



Classification	Official		
Meeting	Performance and Resource Board	Agenda no.	9
Meeting Date	August 2023		
Report Authors	Helen O’Sullivan, Risk Lead		
Presented By	Moira Bruin, Deputy Chief Fire Officer		
Subject	Risk Report		
Type of Report	Information		
PFCC Action Point No.	NA	For Publication	Yes

RECOMMENDATION(S)

None. This report is for information and provides an update on the changes made and progress with the Strategic Risk Register (SRR) over the quarter.

EXECUTIVE SUMMARY

There are 14 risks on the Strategic Risk Register.

Red 1
Amber 9
Yellow 4
Green 0


9 risks are above the stated Risk Appetite Level, 1 have exceeded the Tolerance Level.

BACKGROUND

Red Risks

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.

Level of Risk 20 (Red)  +8

The likelihood of this risk occurring has moved from ‘likely’ to ‘almost certain’ increasing the over-all risk level from 12 (Amber) to 20 (Red)

This is due to ongoing issues around the management of SharePoint sites and the lack of confidence staff have in using SharePoint in line with data protection principles.

In the last four months, the Service has registered five data breaches involving SharePoint and staff being able to access personal information in sites they shouldn't be able to access. The Information Commissioners Officer (ICO) was notified of one of the breaches, more breaches will almost certainly occur unless additional security measures and guidance are implemented.

For the likelihood to be reduced employees need to understand

- Where and how to store data, including how to determine its sensitivity
 - How to set up appropriate and secure team areas, and manage membership of these.
 - What data should be saved to OneDrive rather than SharePoint to restrict access.
 - Which business data should be saved into open or secure departmental storage areas to enable wider access.
 - The easiest way to access stored data in our SharePoint sites/Teams
 - Information Asset Owners must understand which repositories/network areas hold the data they are responsible for.
 - That they must have controls in place in for retention and deletion of SharePoint data
- How to manage membership of data repositories in SharePoint/Teams

To address this, staff will be provided with guidelines, which include clear policies, that explain the responsibilities associated with using SharePoint and Teams, the importance of storing documents in secure folders, and how to manage access permissions for sites and documents containing personal information or sensitive business data.

There is also a need to manage the number of SharePoint sites across the Service, with guidance needed over who can set up a SharePoint site.

Analysis of SharePoint sites has identified more than 1000 SharePoint sites, a number of which are inactive. The Deputy Data Protection Officer (DDPO) and ICT Security Manger have met to discuss ways to manage inactive sites, a resource will be required to review each site and determine the data sensitivity level.

Control Measure update

Significant progress has however been made against the ICO recommendations as outlined in the control updates below,

002 Transparency and Accountability:

Information Asset Owners (IAOs) have been provided with a detailed description of their roles and responsibilities, allowing them to perform their duties effectively and enable the SIRO to effectively manage the risks associated with its information assets. The Privacy Notices on our website have been updated and the Information Governance Team members are currently working with the Information Asset Owners (IAOs) on updating the Information Asset Register, Retention Schedule and RoPA (Record of an organisation's processing activities) involving personal data. Pursuant to Art. 30 (3) GDPR).

013 Record Management:

The surveillance policy and data protection policy have been approved by both the IGB (Information Governance Board) and the SLT (Service Leadership Team). Representative bodies and TUs (Trade Unions) are currently consulting on the policies. Some clarifications have been requested by the TUs.

IGB has approved the Records Management Policy and Fob Policy, but SLT and TUs still need to be consulted on them.

A booklet based on the IG framework has been prepared by the IG team for staff to use as guidance and to inform them of the policies and procedures and is designed address lack of understanding of the concept of personal and sensitive data this will be published on the Intranet once approved by the SIRO.

A draft 'SharePoint and teams user guide', has been approved by the IGB, subject to the review of the acceptable use policy this will be published.

In April the retention schedule was approved by SLT and is being consulted on with Representative Bodies.

SLT has reviewed the use of CCTV cameras in various buildings as well as surveillance procedures. It was decided that only three sites would maintain CCTV cameras.

During the IGB meeting, it was agreed that Property Services would be the IAO for CCTV cameras and fobs. The Surveillance Register will document the locations of each camera, as well as the use of the fob and owners. This approach should be coordinated between the Property Services and the IG Team.

014 Risk and Assurance: As a result of the major data breach, it was highlighted how significant it was to implement a Project Management process, this is to ensure that the project closure processes include the reviewing all project documentation and data to securely delete any information that is no longer necessary. The Head of Portfolio Governance and Assurance and the DDPO have discussed, and following a meeting with the Change team it has been agreed that a review of data at the end of a project is to be added as an item to checklist for programmes and projects.


004 Training and awareness:

Since the Data Protection module was added to the learning platform (LearnPro) last year as a mandatory requirement, 1291 people have completed the module, representing 88.1% of employees. Learning and Development report that, around 50 people are currently unable to complete the module due to long-term illness, maternity leave, or having recently joined the Service/at STC. This is approximately 3% of the workforce. A communication plan is being developed between IG team and DDPO to raise data protection awareness.

Changing Risks

SRR150014

There is a risk that through action or non-actions by the Service, there is a fatality (or serious injury to) a member staff or the public.

Level of Risk: 9 (Amber)  + 3

The likelihood of this risk occurring has increased from 'unlikely' to 'possible' raising the Level of Risk from 6 (Yellow) to 9 (Amber), this is due to the discovery that no IOSH training has taken place since 2020 (1 IOSH in 2019, average of 10 in previous years, although actions are taking place to close the training backlog (as outlined in control 002), until all Crew Managers have completed their IOSH training there is an increased likelihood of a harm occurring through lack of training.

In addition to the lack of IOSH training there is increased uncertainty around the ongoing risk of exposure to contaminants and how the Service can move forward in ensuring the risk from contaminants is as low as reasonably possible, this will be picked up by the project 'Protecting our People'.

Control Measure Update

002 Health and Safety Training and Competence as outlined in HSE65

IOSH

An eLearning module is in development for Managing Safely to ensure as many of the relevant personnel have this training, as soon as possible, the proposed go live date is 11th September 2023 for the first two modules.

A priority list has been compiled for face-to-face IOSH training (accredited), this has been arranged into four cohorts for delivery which will take place between October 2023 and February 2024.

Additional budget will be required for 23/24 and beyond, once the backlog has been completed, proposed budget adjustments are to be outlined in the development plan.

NEBOSH

The risk of not having IOSH training is compounded by the number of Grey Book employees that do not have NEBOSH qualifications, this was raised through the Health and Safety Welfare and Strategy Group

Discussions are planned between Learning and Development (L&D) and Health and Safety to consider how best we can support employees in sitting and passing the NEBOSH qualification, this includes looking at the development process and role maps.

eLearning

Mandatory health and safety training for all employees is conducted via two Learnpro modules, the below figures don't consider those on long term sick or on maternity – L&D are working with the Data and Performance team to resolve this.

- Manual Handling – 89.7%
- Working Safely – 89.3%

Both modules are to be completed every 2 years, they will come round for expiry starting December 2023.

Further considerations to be considered under this control are:

- On-Call training: what is required, additional costs and time needed to complete
- How to manage non-attendance
- A mechanism is to be put in place to ensure all new Crew Managers are assigned a Managing safely course.
- Reporting required to ensure all stakeholders are aware of H&S training activity and the status of each learner (i.e new to post/ potential/active/passed etc.)
Currently Civica only records when someone has been booked on a course and when it is complete.

025 Protecting our People Project

New control measure to replace **023** Minimise contamination of fire-fighting PPE and **024** removal of the BA sets from cabs in all new appliances as the project 'Protecting our People' will pick up delivery of recommendations connected to No Time to Lose.

- The project team arranged a meeting with Professor Anna Stec and worked through reports on the subject.
- Bi-monthly meetings of the Protecting our People (POP) Group are established.
- Work ongoing with departments to find solutions.
- Attended national conference on PPE.
- Engaging with Representative Bodies.

SRR150008

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

Level of Risk 9 (Amber)  - 3

The likelihood of this risk occurring has reduced from possible to unlikely reducing the over-all risk level from 12 (Amber) to 9 (Amber).

This is due to the successful implementation and testing of the new control system which replaces the Frequentis ICCS and Remsdaq CAD systems with a Motorola control system, thus ensuring that the Control Room have operational communication, dispatch, incident, and resource management capabilities which meet our needs as a Service. The Motorola Control System aligns with the national Airwave Upgrade Programme and is compliant with the Emergency Services Network (ESN).

Control Measure Update

006 Upgrade of 4i & creation of the ICT infrastructure to allow updates.

Moved to Effective due to the successful implementation testing of the new Control System. Control to be withdrawn and replaced with a relevant control measure against the new Control System at the next scheduled review.

008: Monitor and Correct where possible addressing data

Withdrawn on the 27th of June 2023 due to the new Control System removing 4i and therefore any addressing issues related to this.

Other Risk Updates

SRR150033

There is a risk that we do not have the correct resources and systems in place to cope with the demands of increasingly hot and dry summers as a result of climate change inaction.

This includes, wildfires, flash flooding and drought conditions.

Risk Score 9 (Amber)

In consultation with the Emergency Planning Team this risk has been assessed as having a likelihood of possible and consequences as significant. This is because whilst work is progressing to prepare us for heatwaves there are still some measures to put in place, we have yet to test the new measures in real time to measure effectiveness in response and the changing climate and resulting heatwaves are evolving situations giving rise to some uncertainty.

Control Measure Update

001 Heatwave Assurance Group

002 Heatwave Plan, plan produced and test via a tabletop exercise on 23rd June with report due on 3rd July.

004 Equipment and Assets

- Moved servicing of specialised vehicles outside of the summer period, June 1st-15th September.
- Extra equipment- personal water bottles, additional sweepers (2 per appliance), additional radios, ice machines at Stations, water storage for appliances.
- Drones purchased and training pilots for these has started.

005 Policies and Procedures

- New availability surge plan - within plan - and actions in response to predicted weather patterns and levels of appliance availability.
- Open debrief system to utilise during the summer period and react dynamically to possible suggestions or issues. A full debrief will take place in Sep/Oct.

006 Training

- LearnPro – Wildfire training for all personnel is in place, currently with high completion rates.
- Wildfire Tac-ad courses - 2 at present, with one more when course places are available.
- Training schedule planned to limit disruption during the summer period.

007 Stakeholder Engagement

Liaison with farmers and landowners' owners and their contact details contained within plans.

Actions to be completed

- Additional signage for the roof of all appliances – to identify vehicles when using helicopters and drones.
- Further resilience of CIT by involving additional green/grey book employees.
- Additional processes for using imagery from drones/helicopter in the Control room and incident ground.
- Develop in conjunction with finance a system to record financial implications of heatwaves over the summer period.
- A CIT Power App to simplify the current recording process.

SRR150020

Due to a lack of operational training, there is a risk that colleagues do not have the appropriate skills to fulfil their role (in line with the Health and Safety at Work Act) resulting in serious injury or loss of life.

Level of Risk: 4 (Yellow) under review

This risk is currently undergoing a deep dive review with The Director for People Services the GM of Operational Training and Risk Lead.

The Risk Description, Causes and Consequences have been reviewed and some changes made to be more reflective of the current risk environment. Existing controls are currently being aligned to identified causes and consequences ahead of a re-assessment of the risk levels.

We currently have circa 150 On-Call fire-fighters in Phase one, leading to more BA Deficient Crews, concerns regarding crews being BA deficiency are heard and recognised. As a result of this an additional 30% capacity has been planned for and is available through training. A full paper and proposal about how we can most efficiently utilise this went to SLT July 2023.

Progress to be tracked through the additional control measure **016** Increased Capacity for BA Training including a review of monthly utilisation of all training courses. Specific to this control measure, a review of BA utilisation.

SRR150032

There is a risk that, 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).

Risk Level: 12 (Amber)

15 Site Surveys have been Completed and approval given that there are no issues that might prevent us moving ahead.

RIBA stage 3 application for planning permission is underway and OBC due to be presented to Commissioner Dec 2023.

Government change of use for Wethersfield may provide an extension to the original date of 2025 to vacant site.

SRR150034

There is a risk that the Service does not implement with required timescales and sustain recommendations from external inquiries into similar organisations resulting in a failure to prevent a repeat of the mistakes highlighted and to restore public confidence.

Risk Level: 9 (Amber)

In consultation with the relevant leads this risk has been assessed as having a ‘possible’ likelihood of occurring and ‘significant’ consequences. This is because although the projects are nearing completion there is a need to sustain this into business-as-usual operations and ensure that learning from inquiries and reports into this and other similar organisations can be identified and implemented in an effective manner.

Control Measures for development are:

001 Grenfell inquiry phase 1.

002 Manchester Arena inquiry vol 2.

003 HMICFRS Spotlight report – Culture and Values.

As part of the Grenfell transition to Business as Usual (Control 002), each action is required to have BAU plan, the owners of each BAU action are required to submit their plans at the next Prevention, Protection and Response Board in September 2023.

It has been agreed between the Project Team and Risk Lead that these BAU action plans will become control measures under SRR150034 following the board meeting to allow the Service to track and maintain the transition into BAU once the project has closed and moved onto the next phase.

OPTIONS AND ANALYSIS

Risk Map showing the distribution of strategic risk based on the combined risk score.

Almost Certain	0	0	0	1	0
Likely	0	0	2	0	0
Possible	0	1	5	1	0
Unlikely	0	2	2	1	0
Rare	0	0	0	0	0
Unassigned 0	Risk - Insignificant	Risk - Minor	Risk - Significant	Risk - Major	Risk - Critical

Risk Score = Likelihood X Consequences

LINKS TO FIRE AND RESCUE PLAN

All risks are linked to the priorities contained within the Fire and Rescue Plan.

FINANCIAL IMPLICATIONS

Three risks highlighted in this report are compliance based, SRR15009, SRR150014 and SRR150034, non-compliance with the related regulation can result in additional costs to the service through unplanned mitigations, fines and possible liability claims from individuals.

LEGAL IMPLICATIONS

As above non-compliance with SRR15009, SRR150014 and SRR150034 could bring about additional scrutiny on the Service, regulatory action, and possible liability claims form individuals.

STAFFING IMPLICATIONS

Staff should be aware of their responsibilities to support the Service in meeting its regulatory obligations and supported to do so through regular communication and training.

EQUALITY AND DIVERSITY IMPLICATIONS

We have considered whether individuals with protected characteristics will be disadvantaged as a consequence of the actions being taken. Due regard has also been given to whether there is impact on people who identify as being part of each of the following protected groups as defined within the Equality Act 2010:

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

The Core Code of Ethics Fire Standard has been fully considered and incorporated into the proposals outlined in this paper.

HEALTH AND SAFETY IMPLICATIONS

Delivery of Managing Safely (SRR150014/002) is a regulatory requirement designed to ensure that responsible persons have sufficient knowledge of workplace hazards and are equipped to identify and prevent Health and Safety incidents occurring.

Not ensuring that employees are trained at the appropriate level in managing safely needed to safely carry out their role, could put our people and the public at increased risk of harm.

In the event of a preventable incident occurring the Service could be found to be in breach of its obligations as an employer.

CONSULTATION AND ENGAGEMENT

Internal Consultation with relevant leads and subject matter experts

future plans

Risk Management Handbook to be produced 31st October 2023 to support the Risk Strategy.

LIST OF BACKGROUND PAPERS AND APPENDICES

Appendix A – Full Risk Report

Appendix B- Grenfell BAU plans to be completed