

**Service Improvement Plan**

**12 February 2019**

**Version 10**

Peer Review Priority Tracking

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|  | | **Peer Review Action Plan – Priorities to be addressed from November 2018** | | | | | | | | |
|  |  | Responsible Service Area , Service Owner,  Programme, Project? | Action to date | Future Key Actions  Including Target Dates and Milestones | | Source  E.G. Peer Review, SLT, etc | | How have we engaged/communicated with our People? | How have you reality tested this?  (Triangulation) | |
| AP1 | Service priorities - It is vital that SLT provides clarity on the main focus areas.  *Peer Review report extract:*  *These have since been rationalised down to 10 by SLT, although in reality each has a number of sub projects or “priorities within priorities”. Further stripping out of these projects still needs to happen* | Service Area: SLT  Service owner: Matt Furber | Activity has continued in order to refine the priorities. Interdependencies have been identified, as have resource requirements.  This work was presented to the change board on the 21st January 2019 where six enabling activities were identified and agreed. These enabling activities are either part of or support the 10 Service priorities and all are linked to the flow of data within ECFRS. The enablers are;-  OAM/ERB – availability management system  TASK – Competency recording system  4i/IRS – Link between CAD and IRS  Dig Strategy  CRM – Service Info Database  Intranet improvement  Agile project management will also be piloted in order to create the opportunity for tangible products to be delivered earlier than they have previously been utilising a waterfall (Prince2) approach. | * Develop consistent progress report for Service * Ensure suitable governance, reporting and communication plans are in place for each enabler. * Understand and monitor resource requirements for each of the enablers * Assess resource conflicts * Revisit sequencing as part of Phase II of the work * Provide performance updates to to SLT and PFCC * Develop comms strategy * Implement | | Peer Review | | Change Board have been fully engaged in the development of the priorities and supporting enablers.  Various staff members have also assisted with the development work  SLT have been provided with updates  The PFCC has been engaged and a further update will be presented to the Strategic Board 7Mar19 | At the time of writing this update, communication with our wider work force is being planned | |
| AP1 update | |  | | | | | | | | |
| AP2 | Review Operational Training function (develop an approach based on NOG)  *Peer Review report extract:*  *Operational training is an area of the Service that requires some urgent priority action or the Service will be operationally vulnerable and would be open to significant criticism in the event of a safety critical event occurring within the Service.* | Service Area: Operational Training  Service Owner: Colette Black | Operational training priorities agreed (September 2018), several priorities delivered. Early wins:  Risk critical ICV, BA and ERD training up to date,  Accredited to deliver further Skills for Justice awards:  Level 7 (post-grad) qualification in Strategic Incident Command to our portfolio  Level 3 Award In Breathing Apparatus Instruction  Level 3 Award in Road Traffic Collision Instruction  First 12 Firefighter Apprentices have begun training  Enhanced reporting which enables us to identify concerns and to make evidence based decisions (example of our enhanced reporting can be in the room).  Identification of resources needed to meet needs of our employees, £600,000 of reserves to be used to fund 6 FTE in priority areas  Delivery of trauma training to the PHEM D standard, trail blazing 2 day course. 7 courses run to date,  Initial cohort of 12 Watch Managers trained as ‘train the trainers’, more courses booked in. | Recruit 6 additional staff - what outcomes will the staff deliver?  Supervisory Manager Development Evenings – booked in quarterly for 2019.  19 more trauma training courses booked between now and 31st March 2019  Alignment of training approach to NOG (what’s going to happen and by when?) | | Peer Review  HMICFRS Summary report (NOG Page 48) | | Decision recorded via SLT on 19th September 2018 and then Performance and Resources Board on 30th November 2018  Cascaded via Managers Cascade  L&D Monthly reports published in October, November, December 2018 and January 2019, will be ongoing for foreseeable future | Course feedback positive (100% of attendees that responses to evaluation said they were satisfied/v. satisfied – but low completion rate of evaluation) | |
|  | Replace Task Book  *Peer Review report extract: The Electronic Training recording system or Task Book does not provide the assurance and up-to-date information that is required.* | Service Area: Operational Training  Service Owner: Colette Black | Business Requirement document for Competency management system presented to Colette on 5 December 2018. .  Following initial analysis of the TASK data, it has become apparent that there are gaps within both the data, resulting in missing TASK books, and the reports available from TASK. The data is significantly out of date and has become difficult to maintain.  To address these issues, the following activities are planned:  1. Review reporting requirements and develop new reports.  2. Introduce a workflow process to notify the TASK administrators when there are operational staff changes.  3. Rebuild the TASK user tables with current HR data from Civica.  4. Investigate options to provide a 'collective approval' method of task activities for line managers.  Strategic:  Project Identification Document (PID) in development.  Engagement with Civica to review gaps in functionality. Initial findings are that further development work is required by Civica.  Meeting arranged with Purchasing & Supply to plan a PIN for suppliers to then express an interest and arrange for demos.  Engagement with Operational staff to help shape the detailed requirements. | * Tactical activities * Assessment of high level requirements again Civica functionality * Project Identification Document * Supplier demonstrations (dependant on availability and response to PIN) | | Peer Review  Change enabler  HMICFRS Summary report (Data, Pages 20, 32, 33 and 54)  HMICFRS Tranche 1 Summary report (Technology Page 60) | | The requirements were gathered from around 70 people across the operational and control employees including Group managers, Station managers ,Operational training team, Training centre, Watch managers, Crew managers , Whole time FF and On-call FF . All operational staffs were invited to get involved and more than six stations were visited including Chelmsford, Colchester, Southend, Great Baddow, Braintree and Corringham. Workshops and interviews were also held at Kelvedon | w/c 11 February, user requirements being tested out with more users, other Services being visited to view products. | |
|  | Hot Fire Wear Training does not comply with policy  *Peer Review report extract: The frequency of Hot Fire Wear training is not meeting Service policy* | Service Area: Operational Training  Service Owner: Colette Black | L&D had already developed plans to implement more regular live fire sessions and in 2019 commenced delivery of its latest version of its Development and Assessment session. This session will be delivered between January and December 2019 and will allow all BA qualified operational personnel to complete a live fire operational wear, whilst being assessed and developed buy qualified BA Instructors. Any personnel that have not completed this session within this 18 Month period will be removed from operational duties until they have successfully passed this course. It is the intention that this process will now continue so that all personnel will complete live fire training within the 18 month BA qualification period and as part of the Services BA Development and Assessment session process.  On Call –  Course 1 - BA Initial course which comprises 1 day theory, 5 Days cosmetic smoke practical sessions, 4 days live fire training (10 live fire wears) and a final assessment day (cosmetic smoke).  Course 2 – Completion of a 2 day Offensive Positive Pressure Ventilation course. This includes 1 cosmetic smoke wear, 1 live fire window container demonstration and 2 live fire wearing scenarios.  Course 3 – Not being delivered at this time pending decision on the future of BA Guidelines. If required the course will be 3 days in length and delivered in cosmetic smoke.  W/T –  Course 1 – BA Initial course which includes Guideline input and is delivered in cosmetic smoke – 10 days duration  Course 2 – Fire behaviour initial course – 5 days duration and includes 10 live fire wears.  Course 3 - Completion of a 2 day Offensive Positive Pressure Ventilation course. This includes 1 cosmetic smoke wear, 1 live fire window container demonstration and 2 live fire wearing scenarios.  The BA Development and Assessment session policy is up to date and is located on the Intranet and is updated by the BA Training Manager as each process is designed and a new version of the course is developed. The link to this Policy is included below and the recent email notifying Stations of their session dates also include the link to the Policy. Once the link has been clicked please select “BA Development and Assessment Policy 2019”.  http://hr-od/Learning\_and\_Development/Policies\_Guidance\_and\_Forms/ |  | | Peer Review | | The link to our Policy is included below in emails notifying Stations of their session dates also include the link to the Policy. Once the link has been clicked please select “BA Development and Assessment Policy 2019”.  http://hr-od/Learning\_and\_Development/Policies\_Guidance\_and\_Forms/ |  | |
|  | Trauma Training does not comply with policy  *Peer Review report extract: Trauma training does not meeting service policy* | Service Area: Operational Training  Service Owner: Colette Black | Trauma Training offer has been reviewed and has been replaced with a 2 days course that needs the PHEM D standard. Course piloted in November/December (7 run). This will mean that 568 places will have been offered in a 6 month window. We are recommissioning for post June 2019 with a view of offering 500 more places. Acquisition, maintenance and development phases are planning for. Materials have been published on the intranet for use by attendees and their watch managers. http://hr-od/Learning\_and\_Development/Training\_Library/Casualty\_Care/ |  | | Peer Review | |  | Excellent feedback was received and we are now delivering courses continuously until June 2019 | |
|  | e-learning approach for Operational Training  *Peer Review report extract: E-learning packages need to be updated for watch and station use. The Service has recently gone live with the Kent FRS E-learning platform but has so far only used it for General Data Protection Regulation (GDPR) training.* | Service Area: Operational Training  Service Owner: Colette Black | We are advertising for a resource to deliver this. The advert will go live w/c/ 11 February with a view to having the resource in place by 1 April 2019. All materials will be based on NOG guidance. Liaison with NOG team already started. | * Select 5 existing training packages and convert to E-Learning format   • Liaise with NOG team to explore availability of suitable E-Learning material  • Recruit staff member to deliver this work | | Peer Review  HMICFRS Summary report (Data, Pages 20, 32, 33 and 54)  HMICFRS Tranche 1 Summary report (Technology Page 60) | |  |  | |
| AP2 update | |  | | | | | | | | |
| AP3 | Prevention Strategy (including intervention targeting model to our most vulnerable and links back to our Strategic Assessment of Risk)  *Peer Review report extract: The Service’s Prevention function and prevention strategy need to be reviewed*  *Delivery of Prevention feels un-coordinated and not sufficiently well targeted* | Service Area: Prevention  Service Owner: Moira Bruin | Develop Prevention Strategy: This work is being undertaken by the Head of Prevention & Team Leads: The Strategy is aligned to the PFCC’s Fire & Rescue Plan which will inform the overreaching strategy of ECFRS new IRMP alongside the SAOR the most recent draft of the Strategy is available on request from the Head of Prevention. The anticipated date for the completion of the draft will be the 31/01/2019. To provide documents that demonstrate that we have a strategy and plan; The new strategy will insure that the Delivery of Prevention is data and intelligence led and therefore coordinated and targeted all activity will be linked to the Prevention Strategy. Team objectives for 2019-20 will be captured in Business plans linked to the interim strategy.  Align to SAOR and engagement with Charles Thomas linked to strategy and business plan:  Work is ongoing with the lead of risk and business continuity to align prevention activity with the risks captured in the SAOR. Meetings are regularly held to ensure that the risks identified in the SAOR are accounted for in the Prevention Strategy, which are then integrated into the business plan | Draft prevention strategy available  Consultation  Implementation | | Peer Review  HMICFRS Tranche 1 Summary report (Prevention Page 34) | | The Prevention Lead has developed a Comms & Engagement plan link  This has driven a series a meetings with both internal and external stakeholders,  Meetings with GM James Palmer representing AM Combined Communities  Prevention  Team leaders  Engagement workshops  Calendar meetings  Meetings with team leaders  Reports e.g. SLT Paper  Number 19-020 Overview of Proposed Changes to Prevention Delivery | Evaluation strategy  The efficacy of the process  Workshops e.g. Home Safety Workshop 05/02/2019  SLT paper: Proposed Changes to CS Department  Reality check with both internal and external stakeholders  Police  CSP’s LSP’s  Workshops with GM’s 05/02/2019  Directorate Meetings  Op’s Meeting (Part Two) | |
| AP3 update | |  | | | | | | | | |
| AP4 | Electronic Rota Book  *Peer Review report extract: The electronic rota book (ERB) system is not fit for purpose and it is not supporting performance in relation to availability* | Service Area: Response/ICT  HOBs Phase 2  Service Owner: Matt Furber | This is one of the 6 Enabler Projects identified by SLT.  The Project Brief was agreed at Change Board 15th Feb 19 and absorbs the ASW Automation Project together with the planned integration with Remsdaq 4i..  The ERB interface has undergone a complete rewrite following the implementation of the Civica HR & Payroll system. A number of ERB functions have been migrated to Civica.  Interface reliability has significantly increased, update times have dropped from in excess of 30 seconds, to less than 5 seconds.  Whole-Time and Day Crewed teams no longer need to update ERB, as all updates are now within Civica (absences, training, staff movements etc.) – removing double keying.  Gaps in On-Call data (sickness, leave recording etc.) are resolved as Civica captures this information.  The SMS (texting) Module has also been subject to a full rewrite, and the response times have significantly improved, as has reliability. More informative response messages are in place, providing information that is more useful to on-call crews.  The issues that surround the ERB ‘9am-start-of-day’ limitations have been resolved. | Delivery of the Project Identification Document (PID)  Project Design Phase    The following are the anticipated outcomes of the project:  • Introduction of a system to manage availability across all duty types  • Integration with Civica HR & Payroll  • Integration with the Electronic Tally Board, Global Availability Board and SMS Module  • Introduction of a process to automate the resource selection process for ASWs  • Integration with the Control mobilising system, Remsdaq 4i, to manage appliance availability and crewing information  • Development of an electronic riders board to capture accurate crewing information  • Migrate appropriate data from the existing Clicksoftware ERB solution  • Ensure compliance with the Working Time Directive (WTD)  • Ensure compliance with the Dispute Resolution requirements  • Ensure compliance with the Operational Grey Book requirements  • Appropriate reporting, available to all levels  • The development of the appropriate processes to support any new ways of working  • The provision of all necessary training and support materials as required  • The ERB application, associated support, ICT infrastructure and licensing is removed and the platform decommissioned | | Peer Review  Change enabler  HMICFRS Summary report (Data, Pages 20, 32, 33 and 54)  HMICFRS Tranche 1 Summary report (Technology Page 60) | | The Project Brief was provided to stakeholders for review prior to formal submission to the Change Board for approval.  There has been ongoing engagement with the workforce, particularly On Call, during the life of the product.  ERB is and has been a key topic at a high percentage of managerial visits to on-call station | Triangulation activity will occur as improvements are introduced to the system as the team will seek user feedback. | |
| AP4 update | |  | | | | | | | | |
| AP5 | Leave Policy  *Peer Review report extract: The outstanding negotiation over the annual leave policy is also hindering availability. Implementation of the leave policy will assist crewing by supporting minimum crewing levels.* | Service Area: HR  Service Owner: Colette Black | The Leave Policy remains on our consultation agenda. The Peer Review recommendation is a helpful prompt for us to reconsider alternative ways to progress this. We will do so via the March JNCCs. | * Review/update Leave Policy if necessary * Consult on draft policy * Review responses to consultation * Submit Policy for approval | | Peer Review | | Consultation with rep bodies |  | |
| AP5 update | |  | | | | | | | | |
| AP6 | Increased recognition for On Call staff  *Peer Review report extract: On-call staff generally feel undervalued by the Service and want greater recognition for what they do and more flexibility* | On-Call Development Programme  Programme Manager – Lisa Hart | • On-call Development Programme initiated to deliver the changes needed to improve OC.  • First-level engagement via 'CFO/CFO Blog' / eBrief.  • First round of On-Call Steering Group meetings scheduled for w/c 25/2/19 (OC specific) | * Develop/Offer Flexible Contracts * Develop Availability management system that works for On-call * Develop/Increase On-Call staff recognition * Develop Targeted training for On-call staff (weekends/evenings) * Develop On-call staff group appraisals (individual appraisals on request) | | Peer Review | | • Via CFO/CEO Blog (all staff),  • On-Call steering group (OC specific)  • 60-Second Briefing (OC Specific)  • Weekly eBrief (all staff)  • Prevent Protect Response Directorate meeting (AMs, GMs, Dept Heads). | First 'Reality  testing' will take place after the OC steering group meetings at the end of February and will be assessed by responses and level of involvement / engagement in programme and projects and participation at steering groups. | |
|  | On Call contracts  *Peer Review report extract: On-call contracts should be reviewed to offer more flexibility beyond the 90 or 120 hour contracts* | On-Call Development Programme  Programme Manager – Lisa Hart | • On-Call Contracts and Availability Model Projects formally initiated  • Project scoping / stakeholder engagement meeting took place 4/3/19.  • Project planning in progress | * Develop/Offer Flexible Contracts beyond the 90 or 120 hour contracts | | Peer Review | | • On-Call steering group (OC specific)  • 60-Second Briefing (OC Specific)  • Weekly eBrief (all staff)  • Prevent Protect Response Directorate meeting (AMs, GMs, Dept Heads). | Projects at  'initiation' stage. Too early to determine effectiveness/success. Initial engagement may be measured after the OC steering group meetings at the end of February, by level of involvement / participation in project and OC steering group. | |
| AP6 update | |  | | | | | | | | |
| AP7 | Staff engagement in change  *Peer Review report extract: Greater consideration of the implementation of change including resource requirements and end user engagement* | Service Area: Service Improvement  Service Owners: Ben Pilkington and Matt Furber | Consideration of stakeholder engagement is part of Service Programme and Project Governance.  A stakeholder matrix is part of ECFRS project documentation.  Evidence from recent projects suggests that stakeholders have been engaged, however, further work will be planned to assess the quality of the engagement and to seek suggestions on how this could be improved | Introduction of a standard progress reporting template for all change activity within the Service.  Review of the Service Intranet (one of the 6 Enablers) see AP 11 | | Peer Review | | • Via CFO/CEO Blog (all staff),  • 60-Second Briefing (OC Specific)  • Weekly eBrief (all staff)  • Prevent Protect Response Directorate meeting (AMs, GMs, Dept Heads  • Managers Cascade (update following SLT)  • Managers Awareness Days  • Consultation with Rep Bodies as appropriate | No triangulation has been undertaken to date. | |
| AP7 update | |  | | | | | | | | |
| AP8 | OSO/Monitoring Policy  *Peer Review report extract: It was always intended that operational staff should be responsible for operational assurance and assessment. The Service wants to return assessment to the fire ground and peers. This policy needs to be signed off*  *quickly, and has support from the representative bodies, as the implementation of it would provide the Service with the necessary assurance* | Service Area:  Operational Assurance  Service Owner:  Danny Bruin | The OSO/Monitoring Policy has been reviewed and updated by AM Danny Bruin.  Following consultation, the policy has been sent back to all representative bodies as a final draft for formal approval at HSWSG on 13th February 2019. | * Review/update OSO/Monitoring Policy if necessary * Consult on draft policy * Review responses to consultation * Submit Policy for approval | | Peer Review | |  |  | |
| AP8 update | |  | | | | | | | | |
| AP9 | 4i/IRS | Service Area:  Service Owner: Matt Furber | Remsdaq have now completed the build and data migration for the new Resque 4i Development environment. ECFRS have commenced initial data and system verification testing, but have identified a few issues that have been referred back to Remsdaq.  Currently reviewing previous documentation and plan for IRS upgrade, in order to establish what is required to complete testing and transition in parallel with the Resque 4i upgrade.  The OPFCC has approved the 3020 ICCS upgrade to version 2.9 with a hardware refresh, in order to provide ECFRS and BFRS with a supportable ICCS until 2022 (if required). Frequentis have been informed of the Service decision and will provide a formal Offer by the end of February. | * Delivery of new Resque 4i Development environment * Delivery of new IRS Development environment * Formal Offer from Frequentis * Updated PFCC Decision Sheet for 3020 ICCS Upgrade and Support & Maintenance | | Change enabler  HMICFRS Summary report (Data, Pages 20, 32, 33 and 54)  HMICFRS Tranche 1 Summary report (Technology Page 60) | | This project has been added to the remit of the COSMOS programme. Therefore discussion across a number of work areas has been enabled. The project manager also engages directly with managers in key areas such as Service Control and Performance and Data team | This work is at an initiation stage. It is too early to determine effectiveness/success. Initial engagement may be measured after the OC steering group meetings at the end of February, by level of involvement / participation in project and OC steering group. | |
| AP9 Update | |  | | | | | | | | |
| AP10 | Digital Strategy | Service Area:  Service Owner: Matt Furber | Primarily a research and engagement phase at present.  Considering what is possible with internal stakeholders and external best practice and examples.  The Service has identified the need to move forward with Service infrastructure and particularly the desktop computing provision.  This need has been high-lighted in a number of areas (intranet, CRM, business intelligence). | • Digital Strategy update paper to SLT 26Feb19  • Assessment of current ICT infrastructure  • Engagement with wider workforce regarding proposals  • Draft Digital Strategy to SLT  • Draft Delivery Plan to ensure that development progresses in a coordinated manner. | | Change enabler | | The work stream lead has engaged with the ICT Team and other project and programme owners. This engagement will continue during the development of the document. | This has not been reality tested with the wider workforce at present. | |
| AP10 Update | |  | | | | | | | | |
| AP11 | Intranet Development | Service Area:  Service Owner: Emily Cheyne | After meetings with ICT and Ben Pilkington, it has been agreed that currently the only viable option is to use the existing platform (Pingala), but review the content and design. This will be PHASE ONE development.  PHASE TWO (new intranet and platform that will create a enhanced digital experience and two way engagement channel) will form part of the digital strategy. | * Current intranet- audit of content. EC to review to complete * Current inranet - review of editors and content up to date * Terms of reference (Agile) * Stakeholders identified * Redesign of homepage * Engagement and involvement - employees * Site map approved * Intranet build - with pingala * New content * Launch plan - comms and engagement * User training - identified users | | Change enabler  HMICFRS Summary report (Data, Pages 20, 32, 33 and 54)  HMICFRS Tranche 1 Summary report (Technology Page 60) | |  |  | |
| AP11 Update | | | | | | | | | | |
| AP12 | CRM | Service Area:  Service Owner: Moira Bruin | The Service implemented a Microsoft Dynamics CRM (Customer Relations Management) solution to replace the legacy Management Information System, going live in 2016. The CRM is intended to be the primary information system for CFS, TFS and Water section. Despite the implementation and closure of the DELTA programme, issues have been raised in a number of business areas and projects which suggest that further work on the CRM system and/or the use of CRM is required.  Three workshops have been held with a range of users, technical experts and support from Hitachi (the supplier). These have worked through a process to identify, agree and prioritise the issues. Work streams were set up to investigate and, where possible, rectify the highest priority work streams.  It is clear despite significant enthusiasm and effort from work-stream stakeholders, the issues are unlikely to be resolved without additional, specific technical resources. Most important of these is to recruit a suitably experienced system owner who can lead on the rectification of the issues, acting as a central point of contact for users, ICT, Hitachi and other suppliers and a pan-organisational, systems approach (for example looking at the interdependencies and appropriate sequencing of work).  There is little specialist CRM knowledge in the ICT team so in addition to the CRM System Owner it likely that additional technical resources will be required. These additional resources are likely to be required for the next 12-18 months. | Key stakeholders attend series of workshops to identify and prioritise key work-streams and activities on CRM according to organisational risk.  Work stream leads identified and remedial activities identified. Resourcing requirements identified.  Recruit CRM system owner to identify ways to resolve known issues and deliver improvements both in terms of system working (in conjunction with CRM development resource) and ways of working/interactions. This post will also be SPOC with Hitachi  Review of initial business case and design documentation to clarify to what extent the solution fits current needs.  Recruit CRM developer/specialist in conjunction with CRM system owner to undertake technical changes and improvements on an ongoing basis. | |  | |  |  | |
| AP12 Update | |  | | | | | | | | |
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|  | | **Peer Review Actin Plan Part Two – To be progressed in April 2019**  **AP number to be allocated once a live action** | | | | | | | | |
|  | Service Leadership Team confidence | Service Area:  SLT  Service Owner: | The SLT needs to be confident  in its own ability to lead the  organisation | | • Build confidence and resilience amongst the Team  • Ensure SLT demo Service values all of the time  • Ensure the HMICFRs strategic brief is practised, finessed and familiar  • Lencioni’s 5 Dysfunctions Triangle | Peer Review |  | | |  |
|  | Area Plans (Community Action Plans owned by Group Managers incorporating Response, Community Safety and Staff competence) | Service Area:  Prevention, Protection and Response  Service Owner: |  | | • Discuss with Lee Lucas to link implementation of area plans to coincide with the de-centralisation of Safer  Communities activity | Peer Review  HMICFRS Tranche 1 Summary report (Technology Page 60) |  | | |  |
|  | Refresh Appraisal Training | Service Area:  Learning and Development  Service Owner: | Appraisals are available to all staff within ECFRS. In 2018, we recognised that more work needed to be done to ensure all staff participate in appraisals and the appraisal is a meaningful conversation focused of development. As a result of work done in 2018 (e.g. lighter touch paperwork and a greater variety of tools such as ‘motivation at work’ and ‘let’s talk’), appraisal completion rates increased from 41% to 65% and, through our staff survey, staff reported an increased level of satisfaction with their appraisal conversations (from 34% to 43%). Whilst these figures are still low, they are early signs of a positive trajectory. Since completion of the 2018 appraisal cycle, we have undertaken further research (using ‘Your Voice’ and Survey Monkey) to find out what our employees find helpful. As a result of this research we have proposals to further develop our appraisal offering, including training, in 2019. | |  | Peer Review  HMICFRS Tranche 1 Summary report (Appraisal effectiveness Page 69) | Survey Monkey. Your Voice | | |  |
|  | Green/Grey Book | Service Area:  HR  Service Owner: | Clarity around outcomes provided via Managers Briefing and JNCCs. | | • Provide clarity on outcomes  of the green/grey book review  e.g. grey book staff held in green book posts position reviewed when it becomes vacant | Peer Review |  | | |  |
|  | Behaviours are a focus of Talent Pool and Appraisals | Service Area:  Learning and Development  Service Owner: | Talent pool process reviewed in August 2018 and findings presented to SLT. Talent pool working group meeting regularly. Personal, qualities and attributes (all behaviour orientated) are at the heart of this.  Appraisal process reviewed. Review included speaking to staff via Your Voice and Survey Monkey. New appraisal training being planned. | | • Develop further embedding behaviours we want to see in appraisals  • Develop further embedding behaviours we want to see in talent pool processes/assessments  • Develop and deliver refresher appraisal training | Peer Review | Your voice and survey monkey | | |  |
|  | Clarification about numbers of FF on a pump, 4 or 5? | Service Area:  Control  Service Owner: | Should it be 4 or 5 fire fighters  on a pump? | | • Clarify all required crew numbers for appliances and specials  • Review/update if necessary crewing levels stored in 4i for appliances and specials | Peer Review |  | | |  |
|  | Performance Scrutiny Meeting | Service Area:  Performance  Service Owner: | Consider a joint Programme  and Performance Board, this  would allow the team to be  more agile and direct resources  as needed | | • Explore how Performance management is delivered in ECFRS  • Consider specific performance meeting  • Develop Performance Framework  • Develop Evaluation Framework | Peer Review |  | | |  |