Home Safety, Youth			
					Education and Community Safety managers	Prevention		
					have had further meetings with Liverpool			
					University research students to shape the			
					evaluation framework and clarify the data			
					available. The University have also done			
					wider scoping work to identify established			
					sources that can be used to apply economic			
					figures. Where the data was available, they		04 2022/22	
					have conducted cost-benefit analysis. The		Q4 2022/23	

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	research dissertations have been sub and University staff are working on a to feed the findings back to AM Prev Researchers are aiming to get an init report to MFRS by end of October to capture all four pillars which were fo	report Performance ention.
	January 2023 Update - Prevention University of Liverpool report received November 2022. Prevention officers undertaking further scrutiny of acade report including reengagement of res students to establish a broader understanding in terms of Home Safe the associated economic cost vs social	ed in emic search ety and al
	Prevention will include evaluation as deliverable to ensuring a consistent, bound and monitored progression. January 2023 update – Strategy and Performance Work is ongoing to establish a single approach to commissioning evaluation will ensure the Service's objectives and and resources are used to help delived positive outcomes for communities.	on that
	April 2023 update An evaluation of the compliance of the current Integrated Risk Management has been completed by Liverpool John Moores University. The second phase this evaluation will take place during final year for the IRMP (July 2023/Jur	Plan n e of the

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					2024). This will form the basis of structured and consistent evaluation going forward. Action Complete			
5	14	for a increase lear imp	assurance has reased and rning applied to prove future ality.	An internal Quality Assurance process to be introduced, undertaken by Senior Inspectors periodically. This will be aligned to the national accreditation process (4 per year) for auditors to be listed on the national contextualised register.	July 2022 update Three personnel are undertaking registration for Contextualised Auditor's Register (CAR). Five Senior Fire Safety Inspectors (SFSIs) will enabled Protection Compliance Managers (PCMs) to undertake more periodic quality assurance. Relevant criteria aligned to national framework is in place. October 2022 update Sampling of visits for assurance has increased and learning applied to improve future quality. Action complete	Protection	Q4 2022/23	
6	17	loca has ther of b und	al businesses s increased and ere is evidence better derstanding of mpliance.	Protection Functional Plan Deliverable 6 We will develop and deliver a programme of business fire safety education events to the diverse communities of Merseyside. This will include an ED&I monitoring process	July 2022 update Schedule of business safety events is in place with one event delivered in June. Looking to develop a robust means of identifying and capturing ED&I data to enable an analysis to be undertaken to ensure there is no bias in relation to how our enforcement activities are being undertaken. Businesses generating highest numbers of Unwanted Fire Signals have been identified with a data sharing agreement in place with	Protection	Q4 2022/23	

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				for all fire protection activity. We will develop partnership working with internal and external stakeholders to reduce UWFS.	Strategy and Performance. Departmental engagement with identified businesses has commenced. October 2022 update Engagement with local businesses has increased and there is evidence of better understanding of compliance. Area Manager Protection advised that an engagement event is planned for December based on new legislations (follows previous events). These events are scheduled 9th and 14th December 2022. Unwanted fire signals will be a constant action and would be happy to sign this off for January. Area Manager also looking at the process of inspecting.			
7	19		Control staff have received practical fire survival training and its success has been demonstrated through evaluation.	Preparedness Functional Plan Deliverable 9: Respond to the HMICFRS observation to deliver practical training to Fire Control staff on fire survival guidance. Review the current fire survival guidance eLearning and create a practical module to	July 2022 update Final review of Fire survival guidance took place and completed 11th May 2022. Fire Survival guidance e-learning was completed by all Fire Control staff in June 2022. Practical modules are currently in development with completion set for December 2022. All ranks in Fire Control have received a Command Assessment; started in Nov 2021 and completed in Feb 2022. Control staff will start to complete reflective logs to reflect performance. Watch Manager B's will validate reflective	Preparedness	Q4 2022/23	

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deliver to all Fire Control Staff. Create a training plan to deliver fire survival guidance to all staff in Fire Control.

Review the current
Fire Control training
planner and introduce
practical training
across a number of
incident types to
support competency
and include a
command assessment
process for Fire
Control Managers.

Embed an assurance program to review training standard and competency.

logs. The Station Manager will validate WMB's reflective logs.

Control staff will receive command revalidations during larger Service exercises by using the secondary control room for all activities.

Programme of Joint Exercising currently being agreed with Command Dept. COMAH exercises also running throughout the year.

October 2022 update

Practical training of Fire Survival Guidance, testing the Electronic Evacuation Spreadsheet has been carried out with all four watches, with a final demonstration to PO's on 13/10/2022. Through evaluation, it was recognised that a third monitor would assist operators in inputting data onto the spreadsheet. This has been authorised and supply and fit of extra monitors on each position is being scheduled.

Jan 2023 Update – Operational Response Building on the initial High Rise multi

agency exercise in April 2022 which included all North West Fire and Rescue Services, a 2nd was run on 16th November 2022.

16/11/22. High Rise multi agency exercise and Home Office visit. Exercise involved a response to a confirmed fire in High Rise building whereby the incident escalated to fire spread upon external facades requiring a change in evacuation strategy and cross border mobilisations of additional

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					maintenance of competence. This will include E-learning, Safe Person Assessments and practical training (e.g. practical fire survival guidance). April 2023 update No further update. This is now within fire control maintenance of competence and delivered through FC management Action Complete		
8	20		Staff understand how and when to use operational discretion and log decisions (also see 1).	Response Functional Plan Deliverable 9: The Operational Assurance Team (OAT) will liaise with the Operational Produce Review Team (OPRT) and the Command Department to confirm and understand current procedures and training in place in regards to understanding of operational discretion. Review will be undertaken on when this has been recorded at operational incidents. The OAT will support communication of	July 2022 update Operational Assurance liaised with Operational Produce Review Team (OPRT)/Command Department Regarding the current position and understanding. Policy review conducted - Service Policy Prepol01 Incident Command, includes a section on Operational Discretion (OD). Input on OD covered during command training of CM/WM/SM etc. Incident Command Crew Manager (ICCM)/ Incident Command Wacth Manager (ICWM)/ Incident Command Station Manager (ICSM) and overarching command training. When Operational Discretion training is delivered, case studies of where and how it was applied are used. Operational Discretion input is featured in Operational Assurance Team audits and also highlighted through Incident Notes: 17 & 63; OD also highlighted in OBN 87 (Jul 2022). Also see 1 and17. October 2022 update Staff understand how and when to use operational discretion and log decision.	Response	Q4 2022/23

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procedures to operational crews and, if required, create literature to ensure understanding.

Review of understanding to be provided through the operational assurance programme and monitoring of incidents

Process to be reviewed with information provided to OPRT and the Command Department to continue the learning cycle.

Review of decision logging to take place support this process.

Jan 2023 update - Operational Preparedness

Input on operational discretion is covered during command training of CM/WM/SM etc. Incident Command Crew Manager (ICCM)/ Incident Command Watch Manager (ICWM)/ Incident Command Station Manager (ICSM) and overarching command training. During quarter 1 2023 a further Command Seminar will be hosted on the subject where we will explore the use of operational discretion, how it should be recorded and any incidents of note. The use of ops discretion has been written into the update service instruction relating to decision logging and further research with academic partners is being explored by TDA.

Jan 2023 - Operational Response

Feedback received from Station Managers conducting audits of all crews on stations during Q3 confirms understanding of operational discretion when used at incidents. Operational discretion has remained in the Q4 audit for additional discussion and continued assurance of understanding. Operational discretion continues to be monitored via OA activities such as OAT morning meetings, active monitoring at incidents and notification from control to a more senior officer when it is declared. Agreed during meeting between Response/Preparedness to now make it mandatory for decision logging to

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9	30		Staff are confident about using new applications and devices within an agreed period of time following implementation (varying dependent on the system/technology	Strategy and Performance Feedback and customer service will be built into the roll- out of all new applications and technologies as business as usual.	July 2022 update Strategy and Performance CFMIS was released in Protection for stations along with the new HFSC process in Prevention – a customer satisfaction survey was sent to all station users, feedback was received, this was acted upon and changes were made. Response	Strategy and Performance	Q1 2022/23
			involved).	Response Functional plan Deliverable 10: The OAT to undertake review of new technologies and what has been implemented on station to identify areas of focus. Complete staff survey to identify areas of concern. Review competence and understanding of staff to be provided through the operational assurance programme and monitoring of	Review undertaken of what new technologies are on station. Review found technologies including: CFRMIS – which incorporates HFSC, SSRI (site specific risk information), Simple Operational Fire Safety Assessments (SOFSAs), Fire Safety concerns reporting tool; Hot Debrief; Toughpads on all appliances now with various functionality. Microsoft Teams is used more broadly on station and we also found various internet browsers still in use. New technology use is now under ongoing review at every Morning Meeting; communicated via Officer Briefing Notes (OBN's) e.g. OBN 87. OSHENS has been monitored from Jan to July - No specific feedback observed.	Response	Q4 2022/23

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	incidents. Arrange	October 2022 update	
	additional input and	Many staff are confident about using new	
	supportive training	applications and devices within an agreed	
	where required.	period of time following implementation,	
		but we will be carrying out more work to	
	Feedback to relevant	ensure that this confidence is widespread.	
	stakeholders on		
	findings to support	Jan 2023 – Opersational Response	
	embedding	Use of new technologies on station	
	technologies in the	continues to be monitored through audit	
	operational	and assurance. Crews continue to grow in	
	environment	confidence in use of platforms such as	
		CFRMIS and the use of Toughpads.	
	Monitor and review.	Response have recently enhanced the use	
		of PIPS to allow stations to access station	
		based duties and performance, Incidents by	
		station dashboard and Alert to mobile	
		performance. All data is live and current	
		with daily operations. Education of crews in	
		this area commenced in last quarter and	
		was also presented at Dec Ops Board.	
		April 2023 update	
		The use of technologies to access risk data	
		continues to be monitored through	
		assurance. Station MOT's will highlight	
		areas were crews can demonstrate a more	
		targeted approach through using	
		technologies.	
		Spotlight on performance sessions within	
		weekly command groups highlight the use	
		of PIPs by stations.	
		Action complete and business as usual	

		ion Plan 2021					
10	34	The behaviours associated with Service values a applied in the workplace and t is demonstrated through performance reviews. The Authority members will al demonstrate th positive behaviours	his Enhance knowledge and understanding of the new Leadership Message for station based operational staff. Input should will include exposure	July 2022 update Work continues for the roll out of organisational implementation of the new Leadership Message and Values. The initial round of training for all staff has been completed, and work is ongoing in aligning this work to address and incorporate the National Core Code of Ethics. Work is also on going in the revision of Appraisals, the Gateway system and all recruitment to incorporate the Leadership message. At the AGM Members provided details of their current skills and training. It has been agreed with POD a process on how to move forward with the implementation and once each of the Members skills audit information has been assessed Members will be contacted directly to progress.	People and Organisational Development Response	Q4 2022/23	
			Legal Services Functional Plan Deliverable 3: To review and refresh the Authority's Members Development Strategy and Programme, to ensure effective governance delivery and provides Members with the	October 2022 update People and Organisational Development (POD) are developing a presentation demonstrating how the leadership message aligns with the Core Code of Ethics and Fire Standards. The presentation will also describe the inclusive leadership values and behaviours expected of all MFRS employees. This is led by POD and is to be presented at the Equality and Inclusion Board on the 21st November 2022. POD has developed a coaching and mentoring policy. MFRS is developing a bank of coaches and mentors to support staff development.	Legal Services POD		

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required knowledge and skills to undertake their roles effectively.

To implement the introduction of Skills Audit Meetings for all Authority Members, to identify current knowledge and skills; and also gaps.

Coaching courses have been provided to 49 staff. These coaches and mentors will be utilised to inform the review process.

The skills audit has been undertaken by POD and feedback provided to Democratic Services. The updated members development strategy will be provided to Members at the next Members Development Group.

January 2023 update

A Station/Departmental toolkit, which provides support templates for discussions around the implementation of the organisational Values and Leadership message, as well as individual and group utilisation of the "colours" assessments is being finalised and will be completed in conjunction with station Managers and Heads of Department.

April 2023 update

POD have supported Response in the delivery of 2 trial workshops (1 x senior officer / 1 x St Helens) using the toolkit exercises. Feedback has been very positive and role out will now continue with the wider Station based team.

Leadership Message, Code of Ethics and behaviours fully embedded in numerous substantive selection processes over last 12 months (supervisory, middle & strategic manager).

Action compete and now business as usual

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				Coaching & Mentoring embedded,			
				development available communicated in			
				docs emailed to all staff.			
11	36	See 2					
12	38	There is an	To rewrite, adopt	July 2022 update	People and	April/May 22	
		equalities plan	and implement a	The revised Equality Action Plan has been	Organisational	7.0111/11/10/22	
		with timescales	revised Equality	completed, and it is ready for publication	Development		
		that summarises		subject to Authority approval			
		key ED&I actions		, , , , ,			
		and timescales.	relevant partners	October 2022 update			
				There is an equalities plan with timescales			
				that summarises key ED&I actions and			
				timescales.			
				January 2022 and date			
				January 2023 update			
				This has now been completed, and progress and outcomes monitored through			
				Culture and Values Board			
				Culture and values board			
13	39	Staff have more	Strategy and	July 2022 update	Strategy and		
		information and	Performance	Update August 2022 – we are currently	Performance		
		guidance about	Functional Plan	working with our external provider to			
		diverse	Deliverable 1.3	deliver the 2022 Staff Survey during the			
		communities an	d	months of November/December 2022.		Q3 2022/23	
		interactions are	Improve				
		improved as a	relationships and	Face to face ED&I Training continues to be			
		result.	engagement with	delivered to staff across the Service.			
			diverse communities:	Total number of sessions delivered since			
			E	May 2019 - 89			
			Engage and consult -	21 sessions booked between 13th July and		02 2022 /22	
			Introduce Community Inclusion Board to	21st October		Q2 2022/23	
			proactively engage	Total of 323 places available over these sessions			
			with diverse groups	305 staff still to attend			
			from communities	15 Authority Members			
			110111 Collinationes	13 Authority Members			

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		Training needs analysis and assessment of operational crews in effective community engagement and put appropriate interventions in place where required Data –led risk and equality analysis	18-20 new recruits 11 National Resilience Total 349 – (additional dates to be identified for National Resilience and Authority Members) Update August 2022 Work is progressing with Phase 1 – Information Gathering. Community Engagement advisor has attended a number of events as detailed below: • Meeting with Merseyside Police Community Engagement Unit (4th May) • Autism Adventures Community Event (4th June) attended by crew and appliance from Belle Vale • Asian Fire Service Association/National Fire Chief's Council Diverse Business Safety Conference (10th June) • Celebrate L8 Event (25th June) attended by crew and appliance from Toxteth • Positive Action Working Group (30th June) • ENEI (Employers Network for Equality and Inclusion) House of Lords Reception (8th July) • Attending Area Manager Station Visits to promote Knowing your Community (local profile, demographics, and known ASB	Q2 2022/23	
			Visits to promote Knowing your Community (local profile,		

HMICFRS Action	on Plan 2021	
	 Building Accessibility Reference Group Guide Dogs Liverpool and MFRS Task and Finish Group - Needs of Faith in Communities in Major Emergencies Task and Finish Group - Cost of Living Crisis 	
	October 2022 update Work has taken place to consider how staff currently engage with their communities, the information that would be useful to staff, and the intended purposes of such engagement. The Community Engagement Adviser has been speaking to operational crews and other staff to determine the best approach and guidance and resources will be produced to assist operational crews to engage with their local communities to improve outcomes.	
	Jan 2023 update • Work has continued to progress with Phase 1 – Information Gathering as detailed below: • Community Engagement Advisor remains part of the Community Impact Fund panel who consider applications and make recommendations for approval. • The Building Accessibility Reference Group has commenced work on reviewing the actions from the completed Access Audits and have attended a site visit at St Helens Community Fire Station	

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	Community Engagement Advisor has attended Area Manager Station Visits and observed presentations around - Knowing your community (profile, demographics, and known ASB areas) Community Engagement Advisor remains part of the Task and Finish Group - Cost of Living Community Engagement Advisor has visited a number of stations and held discussions with crew members with regards to existing levels of community engagement and collated suggestions around areas of improvement HFSC ED&I Monitoring Data review — work still in progress Corporate Communications have produced an information leaflet around equality data collection Community Engagement Advisor has attended a Socio Economic Duty workshop with stakeholders from the Liverpool City Region	
	April 2023 update	
	The second edition of the Service's staff guidance "Reaching all Communities on Merseyside" has been published. An action plan for community engagement has been implemented. Work with stations and other departments, colleagues in Merseyside Police and representatives of local communities continues to deliver against the plan. Attendance at events strengthens community relationships.	
	This work is now business as usual.	

40	The Comited by	DOD From the collection	Luk 2022 and data	Decele and	
40	The Service has a live recruitment	POD Functional plan Improve our ability to	July 2022 update The Service has created a Positive Action	People and Organisational	ongoing
	and positive action	provide good service	Strategy group which includes a wide	Development	
	strategy (and	by diversifying our	variety of members from across the	Development	
	associated EIA)	workforce and	organisation. This group has met on a		
	associated EIA)	creating a fair and	number of occasions and developed an		
		equal place to work.	action plan with short, medium and long		
		Staff at all levels	term goals to further improve positive		
		reflect the	action outcomes.		
		communities we	detion outcomes.		
		serve. Increase	The work is being supplemented by the		
		applications for	secondment of a number of operational		
		vacancies at all levels	staff from their usual role into positive		
		by people from	action specific roles to assist with and		
		protected group	provide further opportunities for		
		currently	engagement with the local community.		
		underrepresented.			
			October 2022 update		
		1.1 People Plan -	The Service has a live recruitment and		
		Improve	positive action strategy (and associated EIA)		
		relationships with	and an Accelerated Development Scheme		
		diverse	which will assist in this area.		
		communities to			
		make MFRA an	January 2023		
		employer of	The revised and updated Positive Action		
		choice to those	strategy , which incorporates recruitment		
		underrepresented	practice, has been agreed at the December		
		groups	People Board		
			April 2023 update		
			Positive Action Strategy published and		
			attraction team. In addition, the High		
			Potential Programme of 132 staff is now		
			operation and cohort 2 & action plans has		
			commenced		
			Action complete		

ПІЛІСІ		on Plan 2021					
15	40	The Service demonstrate work has tal place to end diverse applied into middle senior level and that out are positive.	licants and posts In association with the review and	July 2022 update The Service has adapted the planned accelerated development scheme into a High Performance Programme which seeks to identify and encourage the development of staff who display leadership traits across all areas our increasing diverse workforce. October 2022 update The Service can demonstrate that work has taken place to encourage diverse applicants into middle and senior level posts and that outcomes are positive. January 2023 Progression is part of the Service's overall approach to positive action and forms part of the strategy. April 2023 update The High Potential Programme 132 staff is now operation and cohort 2 & action plans has commenced Cohort 1: 19.6% of staff from BAME backgrounds & 17.7% - women. Work is complete, and will form part of continual workforce planning and recruitment strategy Action complete	People and Organisational Development	Ongoing 2022/23	
				Action complete			
16	40	The Service reviewed all grievance ar discipline	continue to look at	July 2022 update A full review of grievance and discipline cases is currently being undertaken by the Head of Culture and Transformation. Once	People and Organisational Development	Ongoing	

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 FRS ACTION Plan 2021	performance and	delivery range of its	complete the outcomes and	 	
	taken action to	Discipline and	recommendation of this review will be		
	improve where	grievance policies	considered by the appropriate board.		
	necessary.	including allocation	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2022/23	
	,	and support of	The Director of People & Legal and Head of	,	
		investigating and	Culture & Transformation has engaged with		
		hearing officers as	colleagues from Merseycare to explore the		
		well providing	'Just Culture' informal approach to		
		appropriate support	grievance and discipline they have		
		and training	implemented. Work continues with further		
		The Authority intends	meetings planned to explore the feasibility		
		to explore alternative	of adoption within MFRA.		
		delivery models to			
		expand informal and	October 2022 update		
		early intervention	The Service has reviewed all grievance and		
		resolution	discipline performance and take action to		
			improve where necessary.		
			January 2023 update		
			The Associate Head of Culture and Inclusion		
			has completed a full review of the past 18		
			months Discipline and Grievance cases, and		
			provided a set of recommendations, which		
			are currently being adopted.		
			The Authority continues to progress its		
			work on the 'Just Culture' model and the		
			principles of early intervention and informal		
			action with a workshop set for February to		
			be run by Mersey Care management team		
			and their Unison officials.		
			April 2023 update		
			A full review of the past 18 months		
			Discipline and Grievance cases has now		
			been completed and shared with the		
			Culture & Inclusion Board and will now		

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					forwarded for consideration to the SLT Board. This has included progress on an action plan that includes key actions that have been undertaken and continue to be undertaken & will be integral part of the			
					organisations wider work on Culture in line with the LFB/Culture and Values report			
					Workshop on Just Culture Held. Subsequently a paper outlining the four steps and plan to embed the Just Culture			
					Programme shared with the Culture & Inclusion Board. This is now within the functional plan for 23/24 Action complete			
47	40		6 40					
17	40		See 10				2022/22	
18	41		Information has been provided to all staff that explains how the Gateway process applies to them and they understand it.	A review of the Gateway process is currently ongoing with the Senior Leadership Team with a view to relaunching a revised and individual led development scheme and appointments process.	July 2022 update The Gateway system is currently being reviewed in light of the new Leadership Message. Guidance outlining the application process will be updated as necessary to reflects changes. The appraisals system has been updated to incorporate the Leadership message and will be relaunched in Qtr. 2 2022.	People and Organisational Development	2022/23	
				Further support and Training to be provided to ensure open and transparent Appraisals are undertaken and training needs	October 2022 update Information has been provided to all staff that explains how the Gateway process applied to them and they understand it. Non uniformed staff have been removed from this process and action will be taken to communicate this change and reflect in the appraisal process.			

		identified and supported.	January 2023 A revised information diagram has been agreed at People Board which will explain the options open to each group of employees		
			April 2023 update Action complete		