ESSEX POLICE, FIRE AND CRIME COMMISSIONER FIRE & RESCUE AUTHORITY

Essex County Fire & Rescue Service



Classification	Official – Sensitive, Commercial Sensitive			
Meeting	Strategic Board	Age	nda no.	11
Meeting Date	29 th June 2023	,		1
Report Authors:	Colette Black, Director of People Services			
Presented By	Colette Black, Director of People Services			
Subject	Safer Together – further feedback from review of grievance cases and allegations			
Type of Report:	Information			
Action Point No.		For Publication	Yes	

RECOMMENDATIONS

None, this paper is for information.

EXECUTIVE SUMMARY

As a learning organisation, we review relevant external reports as they arise. Reviews of 'An inspection of vetting, misconduct and misogyny in the Police Service' (HMICFRS – 2 November 2022) and the 'Independent Culture Review of London Fire Brigade' (Nazir Afzal – 28 November 2022) led to the creation of our 'Safer Together' approach.

Delivery of all Safer Together workstreams is on track.

BACKGROUND

On the 23 February 2023, a paper was presented to the Performance and Resources Board which introduced Safer Together. Safer Together consists of 6 workstreams and had been approved by the Service Leadership Team (SLT) on 13 December 2022. On 1 June 2023, a full update on the 6 workstreams of Safer Together was presented to the Board.

This paper is intended to fulfil a commitment made at the Board on 23 February 2023 (recorded as minute 9.4) to provide more detail on the learning and actions from workstreams 5 and 6.

OPTIONS AND ANALYSIS

There are 20 recommendations from workstreams 5 and 6. They will require monitoring to ensure delivery. As agreed, via the Service Leadership Team Strategic Meeting and Strategic Board on 7th and 8th June 2023 respectively, the recommendations from workstreams 5 and 6, are being incorporated into the following governance mechanisms:

- Portfolio Management Board for those identified as significant change,
- People Strategy Board for those that are 'business as usual',
- Continuous Improvement Board for those items already in the annual plan.

By way of assurance a current update is shown below.

	Action	Status
1	To ensure ownership of the case and clarity on roles, all formal employee correspondence should be sent from and signed by the Hearing, Investigating or Line Managers.	Completed
2	The format of note taking should be consistently applied and an agreed approach undertaken by all notetakers.	Completed
3	Terms of Reference forms should be completed for all disciplinary and grievance cases prior to an investigation being undertaken.	Completed
4	Investigations should be undertaken for grievance cases (and not just disciplinary cases) and a report produced using the standard agreed format.	Completed
5	The use of the preliminary fact finding investigations should be agreed throughout the PBP team to ensure everyone has the same interpretation of what format this should take. Ideally this should be an initial conversation by the line manager to ascertain whether a formal investigation should take place.	Completed
6	Disciplinary Decision Forms should be completed on every case to outline the rationale behind the decisions made and to ensure a consistent approach is undertaken.	Completed
7	Managers and HR should proactively agree to reduce the time frames in resolving cases, specifically in relation to investigations. A best practice approach would be to aim for completion of an Investigation within 4 weeks. There should be a full commitment from the Service to allow those undertaking investigations, time out of their usual day job to complete these efficiently.	Ongoing
8	Clarity on how to effectively manage inappropriate behaviours (conduct vs capability) should be agreed so that the correct procedure is utilised, and misconduct is not addressed using the Performance Management procedure instead of Disciplinary.	Ongoing
9	Improve people management training for managers, particularly at the supervisory levels, to ensure they have the skills and	Ongoing

	confidence to manage cases informally and they are less likely to be pushed up to senior management for resolution.	
10	Develop checklists and flowcharts for disciplinary and grievance cases to ensure key considerations at each stage are not missed and managers have the correct tools to support them in managing these cases.	Completed
11	A review of guidance relating to employees involved in safeguarding allegations may be beneficial as this is not currently detailed within the Disciplinary Policy. This guidance should cross reference to the Service's wider safeguarding policies e.g. Domestic abuse and may include conducting regular risk assessments to inform decisions on progression of the case.	Ongoing
12	Continue to review the transfer request forms from Stations and leavers questionnaires to identify any patterns or trends which may indicate concerns at a particular Station, Watch or team.	In place
13	Ensure the cultural investigations within Stations are fully monitored, actioned and followed up on a regular basis.	In place
14	Encourage the PBP team to share learning and case reviews between them to ensure consistency in approach and opportunities for development.	In place
15	Ensure Mental Health training is relaunched and uptake on courses is increased particularly for line managers. Consider developing and promoting a wider mental health provision than just the counselling service.	Training identified
16	Ensure SAFER Recruitment training is relaunched and backdated to ensure hiring managers have undergone thorough training in this area.	Training identified
17	Consider undertaking a deeper review of all Strategy, Policy and Procedures to ensure the Service Values run as a golden thread throughout.	Ongoing
18	Continue to develop the use of the Power Bi dashboards to enable better trend analysis allowing informed decision making and influencing strategy specifically in relation to leavers information.	Completed
19	Update the Whistleblowing Policy	Scheduled
20	Consider spot checking or internal auditing the LRS and TAP Boards to ensure that decision making is consistent and long term temporary promotions are permanently filled fairly and following the correct procedures.	System in place

RISKS AND MITIGATIONS

These actions are potentially control measures for our people related risks, particularly:

- SRR150005 Due to a lack of investment and planning there is a risk that the Service does not develop and manage its people effectively resulting in a failure to deliver against the Service's People Strategy. (Having the right people, in the right place, with the right skills, at the right time.)
- SRR150019 There is a risk that the Service fails to provide a safe and inclusive culture which ensures the well-being of staff and contributes to attracting a diverse workforce

LINKS TO FIRE AND RESCUE PLAN

This report and recommendations contribute to the Fire and Rescue Plan objective of promoting a positive culture in the workplace and having a 'safe and diverse workforce who we enable to perform well in a supportive culture underpinned by excellent training'.

FINANCIAL IMPLICATIONS

None directly associated with workstreams 5 and 6.

LEGAL IMPLICATIONS

None directly.

STAFFING IMPLICATIONS

None directly.

EQUALITY AND DIVERSITY IMPLICATIONS

The actions being taken will not have a disproportionate impact on individuals with protected characteristics (as defined within the Equality Act 2010), when compared to all other individuals and will not disadvantage people with protected characteristics.

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Race	no	Religion or belief	no
Sex	no	Gender reassignment	no
Age	no	Pregnancy & maternity	no
Disability	no	Marriage and Civil Partnership	no
Sexual orientation	no		

HEALTH AND SAFETY IMPLICATIONS

None directly.

CONSULTATION AND ENGAGEMENT

A variety of stakeholders were included in the review. The report will be shared with these and with representative bodies as appropriate.

FUTURE PLANS

Further internal monitoring of Safer Together actions will be via:

- Portfolio Management Board for those identified as significant change,
- People Strategy Board for those that are 'business as usual',
- Continuous Improvement Board for those items already in the annual plan. .

LIST OF BACKGROUND PAPERS AND APPENDICES

None.