

29 MAR 2010

**THE MANAGEMENT OF HEALTH AND SAFETY  
AT GREATER MANCHESTER FIRE AND RESCUE  
SERVICE**

**REPORT OF THE INSPECTION BY  
THE HEALTH AND SAFETY EXECUTIVE**

**17-19 NOVEMBER 2009**

## INTRODUCTION

1. This report presents the findings of an inspection of the management of health and safety at Greater Manchester Fire and Rescue Service (GMFRS) carried out by the Health and Safety Executive in November 2009. The guidance published by the Health and Safety Executive in "Successful Health and Safety Management" (HSG65) was used as the framework for the inspection and provided a recognised benchmark to assess health and safety management systems.
2. The team members were David Shorrocks, John Crookes, Helen Hennessy, Peter Hulme, Judith McNulty-Green and Sarah Wadham.
3. The inspection methodology included the examination of key relevant documents such as policy statements, risk assessments, guidance documents and minutes from health and safety committee meetings. Employees at all levels of the organisation were either formally interviewed or discussions were held with key personnel during station visits where local procedures and activities were sampled.
4. As part of the overall assessment of GMFRS' health and safety risk management systems, the inspection concentrated on the following issues:
  - Training and competency in core fire fighter skills including breathing apparatus (BA) and associated procedures and compartment fire behaviour training (CFBT);
  - Training and competence for incident command;
  - Provision of risk critical information to inform operational decision making.
5. The conclusions and recommendations are made based on the sample of activities inspected and where appropriate should be applied across the full range of GMFRS locations and activities. Recommendations represent the improvements required to enable GMFRS to comply with its duties contained within the Health and Safety at Work etc. Act 1974 and the Management of Health and Safety at Work Regulations 1999.
6. We would like to express our thanks to the management and employees at GMFRS for their cooperation, assistance and openness during the inspection and particular thanks to David Bowler (GMFRS Health and Safety Support Section Manager) for the work prior to the inspection in helping to put together the timetable and supplying documents requested.
7. Copies of this report are being sent to employee representatives.

## Findings

### Health and Safety Policy

*Is there an effective health and safety policy to set a clear direction for the organisation to follow?*

8. There is a comprehensive, overarching Health and Safety Policy and Procedures Manual that contains clearly defined roles and responsibilities for all employees, particularly senior officers and managers.
9. This policy links to other policies, safe operating procedures and guidance. These cover operational areas such as general training policies, BA training policy, incident command policy, manual handling, personal protective equipment and drive to arrive policy.
10. The Brigade Management Team (BMT) agrees and signs off all policies.
11. There was evidence provided during interviews that health and safety policies are embedded into the Service along with safe operating procedures.
12. There is evidence that policies are reviewed as appropriate.

### Organising for Health and Safety

#### Control

*Is there an effective management structure and arrangements in place to deliver the policies?*

13. Operational responsibility for delivering health and safety is embedded within the organisational structure at all levels.
14. BMT takes the lead with the new Chief Fire Officer (CFO) having a clear vision of the how the Service delivers health and safety and how he sees the Service developing in the future.
15. Operational delivery is controlled by the Assistant Chief Fire Officer Operations(ACFO) who has the health and safety reference as part of his role. Other members of the Brigade Management Team have responsibilities appropriate to their roles.
16. Borough, station, watch and crew managers have health and safety management responsibilities at their level of operation.

17. The Health and Safety Support Section provides assistance throughout the structure, oversees the investigation of incidents and accidents, monitors performance, engages with consultative bodies and is represented on BMT through ACFO for Operations to provide information to senior management. The section plays an active role in risk assessment, delivery of health and safety training and equipment assessments.
18. IOSH managing safely and NEBOSH courses have been completed by the majority of senior managers and operational managers respectively.

### **Cooperation**

*Are there adequate and appropriate arrangements to secure the trust, participation and involvement of all employees?*

19. GMFRS has a Joint Health and Safety Committee with overarching objectives to consider strategic issues related to health and safety and to promote cooperation between employer and employees. It also has a remit to instigate, develop and carry out measures to ensure employee health and safety at work. The committee meets quarterly.
20. The committee is chaired by the ACFO for operations and comprises area and group commanders, the health and safety officer, Fire Brigades Union representatives, GMB Union representation and a representative from UNITE. There is scope to co-opt others as appropriate.
21. The GMFRS "Working Together" strategy provides employees at all levels of the structure the opportunity to voice their opinions on the full range of operations within the Service, including matters that affect their safety.
22. "Blueprint for the Future", was a response to opinions expressed during "Working Together" that BMT weren't visible enough. BMT members and senior managers have held events at station level that have involved 85% of GMFRS employees.
23. The results of a recent staff survey show the majority of respondents (in both cases over 70%) consider that people within GMFRS are neither actively listened to nor consulted and involved to resolve issues.

## Communication

*Are there adequate and appropriate arrangements to secure an information flow into, within and from the organisation?*

24. The systems in place for gathering, processing and distributing information through the operational structure are robust.
25. Senior managers visit stations to carry out "shop floor visits", where staff can speak to them directly and raise any concerns they may have. This was particularly the case during the Working Together initiative to rebuild trust within the Service after the most recent dispute. Each senior manager carried out approximately 25 station visits speaking to up to 30 fire fighters, crew and watch managers on each occasion.
26. A staff survey has been carried out which indicates improving confidence levels. 72% of employees responding agreed that communication within their work area is good.
27. A system for communication on H&S issues is in place, comprising:
  - Safety Critical Notices – put into folders on station and read out to staff at change of shift. Crew Managers sign to confirm they have been read to their crews and understood;
  - Ops bulletins which feed into policy documents;
  - Safety Alert quarterly magazine.
28. An example quoted was the follow-up to the recent Bolton incident that resulted in CFOA notice 2009/1033 on risks of overdoor canopies.
29. BMT receive executive briefings on health and safety issues arranged by an external provider. Topics have included corporate manslaughter and stress.
30. Policies are communicated through the management chain and cascaded by Borough Commanders.
31. Fire fighters are able to email the ACFO to ask questions and dispel rumours that may develop within the Service.
32. Operational guidance is provided at 3 levels:
  - Reference Material back on station;
  - Operational handbooks kept on the appliances;
  - Crew manager's flip pad containing concise bullet point lists in a tear off format, specifically designed to make key safety information readily available to incident commanders.
33. Station meetings are held every Monday morning, where H&S issues are discussed alongside other operational issues.

34. There is however a belief amongst fire fighters that BMT will listen to their concerns but ultimately not act upon them, this is further evidenced in the staff survey.

## **Competence**

*Are there systems and arrangements to secure the competence of all staff?*

### **Core Fire Fighter Competencies**

#### **Strengths**

35. There is a rolling operational training programme. Core skills training is regularly repeated throughout this period. The content is dependent on a Training Needs Analysis (TNA) however currently it comprises BA, CFBT, road traffic incidents, water awareness, rope access and risk information.
36. This corporate block of training is developed using annual TNA, discussions with members of the Brigade Management Team, analysis of training audits at station level and "emerging themes". The Integrated Risk Control Group (IRCG) also considers whether any changes are required.
37. Local training is organised using the Electronic Training Records (ETRs) system. The training plan operates on a 7-tour basis, with different themes covered in each block. If someone misses a particular session due to sickness or turning out to an incident, there is sufficient flexibility in the schedule to allow it to be rescheduled later in the block. BA is prioritised during the first tour.
38. A mixture of theory and practical training is provided. This varies from subject to subject. For instance BA training tends to be hands-on whereas training on a subject such as dealing with acetylene would be more likely to involve a lecture or presentation. The balance between practical and theory based training tends to be about 70/30. Crew and watch managers determine the exact balance.
39. Generic risk assessments (GRAs) are incorporated into safe operating procedures and training. GMFRS has taken the GRAs supplied by the Home Office and applied them to the Service to produce a set of local GRAs. These are communicated to all operational staff and have links to them within the ETR system to be included when training is delivered. There is evidence that fire fighters are aware of GRAs. GMFRS Policy and GRAs are intrinsically linked.
40. A health and safety induction is provided to all staff when they join the Service.

41. Time is factored into training plans to cover training requests from individuals and local issues arising from the Integrated Risk Management Plan (IRMP).
42. ETRs enable weaknesses or gaps in an individual's training to be identified. Watch and crew managers have access to ETRs and can check to make sure that they are up-to-date. A "Bring Forward" is built into the system to alert watch managers to residual training needs.
43. Fire fighters are encouraged to self-nominate for training. Self-nomination is actually quite rare as the frequency of the training means that people tend to wait for the next session, however there is evidence that fire fighters do self-nominate for training.
44. The "Red Spot" system is in place to ensure that probationary fire fighters gain competence in BA use before they are allowed to fully participate at incidents. This involves:
  - Not being allowed to ride front line during the first 6 months;
  - Having competence verified by a BA instructor;
  - The station commander reviewing the instructor's report;
  - Them being allowed to ride front line only when core skills are signed off to the required level.
45. Borough trainers attend a Monday morning station meeting every month to deliver training on an issue relating to the tour training theme.
46. The central training schedule is designed to complement and enhance training delivered on station. Where a 7-tour block contains only 3 themes, it is expected that "other training", which includes Service, Borough and Station training events will be delivered. This gives flexibility to train for incidents that may be specific to a particular location. For example, at Moss Side specific training was identified for attending the Manchester Royal Infirmary which has 23 potential radiation sources.
47. A system is in place to ensure that probationers gain competence in core skills after initial training has been completed and they transfer to a station. Each probationer has a workbook covering all the competencies needed to fulfil their role. Each module requires evidence of competence to be submitted which can result from a training event or attendance at an incident. Each module must be written up and submitted to the crew manager who decides whether the evidence is acceptable. If the crew manager is satisfied with the performance the module will be signed off.
48. Crew managers play an active role in ensuring that competence is gained and retained. The system starts informally but will gradually escalate to a formal process if a competence issue is repeated. An example of how this process works was described in relation to ladder use, as follows:

- A mistake is noted in the use of a ladder. This results in the crew manager having an informal talk about what was done wrong;
- If the same mistake is repeated, the crew manager and the individual will have a "semi-formal" chat about the requisite remedial action;
- If the same mistake happens for a third time, a formal process will begin. The individual will be given an action plan clearly stating what is required to attain an acceptable standard and a deadline to complete the required actions agreed;
- If an individual is subject to 3 action plans he/she is referred to the Station Manager and required to attend relevant training at the training centre.

### **Opportunities for Improvement**

49. There is a lack of consistency in training to maintain fire fighter core competencies at local level in terms of delivery, assessment of participants, recording of assessment, monitoring of local training by managers and the recording of these assessments.
50. The training materials necessary for providing local training are available as part of the ETR system and there is evidence that they are used across the Service, however the method of delivery is inconsistent. It is apparent that the balance between classroom based training and practical drill based training varies from borough to borough and station to station. The method by which this training is provided is the decision of the crew or watch manager in charge. The ETRs and training planner will show training having been completed irrespective of whether it has been delivered in the most appropriate manner.
51. The manager in charge of the training also assesses the performance of the participants and will allocate assessment marks on a scale of 1-4. Any fire fighter who does not achieve an assessment score of 3 or 4 requires an improvement plan to bring them up to the required standard. These assessment results are added to the ETRs.
52. There is some suspicion that the ETRs drive the local training rather than them being a vehicle to record what has been achieved. The system is interrogated centrally to ensure that training is being completed however there is no analysis of exactly what has been delivered. There is for example nothing to stop the entire 7-tour local training programme being delivered in the classroom rather than using a balanced mix of classroom and drill ground activity. There is no evidence to suggest that this is the case and it is clear that fire fighters would raise a complaint should it be. In this unlikely scenario the ETRs would simply show that training had taken place and would satisfy the level of scrutiny that is currently applied to this monitoring process.

53. There is a requirement that training is monitored by Station and Borough Commanders during the 7-tour programme. This is recorded on a standard form, an assessment is made of the component parts and graded 1-4. I asked to see a number of these records to assess the quality of the monitoring being undertaken. It was apparent that most records of assessment allocated scores of 4 to all sections. Only one record observed contained scores less than 4 and details of deficiencies with recommendations for improvement. Adequate monitoring should take place to ensure that assessment of the content and delivery of the training is completed to an appropriate level.
54. Incidentally the monitoring record that contained constructive criticisms was completed by a former member of the Performance Review Team (PRT).

### **Recommendations**

55. A qualitative review should be undertaken to assess the effectiveness of local training with a view to addressing the apparent inconsistency of delivery, assessment, recording and monitoring.
56. A review of the competency of managers to assess should also be undertaken.
57. Better use could be made of the PRT to independently assess and audit local training to ensure objectivity and consistency.

### **Breathing Apparatus and Compartment Fire Behaviour Training (BA and CFBT)**

#### **Strengths**

58. A new training programme of BA and CFBT was introduced in April this year that aims to ensure that at the end of the 2 year period all operational fire fighters will have been trained in line with the intentions of FSC 17/70. The programme will involve each fire fighter receiving the BA Refresher 1 (BAR1) course annually and the BA Refresher 2 (BAR2) course that encompasses CFBT bi-annually.
59. GMFRS has a number of facilities to expose fire fighters to heat and smoke and a dedicated LPG training facility to demonstrate fire behaviour.
60. BA Instructors (BAI) delivering corporate level training are all either Fire Service College trained or have undertaken Institute of Fire Engineers (IFE) approved courses. All except 2 have been BAI trained since 2007. All BAIs should be able to demonstrate a relevant portfolio of experience.

61. BA training is programmed into every 7-tour local training plan on 2 occasions, usually at the start of the period to ensure that should it not take place there is scope to reschedule it. Local BAIs deliver BA training on station. Borough wide joint exercises are undertaken, as are cross border events.
62. All participants are assessed and their results are entered onto the ETR. Any fire fighter not meeting the required standard, that is not achieving 3 or 4 on the scale of 1-4 are identified and improvement plans are drawn up to address any shortcomings.
63. Stations with a higher concentration of probationary fire fighters tend to carry out more BA drills in order that they can provide evidence for developmental workbooks and periodic assessments.
64. Local BAIs are BAI trained and GMFRS aim to provide refresher training every 3 years. BAI training is delivered over 7 days by GMFRS corporate BAIs at the Training Centre or at CFBT facilities at Lancashire or Merseyside Fire and Rescue Services. There are plans to increase the duration by 2 days to include a "train the trainer" component.
65. Local training includes other components in addition to BA drills, such as BA entry control and guideline techniques.

### **Opportunities for Improvement**

66. There is some confusion amongst fire fighters about what exactly they are receiving in terms of corporate BA and CFBT refresher training. There is evidence that the BAR2 course may not satisfy the key requirements of CFBT and is often substituted for a BAR1 course. It is unclear if what is actually being delivered achieves the intentions of FSC 17/70.
67. The implementation of the 2-year corporate training plan, whilst aiming to ensure that all operational fire fighters are trained to the relevant standard by the end of the period, does not identify individuals who have missed or fallen significantly behind with BA refreshers and CFBT. It was reported that some fire fighters have not had CFBT for between 3-7 years and similarly BA training for upwards of 2 years. These individuals are potentially a significant risk to themselves and colleagues and to the Service generally. These individuals must be identified and assessed to prioritise their training. If necessary GMFRS should consider taking them off the run until retraining has taken place.
68. At the time of our visit your LPG facility for CFBT was out of action and had been for a number of months, the exact number differed depending on who was asked. This was preventing you from running the BAR2 course and as such the Service was not achieving the intentions of FSC17/70.

69. A number of reports were seen. One suggested that the facility was fit for purpose in 2005, another suggested it was coming to the end of its useful life and another presented a business case for replacing the facility with carbonaceous units. GMFRS' strategy with regards to the CFBT facility appears muddled. There are differing views generally about the best way to provide CFBT however you should ensure that the facility allows delivery of training that results in fire fighters achieving the appropriate level of competency.
70. There is a belief amongst staff that CFBT is weak and has led to declining competency in fire fighters.
71. It was reported that trainees and recently trained probationary fire fighters were concerned that they were intervening in local BA drills to correct the techniques being delivered by the BAIs. This may not be down to a failure to undertake refresher training on their part, but that they are not receiving the most current information about changes to operating procedures.
72. Concerns were raised at station level about how realistic hot fire training was. Fire fighters reported that some BA training in heat and smoke is delivered in facilities they are familiar with and therefore doesn't challenge them sufficiently. They saw a need for more training in more difficult and arduous conditions and in locations with which they were unfamiliar to better equip them for live incidents.

## **Recommendations**

73. GMFRS should review training records for all operational fire fighters to identify those who have not received BA refresher training or CFBT within the last 2 year period and identify those with the longest periods since they last received training. These individuals should be identified, prioritised accordingly and if they are identified as a significant risk the Service should consider taking them off operational BA wearing until assessed as competent.
74. Training for all fire fighters who fall into the above category should be prioritised ahead of those who have more recently received refresher training.
75. GMFRS should ensure that the content and quality of CFBT is of sufficient quality to ensure fire fighters are receiving training appropriate to their role in order that it meets the intentions of FSC 17/70.

76. The Service should ensure that all local BAIs have access to information and are delivering training that reflects current practice. Any changes that are risk critical should be formally communicated to them and the Service should ensure this information is received, applied and monitored.

## **Incident Command (IC) and Incident Command Training**

### **Strengths**

77. GMFRS has a strategic plan to deal with the provision and application of IC training. Incident Commanders are trained to a level relevant to their role.
78. There are clear training requirements for the acquisition of competence for staff at levels up to and including Area Manager contained within the document Incident Command Training Policy, version 1.0 dated 7/11/09.
79. There was significant praise from crew managers for the Crew Manager Managing Incidents Training course delivered over four days at the Fire Service College (with GMFRS staff). The crew managers were of the opinion that this was "the best training I've done for Incident Command and filled me with confidence to take on the role".
80. The Incident Command Training Policy states that watch based training will be undertaken at least three times in an eighteen month period. Compliance with this policy standard was sampled at a number of stations, all of which were able to demonstrate sufficient training sessions via the ETR system. The training delivered at watch level is based upon materials provided by Operational Training & Development. This material was supported by watch and crew managers and fire fighters at various stations, who found the material helpful in maintaining competence.
81. The Service's Policy identifies the expectation of participation in at least 3 incident command incidents / exercises per annum for Tactical Commanders. The Policy states that the use of the "Tactical Commanders Record" to record these is voluntary – with this and the recent implementation of the Policy it was not possible to test compliance.
82. The Service's Policy identifies that the development of Supervisory Commander's records is currently under development (expected April 2010).

83. The Service has recently conducted a TNA of incident commanders. Newer managers are identified and receive training as part of the "Gateway" process that ensures they are trained to manage. IC training is a key component of the operational aspect of this programme.
84. All incident commanders are Fire Services College trained. Once deemed competent a fire fighter who has been identified as suitable for development will take up a temporary crew manager role to assist their further into the role. Permanent promotion will be secured after 12 month assessment. Success is not guaranteed and it was reported that some fail to meet the standard and remain in grade. These fire fighters would also be called upon to act up to cover absence if necessary.
85. Whilst the Service has only limited Retained Duty System (RDS) employees the same structure and level of competence must be demonstrated by RDS Incident Commanders.
86. GMFRS operate a flexible duty system where senior officers are on call to provide IC cover for incidents that develop within the County. There are currently over 90 Flexi-duty Officers who are on call on rotation. The system is arranged so that adequate cover is available at all times to a minimum level, however in reality the number of available Incident Commanders is generally much higher than this. Groups of officers tend to be on call together providing the added benefit of familiarity and team working.
87. Incident commanders have been trained using either the Vector system or more recently Hydra Minerva suites. Some have been trained using both software packages.
88. The Service has identified a number of "sitting tenants", that is officers who have not been trained to the current required level of IC but take charge of incidents. These officers have been assessed, prioritised according to their needs and will all be trained and further assessed within the next 18 months.
89. Systems are in place through operational monitoring by senior officers and PRT to assess commanders during operational incidents. Information is fed back during hot and strategic debriefs and any identified IC training requirements are fed into the training plan at the appropriate level. Managers in development are subject to more scrutiny and are required to provide evidence of their competency to achieve a permanent promotion.
90. Incident command and incident command training is a particular strength of GMFRS.

## Recommendations

91. The Service should consider how it proposes to assess the maintenance of skills of its Tactical Commanders when the completion of the records is voluntary.
92. The Service should continue its work to develop a Supervisory Commanders Incident Command competence records

## Planning and Implementing Risk Controls

*Is there a planned and systematic approach to implementing the health and safety policy?*

93. From the evidence provided throughout the inspection it is apparent that the system for implementing the health and safety policy is robust and is generally effective across GMFRS. Employees interviewed at all levels of the structure were aware of the importance of the health and safety management system and their own roles within it. The links between the health and safety team, the operational team, the service delivery team, the risk management team, the PRT and the FBU are strong. The division of health and safety management into policy makers, planners and implementers also appears to serve GMFRS well.
94. Risk assessment is a responsibility of all staff at all levels and there is evidence that these duties are discharged at the relevant level. Dynamic risk assessment for incident command is widely understood and decisions based on this type of assessment are scrutinised during operations.
95. Borough commanders are given flexibility in terms of how they deliver the health and safety policies within their borough. Some allow station commanders to run all aspects of their station, others give each station commander a specific reference for all stations in the borough. This is an acceptable position, that whilst it can breed inconsistency, there is some confidence that monitoring regimes exist that will identify where performance does not reach an acceptable level. These regimes must be consistently applied.
96. A good example of implementation is the Service's "Drive to Arrive" policy. Once the emergency call has been subject to the "call challenge" process a decision is made whether the crews should be despatched on a blue light response. If an emergency response is not required albeit attendance is, the crew will drive at normal speeds and arrive in their own time. The implementation of this policy has helped to realise a 62% reduction in vehicle accidents since its introduction.

## **Risk Information**

### **Strengths**

97. The provision of risk critical information is a significant strength of GMFRS. Our interviews provided evidence of a robust system for gathering, providing and updating risk information for crews.
98. Whilst the Service still relies on a system that is largely paper based and relies on 72D cards there is evidence that they are maintained to a high standard and are fit for purpose.
99. All stations visited where risk information was discussed had clear risk profiles for their borough and the specific risks contained within. Inspections and familiarity visits take place and 72Ds are updated by the relevant manager when changes are notified or discovered.
100. GMFRS works in partnership with the local police, prisons service, Primary Care and mental health trusts and other organisations to build a profile of the local area to gather intelligence that can be included on call out sheets. This system appears extremely valuable and is supported at all levels of the Service.
101. The crews reported that the key risk information they require tends to be contained within the call out sheet. This information allows crews on route to an incident to evaluate and plan their response. The information comprises details fed back to control after previous incidents, information gathered through partnership working and information from previous inspection visits. This information will prompt the IC to use 72Ds if appropriate.
102. There is evidence that new information is fed back and relevant records updated.
103. The work in progress to introduce new software to manage risk information, including the use of vehicle mounted data units has the potential to further improve this key area.

## Measuring Health and Safety Performance

*Is performance measured against agreed standards to reveal where and when improvement is needed?*

### **Strengths**

104. An annual report on health and safety performance is produced. It is required by and presented to the Fire Authority. The report contains analysis of key performance indicators and explores trends in comparison to previous years. The report is structured in a manner that reflects HSG65 and makes reference to where issues identified have been incorporated into the following year's operational and health and safety plan.
105. Progress against the Brigade action plan is subject to quarterly review by both the BMT and Fire and Rescue Authority.
106. Regular monitoring of accident, incident and near miss data is undertaken. This prompts action to be taken to deal with specific trends. For example, measures have been taken to deal with increase in handling injuries sustained by, clerks, cooks and cleaners as reported in the 2008/9 H&S report. Similarly a working group on violence at work carried out detailed analysis of attacks on staff by pinpointing all attacks on maps to identify clusters. This research was fed into the development of a Violence at Work policy.
107. The PRT carries out audits of the standard of training delivered. It also looks at the application of GRAs and SOPs proactively and reactively. If performance is found to be unsatisfactory safety critical notices are issued. These can be issued to individuals and lead to an action plan of remedial measures being applied. The attitude of staff at all levels of operations towards the PRT is extremely positive and it is apparent that their opinions are highly valued within the Service.
108. The PRT attend incidents in a monitoring capacity as a way of gathering information on performance and issues safety critical notices where performance gives rise to safety concerns.
109. The training plan is subject to ongoing monitoring by Service delivery at monthly meetings. Watch plans are available electronically and subject to remote monitoring by senior managers.
110. Station commanders are not obliged to take command when they attend an incident, but can instead act in a mentoring capacity and provide help, support and advice to the IC.
111. Procedural audits are carried out by the Deputy Borough Commander.

112. Station safety inspections and drill site safety inspections are carried out on a regular basis. Results of these inspections are collated by the health and safety support section and any trends are acted upon accordingly.

### **Opportunities for Improvement**

113. The role of borough commanders in monitoring the competence of staff lacks definition. Assessment of performance may not be consistent from borough to borough. The flexibility afforded to borough commanders may add to this situation.
114. PRT is involved in operational incidents but has limited involvement at station level. Increased PRT activity at station level may address the potential for inconsistencies between boroughs.
115. PRT monitoring at incidents tends to focus on incident command with little emphasis on core skills.

### **Recommendations**

116. Within the flexibility afforded to the boroughs you should ensure that the expectation of borough and station commanders with regards to their measuring health and safety performance is clear.
117. The Service should explore the possibility of increased PRT involvement on-station, particularly in the area of training.

### **Auditing and Reviewing Health and Safety Performance**

*Are lessons learnt from the performance measurement and auditing processes which are effectively put in to practice?*

118. All accident investigation reports are reviewed by a senior manager, specifically the Area Commander for Operations.
119. GMFRS is externally audited by teams from neighbouring FRSs. This was last done in 2008.
120. Risk assessments are reviewed by portfolio holders, i.e. station commanders, in light of incident and near miss reports. A member of the health and safety section ensures this is completed.
121. Training issues are discussed during debriefs following incidents and analysis is undertaken to identify patterns. Any such patterns form part of the "Emerging Themes" process that results in them being added to training programmes whether at a local or corporate level.

122. Station commanders carry out 3 training audits per month and feed issues back to watch managers. They also audit probationers' work books and monitor the 7-tour system. This should identify any individuals that may have missed training elements.
123. Station commanders observe training and carry out debriefs with watch / crew managers afterwards. For instance the debrief of a BA session that did not last long enough and missed some critical points was described. The station commander went through the debrief with the watch manager and made sure that the key issues were understood.
124. A full training debrief occurs at the end of the 7-tours.
125. Results of station audits carried out by the station commanders are distributed to the PRT, the borough commanders and Deputy Borough Commander.
126. The results of monitoring, audit and review are discussed at the Integrated Risk Control Group, a new forum chaired by the Operations team. They discuss and help shape the ongoing strategy.

## Summary and Conclusions

127. The impression left by GMFRS following HSE's 3-day inspection of the Service is that it is generally very well organised and operates a robust system to ensure that front line fire fighters are not exposed to unacceptable risks to their health and safety.
128. The particular strengths identified are in gathering, provision and development of risk critical information, the structure in place to train, assess and develop incident commanders and the monitoring, audit and review process where there is clear evidence that the feedback loop extends to the top of the organisation.
129. We identified a number of gaps in training provision both at corporate and local levels, issues relating to the consistency and quality of training provided and the quality of the assessments and records of such training. Our view is that these risk critical issues have arisen through the Service concentrating on other immediate priorities and as a result it may have lost a degree of focus on these risk critical issues.
130. These specifically relate to BA refresher and CFBT.
131. A summary of our recommendations is contained.
132. HSE expects the Service to draft an action plan with realistic, achievable timescales to address the recommendations. Once this plan is agreed the local HSE Lead Inspector will measure progress against it
133. That said we are confident that these issues can be improved and that the relationship that HSE has built with GMFRS in recent years can be developed to secure further improvements in health and safety management within the Service.
134. In order to assist GMFRS in prioritising their actions in relation to the recommendations we believe that the priority areas are:
  - Identifying all fire fighters who may be a risk to the Service as a result of the period since they were last trained, assessing their competence and prioritising their training;
  - Ensuring the Service achieves the intentions of FSC 17/70;
  - Assessing the consistency of local training in terms of delivery, assessment, recording and monitoring.

## RECOMMENDATIONS

- R1. A qualitative review should be undertaken to assess the effectiveness of local training with a view to addressing the apparent inconsistency of delivery, assessment, recording and monitoring.
- R2. A review of the competency of managers to assess should also be undertaken.
- R3. Better use could be made of the PRT to independently assess and audit local training to ensure objectivity and consistency.
- R4. GMFRS should review training records for all operational fire fighters to identify those who have not received BA refresher training or CFBT within the last 2 year period and identify those with the longest periods since they last received training. These individuals should be identified, prioritised accordingly and if they are identified as a significant risk the Service should consider taking them off operational BA wearing until assessed as competent.
- R5. Training for all fire fighters who fall into the above category should be prioritised ahead of those who have more recently received refresher training.
- R6. GMFRS should ensure that the content and quality of CFBT is of sufficient quality to ensure fire fighters are receiving training appropriate to their role in order that it meets the intentions of FSC 17/70.
- R7. The Service should ensure that all local BAIs have access to information and are delivering training that reflects current practice. Any changes that are risk critical should be formally communicated to them and the Service should ensure this information is received, applied and monitored.
- R8. The Service should consider how it proposes to assess the maintenance of skills in its Tactical Commanders when the completion of the records is voluntary.
- R9. The Service should continue its work to develop Supervisory Commanders Incident Command competence record.
- R10. Within the flexibility afforded to the boroughs the Service should ensure that the expectation of borough and station commanders with regards to their measuring health and safety performance is clear.
- R11. The Service should explore the possibility of increased PRT involvement on-station, particularly in the area of training.