



Meeting	Audit Committee	Agenda Item	10
Meeting Date	September 2023	Report Number	10a
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Presented By	Karl Edwards		
Subject	Risk Report		
Type of Report:	Information - Update		

1. PURPOSE OF REPORT

To provide the Audit Committee with the appropriate assurance that ECFRS is effectively managing the Service's Strategic Risks.

2. SERVICE STRATEGIC RISKS

There are a total of 14 strategic risks reported.

Red 0
Amber 10
Yellow 4
Green 0

Red Risks

There are no red risks to report

3. CHANGES TO THE RISK REGISTER

All strategic risks are part of a continuous review through the Service Leadership Team (SLT) and the designated risk and control measure owners.

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)

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 Control to be withdrawn and replaced with a relevant control measure against the new Control System at the next scheduled review.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Withdrawn on the 27th of June 2023 due to the new Control System removing 4i and therefore any addressing issues related to this.

4. SERVICE STRATEGIC RISK SUMMARY

There are strategic risk scores which remain the same within quarter one, three of which are above the services risk appetite of 8 (Amber).

SRR150001

As a result of ineffective financial and/or resource planning there is a risk that the Service does not deliver its core functions leading to it not providing value for money, not complying with financial Regulations, and/or failure to deliver a balanced budget.

Level of Risk 12 (Amber)

The Service continues working to close the budget gap and the latest financial forecast being Presented at the Strategic Board on 13th September 23 so that we still have a small gap (albeit reduced from June 23).

The Green Book pay award for 2023/24 has not been finalised and could create a further unbudgeted financial pressure.

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 9 (Amber)

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.

The Information Governance Team has put mitigations in place to address the issues raised with Sharepoint as follows:

- Commissioned an external review and audit of all IG practices within ECFRS.
- Commissioned external assistance to undertake a full review of all Sharepoint sites to ensure that we have full site and understanding of the risk.
- Requested that ICT provide a full database of all Sharepoint sites with the associated owner of each site which will assist with the review above.
- Produced a Sharepoint policy and guidance for employees
- As part of the Sharepoint Policy, all new Sharepoint sites will require IG approval to provide assurance of the purpose of the site and that it will not contain any sensitive/personal information that could place the service at risk of a future data breach, and where sensitive data is contained that it has the correct restrictions of access.

Control Measure update

In addition, 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.

SRR150014

There is a risk that through action or non-actions by the Service, there is a fatality of a member of staff or the public.

Level of Risk 9 (Amber)

Following on from the discovery that no IOSH training has taken place since 2020 (1 IOSH in 2019, average of 10 in previous years, work in ongoing 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 the No Time to Lose pledge.

- 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.

SRR150019

There is a risk that due to the absence of a positive and supportive culture the Service fails to provide a safe and inclusive culture which ensures the well-being of staff and contributes to attracting a diverse workforce.

Level of Risk 9 (Amber)

The Service continues to deliver the Fair, Kind and Inclusive workplaces strand of the People Strategy. We are on track to submit an application for silver inclusive employers' recognition in December 2023 and the consultation for the 2024-28 people strategy is due to begin in September 2023.

SRR150031

There is a risk that without effective Cyber Security measures in place, we will be vulnerable to an attack causing harm or loss.

Level of Risk 9 (Amber)

The Service continues to work towards achieving Cyber Essentials as a recognised accreditation. There have been no notable incidents to report, the Cyber Insurance policy is up for renewal on the 30th of September 2023.

019 Secure Website

The status has been moved from In Progress to Implemented, the review of the Application catalogue is required to ensure all sites are included, this is likely to be ongoing.

001 Training

MetaCompliance is now available to Essex County Fire and Rescue Service (ECFRS) as Essex Digital Partnership have included us in their purchase on behalf of Essex Public Sector.

Security is also part of our wider education on the Digital Skills Standard, delivered primarily by the Digital Skills Officer and reinforced by other members of ICT. Workplace and The Shout are used as awareness communications around cyber security.

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).

Level of Risk 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 the Commissioner Dec 2023.

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

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.

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

002 Heatwave Assurance Group, to keep upto date on latest developments and propose actions to build resilience.

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.

SRR150034

There is a risk that the service does not adequately embed the recommendations from independent public enquiries/other public sector body published reports. This may result in a loss of trust, confidence and learning from key lines of enquiry.

Level of Risk: 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 phase 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.

Controlled Risks

These risks are deemed to be low priority and below the Services risk appetite level.

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.)

Level of Risk 4 (Yellow)

This risk continues to be effectively managed and monitored through the People Strategy Board and Portfolio Management Board. Planning is in place for the People Strategy 2024-28

Control Measure Update

001 Staff Engagement

Risk status changed from in 'Progress' to 'Implemented', the One Survey was completed in Q3 of 2022 and action plans have been developed which will run through to the end of March 2024.

The 2023 appraisal cycle has been updated to include questions on welfare, values and behaviour, the appraisal completion rate is currently 86%.

Two JNCC's are regularly scheduled and well attended.

003 Efficient workforce planning & recruitment procedures

Has been moved to from 'in progress' to 'Effective', the SLT and other stakeholders continue to receive workforce plan updates every quarter.

A people dashboard has been developed which includes information on Leadership, Resourcing and Succession (LRS) participation rates to indicate readiness for next role, Transfers and Promotions (TAP) Board meeting frequency has also been updated to enable timely appointments and the recruitment and Transfer policies have been refreshed.

SRR150011

There is a change in local and/or National leadership, priorities or policy that impacts on the Service's change programme effecting delivery of the Fire and Rescue Plan, the Medium-Term Financial Plan and the Integrated Risk Management Plan.

Risk Score 4 (Yellow)

Inflationary and financial pressures are beginning to have an impact on the current programme of change. Government borrowing over the last few years, the world shortage of oil (Ukraine/Russia Crisis), the corresponding inflationary increases and pressures on the financial markets have, in a period of a few months, has created instability. This on top of funding issues are going to challenge how the ECFRS is able to deliver its program of change.

The situation will be monitored, and risk profile increased accordingly.

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.

Risk Score 4 (Yellow)

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.

SRR150026

Failure in the Services Information, Communication and Technology (ICT) Infrastructure, leading to intermittent or loss of service or current ways of working are not fit for purpose.

Level of Risk 6 (Yellow)

No significant updates

SRR150028

There is a risk that the Service fails to deliver its Prevention, Protection and Response activities leading to a loss of trust and confidence by the Essex Communities.

Level of Risk 6 (Yellow)

The risk has now been allocated to Director of PPR as the appropriate risk owner; Area manager of Response and Group Manager for Protection are currently working to identify risks in their areas with the aim of restructuring this risk and its associated control measure to be more specific as to what the risk is.

5. CURRENT RISK STATUS

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

Almost Certain	0	0	0	0	0
Likely	0	0	1	0	0
Possible	0	1	6	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 Consequence

6. NEW STRATEGIC RISKS

No new risks to report this quarter

7. RISK PROCESS AND GOVERNANCE

The full risk register is contained in Appendix A

8. OTHER RISK RELATED UPDATES

The service risk strategy has been formally signed off, accompanying risk guidance is anticipated to be completed in draft by October 2023.

The Insurance renewals are currently being completed ahead of a new protection year starting in October 2023.