

Areas for Improvement

April to June 2025 UPDATE

Ref. No.	HMI Page	Area for improvement	Required outcomes	Action to achieve required outcomes	Responsible function	Timescale	Notes	*BRAG
1	12	“The service should assure itself that its use of enforcement powers prioritises the highest risks and includes proportionate activity to reduce risk.”	The Service will take appropriate opportunities to prosecute those who don’t comply with fire safety regulations. The Service will use an automated process to consider prosecution at the point of a prohibition notice being served.	FP 2024/25 – Review protocols regarding enforcement and prosecution to: • Improve staff confidence in dealing with them • Improve risk information Outputs - documents, guidance, training, CPD, assurance and monitoring, information sharing protocols (internal and external) Internal Audit review of related processes (including Legal) will be completed	Protection	Dec 2024	Action Complete	
April-June 2025 update A directorate restructure resulted in the creation of a dedicated enforcements and prosecutions department which has subsequently delivered the following which have been recorded in the associated LOGIC model linked to the CRMP 2024-27 deliverable, thus rendering this item closed: 1. Produced documented guidance and checklists. 2. Provided initial legal and associated training for relevant personnel. 3. Included Enforcements & Prosecutions input as part of extant CPD sessions.								

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4. Ensured assurance includes monitoring of audits for consistent approach including the use of the Enforcement Management Model, completed via directorate and corporate assurance frameworks.
5. Ensured enforcement and prosecution processes are applied consistently across districts through a standardisation framework.
6. Developed Enforcements & Prosecutions information sharing across internal MFRS functions through Operational Assurance, Standardisation and Community Risk Management (CRM) Protection Board
7. Developed Enforcements & Prosecutions information sharing across external partners.

2	33	“The service should make sure all staff understand and demonstrate its values.”	The service will ensure it implements the Core Code of Ethics effectively and that staff understand it.	Carry out a cultural survey to help assess what the issues. Develop a Cultural Action Plan which will include actions to reinforce the Core Code of Ethics, and our expectations surrounding leadership, values and behaviour. Use survey tools including pulse surveys to gauge understanding and demonstration of values. Full staff survey in Nov 2024 will help track changes over the years.	People and Organisational Development	Aug 2024 June 2024 Ongoing Jan 2025		
April-June 2025 update The training courses outlined in the previous update (EDI, Values, Core Code of Ethics) continue to be delivered and are receiving positive feedback from attendees.								

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Following the successful pilot of the leading through colours course some minor amendments have been made to the content and this will be now rolled out to supervisory managers over the next 3 years.

Leadership behaviours have been fully embedded into recent appointment processes for Area Manager, Group Manager and Station Manager roles.

3		“The service should assure itself that middle managers demonstrate service values through their behaviour.”	Staff will consistently know about or understand the service’s ground rules and leadership message, which incorporate the Core Code of Ethics	Carry out a cultural survey to help assess what the issues. Develop a Cultural Action Plan which will include actions to reinforce the Core Code of Ethics, and our expectations surrounding leadership, values and behaviour. Use survey tools including pulse surveys to gauge understanding and demonstration of values. Full staff survey in Nov 2024 will help track changes over the years. Explore provision of cultural leadership programme for middle managers.	People and Organisational Development	Aug 2024 June 2024 Ongoing Jan 2025 Aug 2024		

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The updated 360 Appraisal application has been procured and will be rolled out in Quarter 2.

The training outlined in the Cultural Action Plan continues to be delivered and will be throughout the three-year life of the plan.

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Leadership behaviours have been fully embedded into recent appointment processes for middle and senior manager at AM, GM and SM level.

The Service is introducing new arrangements for Station Managers to conduct station surgeries where they will be freed up on a weekly basis to meet with Firefighters, receive feedback and address work and welfare concerns.

The Service is currently considering the trial of an app that will allow station staff to raise concerns and provide feedback to their Station Managers in real time.

Under the Culture Plan Every 3-years those with line management responsibilities will undertake a 0.5-day course provided by Professional Standards covering Difficult Conversations, Absence, Capability, Conduct, Grievances, Complaints, Compliments, Whistle Blowing, Mediation and Colours Profile

4	36	“The service should assure itself that it has an effective succession planning mechanism in place for all roles.”	There will be effective succession planning mechanisms for all roles; Grey, Green and Red Book.	Re-educate staff on the succession planning process to embed it. Broader identification of transferrable knowledge and skills. Consider adoption of a Succession Planning platform that looks at skill framework at an organisational level. Integrate Succession Planning into Functional Planning processes. Consider broadening of opportunities for identified skillsets – e.g. as created with G12 Green Book opportunities.	People and Organisational Development	In FDP 24/25 May 2024 Dec 2024 Jan 2025 Dec 2024		

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Succession Planning for 2025 will be completed during July 2025 and the results will be fed into the Workforce plan. As part of this the policy and SI has been revised and updated. Succession plans include further data in relation to skills, qualifications alongside leadership levels, criticality and potential successors.

The workforce plan is linked to organisational plans (CRMP, People Plan, MTFP) and objectives and is aligned to the NFCC six step process for workforce planning.

Scrutiny of workforce planning is undertaken by the People Board and Workforce Planning Group

5	39	“The service should review how effective its policy on bullying, harassment and discrimination is in reducing unacceptable behaviour towards its staff.”	The Service will improve staff’s understanding of bullying, harassment and discrimination issues and be aware of their duty to report any incidents.	Internal audit review of processes. Complete annual review into discipline, grievance, bullying and harassment handling. Implement findings of HMICFRS thematic review into misconduct handling. Cultural survey; Culture action plan; Cultural metrics/dashboard. Consider options for publishing anonymised information for staff re the outcomes of complaints/discipline. Just Culture launch – 2024/25.	People and Organisational Development	July 2024 July 2024 October 2024 Aug 2024; June 2024; July 2024 October 2024 October 2024 Nov 2024		

				Consider providing examples of behaviours we don't expect to see (contraindicators) along side existing leadership behaviours.				
April-June 2025 update The Bullying and Harassment Policy was updated and has been supported by bespoke e-learning that supports the Authority's response to the new preventative duty in relation to sexual harassment in the workplace in line with the 'The Worker Protection (Amendment of Equality Act 2010) Act 2023'. As part of the Authority's internal audit arrangements an external review was completed in 2024 with recommendations made by Internal audit which have been accepted and incorporated into the action created to respond to HMI's recommendations as part of the Misconduct Thematic report. Structural arrangements (including assurance measures) and training are already in place or are being put in place through the Culture Plan to ensure that all staff have the confidence to challenge unacceptable behaviour and can have trust in the systems in place for doing so including: -A stand-alone Professional Standards function is in place supported a dedicated Professional Standards teams and an online case management system. -The Service has put in place an external independent provider (Safecall) as a vehicle for staff to raise concerns anonymously. This has been in place since 2023. -The Service and representative bodies issued a Joint Statement in (Feb 25) encouraging all staff who wish to report concerns anonymously to use Safecall. This initiative has been supported by a poster campaign. -Just Culture arrangements have been put in place to deal with lower-level misconduct. A Service Instruction was published in insert date and training for middle managers has been rolled out in 2025 with training for all staff to be scheduled for 26/27 under the Culture Plan. -An external legal review of policies and procedures relating to conduct, grievance and whistleblowing has been commissioned and will report in Q2. The outcome of the reviews will be made available to all staff. -The Service provided all staff with guidance and information on how to raise a concern, grievance or whistle-blow in Nov 2024. -The Service undertook an internal review of its misconduct process, and this was reported to the People Board in Nov 24.								

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-The Service commissioned an external review of conduct investigations by Safecall which reported in Q2. Recommendations will be adopted in Q3 including the use of external investigators.

-A KC has been appointed to periodically review the outcomes of gross misconduct hearings. Recommendations will be adopted throughout the life of the Culture Plan.

-The Service will publish an annual report commencing 2Q/3Q of 2025 detailing the outcome of grievance and discipline cases over the previous 5-years (subject to confidentiality considerations). The report will include an assessment of any disproportionality against protected characteristics under the Equality Act. The report will detail trends and learning outcomes to reduce the risk of potential future misconduct. The report will be shared with the Authority, staff and third parties. The report will also highlight the findings and actions arising out of the independent evaluations of misconduct procedures, disciplinary investigations, the KC review of discipline cases to ensure staff can have confidence in the misconduct process.

Under the Culture Plan training has been put in place to ensure that all staff understand the NFCC Cord Code of Ethics, the Service's Leadership Message and the Service's expectations regarding behaviour including in relation to bullying and harassment, and how to challenge poor behaviour. Specific training

Specific training during the life of the Culture Plan includes that will address bullying and harassment includes:

-A 2-day Leading through Colours course for all supervisory managers providing delegates with the skills to hold powerful conversation and identify and challenge behavioural contra-indicators.

-Training for Middle Managers to deliver a shortened workshop version of the 2-day Leading through Colours

-Delivering the workshop version of Delivering Colours to all staff (Leading Yourself).

-Every 3-years those with line management responsibilities will undertake a 0.5-day course provided by Professional Standards covering Difficult Conversations, Absence, Capability, Conduct, Grievances, Complaints, Compliments, Whistle Blowing, Mediation and Colours Profile.

-Every 2-years each employee must undertake annual E Learning covering the Services Conduct, Capability and Absence Management arrangements.

-Code of Ethics training delivered to all employees. (1.5-hrs) during the life of the Culture Plan.

-Values and EDI training delivered to all employees. (3-hrs) during the life of the Culture Plan.

-Allyship and Active Bystander training delivered to all employees (1.5-hrs)

-All managers with responsibility for conducting formal disciplinary investigations and conducting misconduct hearings are trained to ACAS standards with the training refreshed every 2-years.

-Firefighter recruits are provided with an abridged version of the 0.5-day training Professional Standard provide to line managers (see above bullet point).

-The Service will publish an annual report commencing Q2/Q3 of 2025 detailing the outcome of grievance and discipline cases over the previous 5-years including those related to bullying and harassment (subject to confidentiality considerations). The report will include an assessment of any disproportionality against protected characteristics under the Equality Act. The report will detail trends and learning outcomes to reduce the risk of potential future misconduct. The report will be shared with the Authority, staff and third parties. The report will also highlight the findings and actions arising out of the independent evaluations of misconduct procedures, disciplinary investigations, the KC review of discipline cases to ensure staff can have confidence in the misconduct process.

A Corporate Culture Dashboard has been developed in Q1 and will be published in Q2. This will include the monitoring of metrics including cases of bullying and harassment. The Dashboard will be visible to all staff.