# ESSEX POLICE, FIRE AND CRIME COMMISSIONER FIRE & RESCUE AUTHORITY

# **Essex County Fire & Rescue Service**



Meeting	Service Leadership Team		genda no.	5b
	Performance and Resources	s Board		14
Meeting Date	14 December 2021			
	21 December 2021			
Report Authors:	Risk Lead Officer			
Presented By	Rick Hylton			
Subject	Risk Report			
Type of Report:	Information			
Action Point No.	ı	or Publication	on Yes	3

#### **RECOMMENDATIONS**

That the members of the Board note the changes and progress to the Strategic Risk Register (SRR) over the past quarter.

# **EXECUTIVE SUMMARY**

There are 14 risks to report this quarter:

- 3 Red
- 4 Amber
- 7 Yellow

### **BACKGROUND**

Key changes to the SRR in the past quarter have been:

#### SRR150009



There is a risk of Data breach due to failure/lack of Data Protection Act (2018) compliance leading to personal loss, reputational damage or a loss of public confidence and legal action.

The impact has increased from significant to major and the likelihood has increased from possible to likely. This has raised the score to 16 (Red) from 12 (amber).

Due to some short-term staffing challenges, there has been a temporary reduction in the services compliance with meeting statutory requested deadlines, for example, subject access requests, freedom of information requests and Environmental Information requests. In total there have been three requests that have not met the deadline. The mitigating control measure has been that ECFRS has agreed a contract with Information

Governance Services (IGS - trading arm of ECC), which commences on the 1st of December and provides the following services:

- A nominated suitably qualified DPO
- An annual information audit
- Access to Information Governance (IG) advice & guidance
- Access to a data protection training video
- Data Subject Access Request (DSAR) fulfilment
- An annual DPO report on IG compliance to Senior Management following the annual audit
- Act as single point of contact for the regulator (ICO) on Data Protection
- A quarterly newsletter for the IG Team with topical updates and best practice suggestions

ECFRS is also recruiting for a temporary information governance officer (agency) to cover sickness absence. This risk will be reviewed again post initiation of control measures and there is confidence that these will allow ECFRS to reduce the risk once these are in place.

# SRR150008



There is a risk that the Service is unable to effectively mobilise or communicate with our response resources and partner agencies.

This likelihood has been increased from possible to likely raising the over-all risk score from 12 (amber) to 16 (red), due to a recent review with the current supplier regarding the incomplete upgrading of software.

As a result of the incomplete upgrading of software the Service has been placed in the position of having to plan for a three-day outage, this would see the control room having to operate off system placing them into business continuity for the duration of the upgrade.

Further uncertainty exists around how successful any upgrade will be given that the supplier failed to complete the upgrade last year.

Without a successful upgrade we will continue to experience problems with the services gazetteer (address mapping/verification) system not updating as previously planned. (Departmental risk PD0003). ECFRS currently continue to work with this system until migration to the new system takes place (planned for January 2023) when the planned migration takes place their will continue to be substantial uncertainty around this risk.

#### SRR150005



There is a risk that the Service does not develop and manage its people effectively therefore not delivering a range of activities which save lives, prevent harm and protect our communities due to failure to deliver against the Service's People Strategy and have the right people, in the right place, with the right skills, at the right time.

The likelihood has decreased from possible to unlikely and the impact has decreased from significant to minor. This has changed the over-all risk score from 9 (amber) to 4 (Yellow). This brings the current risk score in line with the target.

Our People Strategy is in place, and we have invested in leadership development, operational training and a competence recording system. We are entering the 3rd year of delivery of the People Strategy. By way of governance and assurance, the delivery of our Strategy is overseen by our People Board with regular reporting to the Performance and Resources Board. We remain on track and are delivering against the strategy.

Progress against identified Control Measures:

- Leadership Development ECFRS have invested in leadership
  development. 120 colleagues have accessed our leadership development
  programme in 2021. We have a further 360 places available across the next 3
  years. Coaching continues to be offered to all. Institute of Leadership
  Management courses at levels 3 and 5 continue to be offered. A suite of other
  development opportunities are available.
- Strategic Workforce Plan we continue to utilise our Strategic Workforce Plan and review regularly. The data and recommendations in plan lead us to evidence based decision making about having the right people in the right place at the right time. The recommendations from this plan flow into our Leadership, Resourcing and Succession (LRS) planning pools. We have over 100 colleagues currently working through the LRS who are preparing for potential promotion.
- Managing our people Appraisal completion rates are high as are the number of performance management cases. These are both good indicators of proactive performance management.
- Assurance of competence our new competence recording system, PRD Pro, is in place and has now been used for 7 months. Assurance is provided via training, verification and assessment. Assessment happens through a variety of methods including our Core Skills Assurance Programme which is now in phase 3. Our recent audit of Competency Management offered a substantial level of assurance.

#### **Additional Control Measures**

- Identify Gaps in learning
- Training should be suitable for all learning types.

#### **New Risk**

A new risk has been created to deal with the Weathersfield problem as highlighted in the September Report under SRR150020, the risk score for SRR150020 has been reduced as a result.

#### SRR150032

Due to a lack of carbonaceous (hot) fire training facilities, the Service cannot deliver all its statutory training requirements (as detailed in the Fire and Rescue Services Act 2004 and associated guidance)

The venue is leased from the Ministry of Defence (MOD) and carries with it a 6 month's anytime notice. The venue is expected to be sold in 2025. In the meantime, we can be given 3 months' notice to leave the site at any time.

A potential build will take 3 years. A feasibility, identification of capital, procurement and planning process ahead of that could reasonably take 2 years.

The remaining estate will not meet the requirements of the training department and allow the delivery of the Service catalogue.

#### **Risk Treatment Plan**

Control Measure	Control Measure	Assigned To	Target Date
SRR150032/001	Ongoing conversation with the Defence Infrastructure Organisation (DIO) to ensure awareness of potential site closure	Karl Edwards	31/12/2021
SRR150032/002	Planning for the potential site closure progresses and includes a feasibility study	Karl Edwards	31/12/2021
SRR150032/003	Appropriate project resources are allocated to the training facilities project to ensure capacity for delivery	Karl Edwards	31/12/2021
SRR150032/004	A business continuity plan which enables the temporary delivery of hot fire training for those who are highest priority	Colette Black	31/12/2021

#### **OPTIONS AND ANALYSIS**

The table below shows a summary of the current risk rating.

Almost Certain	0	0	0	1	0
Likely	0	0	0	2	0
Possible	0	0	3	0	0
Unlikely	0	4	3	1	0
Rare	0	0	0	0	0
Unassigned 0	Risk - Insignificant	Risk - Minor	Risk - Significant	Risk - Major	Risk - Critical

#### **RISKS AND MITIGATIONS**

Failure to identify risks and put in place appropriate control measures to mitigate, could lead to the Service not being able to fulfil its statutory duties. Effective identification of risk and management of mitigations is a core role of Heads of Department with appropriate escalation to Strategic level of which is the responsibility of the Service Leadership Team.

Mitigation and controls are monitored and managed by the risk owners, control owners and supported by the Risk Lead Officer.

#### LINKS TO FIRE AND RESCUE PLAN

All risks are linked to the priorities contained within the fire and rescue plan.

#### FINANCIAL IMPLICATIONS

None directly with this report, although to effectively reduce risk 150032 it is anticipated that financial resources will be required. This will be detailed to the Authority through appropriate business cases in due course.

#### **LEGAL IMPLICATIONS**

Failure to identify and mitigate the risks outlined in this report, has the potential to impact on the Authority ability to deliver statutory functions and hence increase risk of legal challenge.

#### STAFFING IMPLICATIONS

None directly with this report

# **EQUALITY AND DIVERSITY IMPLICATIONS**

There is no anticipated impact on any of the following protected groups as defined within the Equality Act 2010:

Race	NA	Religion or belief	NA
Sex	NA	Gender reassignment	NA
Age	NA	Pregnancy & maternity	NA
Disability	NA	Marriage and Civil Partnership	NA
Sexual orientation	NA		

#### **HEALTH AND SAFETY IMPLICATIONS**

The Management of Health and Safety at Work Regulations 1999 requires employers to assess, record and continually review risks in the workplace.

#### **CONSULTATION AND ENGAGEMENT**

Members of The Service Leadership Team engage with the risk lead officer on a monthly basis.

#### **FUTURE PLANS**

Continued identification and management of strategic risks which may prevent the service delivering against the priorities outlined in the Fire and Rescue Plan.

# LIST OF BACKGROUND PAPERS AND APPENDICES

Appendix A – Summary Report

Appendix B – Audit Report

Appendix C – Risk Register