

**THE MANAGEMENT OF HEALTH AND SAFETY
AT HAMPSHIRE FIRE AND RESCUE SERVICE**

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

19 – 21 May 2009

1. INTRODUCTION

1.1. This report presents the findings of an inspection of the management of health and safety at Hampshire Fire and Rescue Service carried out by the Health and Safety Executive in May 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.

1.2 The team members were Tracey Cartwright, Paul Williams, Paul Vinnicombe and Martin Baillie.

1.3 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. Staff were also seen either for formal interviews or during the inspection of selected sample localities and work activities. This was a sample inspection and the report is therefore based on that sample. A draft report was therefore passed to a senior manager to allow them to make comment on factual content and indicate any areas where we may have misinterpreted information given to us in the course of the inspection.

1.4 As part of the overall assessment of the FRS's health and safety risk management systems, the inspection concentrated on the following issues:

- Training and competency in core fire fighter skills including breathing apparatus and associated procedures; compartment fire behaviour training
- Competence for incident command
- Provision of risk critical information to inform operational decision making

1.5 The conclusions and recommendations made are based on the sample of localities and activities inspected, where appropriate these should be applied across the full range of localities and activities. Recommendations represent the improvements required to enable Hampshire Fire and Rescue Service to comply with its duties contained within the generality of The Health and Safety at Work etc Act 1974 and the Management of Health and Safety at Work Regulations 1999.

1.6 We would like to express our thanks to the management and staff at Hampshire Fire and Rescue Service for their assistance and co-operation throughout the inspection.

1.7 Copies of this report are being sent to employee representatives, the fire authority and the occupational health and safety manager.

2. FINDINGS

2.1 Health and Safety Policy.

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

- 2.1.1 There is a comprehensive system of policies, including the Health, Safety and Welfare Policy, contained in Service Orders. These policies include the key topic areas of this Inspection.
- 2.1.2 However, the Health and Safety Policy does not provide an overview of the current organisation and arrangements for health and safety management. For example, although it includes arrangements for risk assessment of operational activities it does not include arrangements for risk assessment of non operational activities or refer to the Service Order on risk assessment. There is also no reference to the Health and Safety Manual. There is an obvious challenge in keeping this key document up to date in an organisation with a fast pace of change.
- 2.1.3 There was clear leadership on health and safety demonstrated by the Service Management Team. A member of the Fire Authority has also been appointed as lead member or “champion” for health and safety.
- 2.1.4 There was evidence in documents and interviews that health and safety had been embedded in operations and general management activities.

Recommendations

R1. The Health and Safety Policy and Service Order on risk assessment should be updated to reflect current arrangements and provide an overview of the various procedures for risk assessment.

2.2 Organising for Health and Safety

2.2.1 *Control*

Is there an effective management structure and arrangements in place for delivering the policies?

- 2.2.1.1 Two years ago, in order to improve arrangements, management identified that it would be more appropriate for the Health and Safety Department to report through Service Delivery to reflect the area in which the greatest risks lie. This has helped increase the profile of health and safety and embed it into day to day operations, as referred to above.
- 2.2.1.2 The Service have a number of performance indicators which are separated into two distinct groups; those which contribute towards the local performance management initiative of “Beacon Station” status, and other Service Delivery performance indicators. Although a number of the Service Delivery performance indicators relate to health and safety, currently only sickness absence contributes towards Beacon Station status. The Service may wish to consider inclusion of other health and safety performance indicators in the Beacon Station scheme in future years.
- 2.2.1.3 There is a clearly defined chain a command which assists with defining roles and responsibilities.

2.2.2 Cooperation

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

- 2.2.2.1 Consultation with employees takes place in a number of groups and committees. There appears to be a good working relationship between senior management and Trade Unions.
- 2.2.2.2 There is, however, confusion over the relative roles of the various health and safety committees. The terms of reference as stated in policy are not reflected in minutes and the comments of those interviewed e.g. which is the forum for statutory consultation, where should safety event trends be discussed.
- 2.2.2.3 As Hampshire Fire and Rescue Service is a reactive organisation which appears to rapidly set up working groups to deal with specific issues as they arise, this can lead to difficulties in keeping the representative bodies up to date on new initiatives.

Recommendations

R2. The terms of reference of the three main health and safety committees should be reviewed and communicated to the staff involved and employee representatives.

Guidance on good practice is contained in the HSE publication HSG263 “Involving your workforce in health and safety. Good practice for all workplaces.”

2.2.3 Communication

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

- 2.2.3.1 There are good formal systems for communication in the form of Service Bulletins and a comprehensive website containing Service Orders and Policy Directives.
- 2.2.3.2 Regular Service Management Visits to stations provide opportunities for direct communication between all levels of the organisation.
- 2.2.3.3 Health and safety information is communicated to the Service Management Team in bi-monthly reports.
- 2.2.3.4 Examples were noted of good communication between departments and with external agencies.
- 2.2.3.5 The involvement of number of key personnel in national and regional forums is effective in the exchange of information and maintaining awareness of current developments.

2.2.4 Competence.

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

Core Skills Training

- 2.2.4.1 There is a comprehensive in-house training facility with plans to extend it further to increase the provision for live fire training.
- 2.2.4.2 There were clear training requirements for firefighters in a two year training and assessment cycle to ensure ongoing operational competence. This includes annual and six monthly assessments for issues identified as safety critical.
- 2.2.4.3 There were a number of examples where training needs had been identified and training delivered to meet those needs, e.g. time critical rescue, pump module.
- 2.2.4.4 There have been ongoing problems with the Training IT systems, a consequence of which was that during the Inspection we were unable to verify or check training records.
- 2.2.4.5 The Group Training Instructor (GTI) resource appeared an excellent facility that allowed flexibility in how training was provided, whilst ensuring the quality of provision. This appeared of particular benefit to the retained crews who spoke very highly of this resource. One notable factor that made this system effective was that each GTI is linked to five to six Retained Duty System (RDS) stations. This means that they are able to forge good working relationships with retained firefighters, draw up and help deliver their training plans and have the capacity to respond to their requests.
- 2.2.4.6 Concern was expressed about the risk of the ratio of GTIs to RDS stations not being maintained as the Service is currently one GTI under strength.
- 2.2.4.7 There was evident pressure to complete the RDS training in the hours available. This was particularly acute where RDS use specialist equipment. At some stations extra hours were provided for training, e.g. high volume pump at Hythe, but at others no extra hours were provided.
- 2.2.4.8 Building construction training is included as part of initial training. There are plans to include this subject in the assessment of operational knowledge and understanding at Assessment and Development Centres.

Breathing Apparatus Training

- 2.2.4.9 The Service provide in house Breathing Apparatus (BA) training using their own accredited instructors. These instructors carry out six monthly workplace assessments in heat and smoke for all operational firefighters. Where training needs are identified further training is provided.
- 2.2.4.10 The Service is not currently providing the two to three day BA refresher training at two year intervals recommended in Fire and Rescue Service Circulars 18/2009 and 17/70. The Service have identified this discrepancy. However, until such time as the Circulars are reviewed, the guidance they contain remains current and the Service should ensure that their training provides an equivalent standard.
- 2.2.4.11 The BA training module in initial firefighter training has been increased from ten to twelve days.
- 2.2.4.12 We were made aware that GTIs have found that a number of retained firefighters were failing their BA assessments on the start-up procedures. It was felt that this was possibly due

to the use of the 'rapid deployment' donning and start up procedure as standard, as opposed to only when justified by dynamic risk assessment. Since the issue was first identified the Service has provided additional training and re-assessment, produced a training package on start up procedures and issued a Training Bulletin. However, as some retained firefighters are still failing their assessments on start up procedure, this is an area the Service should proactively pursue to continue improvements in this area.

2.2.4.13 At present, Hampshire's station based 'accredited instructors' are not subject to reassessment of their competence, they just attend 'update' training. The Service have identified that this does not follow the current guidance in Fire and Rescue Service Circular 18/2009 "Firefighter Safety at Operational Incidents" and are implementing plans to change to mandatory reassessment.

2.2.4.14 Training Centre Instructors don't currently hold a portfolio of training evidence, as required by Circular 18/2009. The Service identified this and has plans to introduce Instructor Portfolios.

Compartment Fire Behaviour Training (CFBT)

2.2.4.15 It was very encouraging to note that the service was continuing to invest in improving the facilities for realistic firefighting training with the imminent construction of the new 'firehouse' complex and reinstating the Realistic Fire Training Unit.

2.2.4.16 Provision of CFBT is being further extended by the contract for use of facilities at TAG Farnborough Airport. This will particularly help access for retained crews who could otherwise spend considerable travel time getting to the locations that currently have fire behaviour training (FBT) facilities. We understand consideration is also being given to further provision in the south of the County at Fleetlands and Fawley.

2.2.4.17 The service is now accredited (through BTEC) to train its own FBT instructors which in due course will help increase the number of instructors and thereby support the move to a two year cycle for FBT.

2.2.4.18 There was concern amongst some firefighters that there was not enough CFBT particularly for RDS. However, others pointed out that this training is often undersubscribed and more efficient use of existing training places may increase provision available.

2.2.4.19 The Service has identified that as the capacity for CFBT training increases they need to keep under review the level of exposure of instructors to heat.

Incident Command Training

2.2.4.20 The Service has a new in-house training and assessment suite for Incident Command System Levels 1 – 4. This complements the existing Assessment and Development Centre facilities.

2.2.4.21 The courses have recently been reviewed and extended to include robust assessment following an in-house review.

2.2.4.22 The current training has been well received at all levels within the Service and is well supported by Service Management team

2.2.4.23 There is a system of reassessment of Incident Command skills at all levels every 2 years. Failure of this assessments results in removal from incident command until further training and reassessment.

Recommendations

- R3. The service should review the training requirements for the use of specialist appliances by RDS firefighters to ensure adequate training is provided to maintain competencies in these areas.
- R4. The Service should ensure that their BA refresher training provides a standard at least equivalent to that recommended in Fire and Rescue Service Circulars 18/2009 and 17/70.
- R5. The Service should actively monitor the use of the 'rapid deployment' BA start up procedure to ensure correct procedures are being followed.
- R6. The plan to reassess competence of 'Accredited Instructors' should be progressed according to a clear timescale.
- R7. The plan to introduce Instructor portfolios should be progressed according to a clear timescale.
- R8. The provision of CFB training should be reviewed to ensure effective use is made of available training places.

2.3 Planning and Implementing Risk Controls

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

- 2.3.1 Although there are various systems in use for carrying out risk assessments, there does not appear to be a clear overview of the system as a whole. Whilst it is encouraging that risk assessment is devolved and incorporated into activities such as training and operations, it is important that there is a clear corporate overview of all the procedures so that any gaps can be identified and quality maintained. Revision of the Health and Safety Policy and Risk Assessment Service Order should assist in this process.
- 2.3.2 Communities and Local Government Generic Risk Assessments have been incorporated into a "Fire Facts" folder which is available on every appliance. Unfortunately, many of the Fire Fighters spoken to stated this document was not used at incidents. This issue has been identified by the Service and included in current improvement plans.
- 2.3.3 There is a system for recording dynamic risk assessments as part of a Command Support Log at incidents.
- 2.3.4 A small sample of Logs were examined during the Inspection. The quality of the risk assessments contained within them varied but a number could not be regarded as suitable and sufficient. This was a particular issue with those produced by Retained Duty Officers. A number of firefighters expressed the view that the quality of assessments and recording was poor. At larger incidents, where the record of risk assessment is completed by the Command Support Officer, it was felt there was a need to improve communication of risk assessment between Incident Commanders and those completing the record.
- 2.3.5 There is currently a Project Team in place to redesign the system for dynamic risk assessments. It was suggested by some firefighters that the quality of the recorded assessments could be improved by more guidance and examples. National work on dynamic risk assessment is also currently being undertaken. In Hampshire the term 'Dynamic Risk Assessment' is used to include the recorded 'Analytical Risk Assessment' described in the Fire and Rescue Manual on Incident

Command. However, there may be potential for some confusion in terminology at cross-border incidents and Hampshire should aim to follow the guidance in the Incident Command manual.

- 2.3.6 Concerns were expressed by a number of firefighters about the potential health and safety implications of Efficient and Flexible Crewing. The Service needs to ensure they have considered the implications of these arrangements for operational fire fighting.
- 2.3.7 Although there are a number of Plans and Improvement Registers which include health and safety, there is no health and safety plan or strategy which pulls together the various initiatives and projects currently underway. This would facilitate decisions over priorities and make the most effective use of the finite resources of the Health and Safety Department. There is concern that the impetus and resource needed to implement and maintain the planned improvements may be lost in the current climate of rapid and significant change.
- 2.3.8 A Health and Safety Strategy and Performance Group has recently been formed. The Terms of Reference for the Group suggested this may be an appropriate forum to produce such a plan.

Provision of Risk Information

- 2.3.9 Following the death of four firefighters from Warwickshire Fire and Rescue Service in 2007 and work within the South East Region of the Chief Fire Officers Association (CFOA), Hampshire Fire and Rescue Service identified weaknesses in its own procedures for the provision risk information at incidents. In March 2008 they produced an Improvement Action Plan which encompassed a number of projects and initiatives.
- 2.3.10 The system of Premises Information (PI) Cards and Operational Plans is currently being replaced with a Site Specific Risk Information (SSRI) process.
- 2.3.11 There was evidence that at some stations Premises Information cards and Operational Plans were out of date and not used at incidents.
- 2.3.12 The new SSRI process appears to be well structured and organised, with premises being prioritised on a risk basis. Station managers have received training on the new SSRI process and scoring system.
- 2.3.13 Although the Retained Duty System (RDS) is not yet included in the SSRI process, there was evidence of work underway at some stations to gather improved risk information.
- 2.3.14 The Service has used computer modelling programmes and statistical analyses in order to provide risk profiles for every station ground.
- 2.3.15 Although the PI Card system and SSRI system are currently running side by side, at the time of the Inspection the only Service Order on the website was that relating to the older system.
- 2.3.16 The production of SSRIs is a major project, with an estimate of 30-40,000 SSRIs to be generated. Concern was expressed as to the resource implications involved in producing and maintaining these records, particularly at RDS stations.
- 2.3.17 Alongside SSRIs, an interim process is being put in place to ensure essential risk information is communicated to the incident ground. The Incident Risk Information System (IRIS) involves Control passing risk information to Incident Commanders in three phases. There will also be limited use of laptops on some appliances.

- 2.3.18 These projects provide interim measures until the implementation of the national FireLink and FireControl projects, which will provide Mobile Data Terminals for appliances and risk information software. They should also be used as an opportunity to encourage firefighters to proactively make greater use of available risk information.
- 2.3.19 The March 2008 Improvement Plan does not provide a detailed breakdown of anticipated timescales for implementation or arrangements for evaluation of these measures.

Recommendations

- R9. There should be a mechanism for central corporate overview of all the risk assessment procedures. The revision of Policy documents in Recommendation 1 should assist in this process.
- R10. The Project to revise the Dynamic Risk Assessment should link in with national work currently being undertaken in this area. Terminology used should reflect that in the Fire and Rescue Manual on Incident Command.
- R11. A Health and Safety Plan should be produced to prioritise the work of the Health and Safety Department and others involved in projects to improve standards of health and safety.
- R12. The Improvement Action Plan in relation to risk information should be progressed according to clear detailed timescales and procedures included for evaluation of the measures introduced.

2.4 Measuring Health and Safety Performance

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

- 2.4.1 There were a number of examples of active monitoring of standards including a long standing system of Workplace Inspections.
- 2.4.2 The Training Department receive 6 monthly progress reports on compliance with Workplace Assessments and also carry out annual “audits” to ensure the Workplace Assessment programme is being carried out.
- 2.4.3 The audits by Training Department are presently ‘quantitative’ i.e. check process is happening and degree of compliance, rather than qualitative. The Service is aware of this and is planning to introduce a quality assurance element to these audits in order to verify the quality of workplace assessments being carried out. The plan includes scheduling audits on a risk basis i.e. extending audit frequency for high performers, which will enable greater effort to be paid to poorer performers.
- 2.4.4 Training Plans are monitored by Managers and there were examples of Station Managers and Group Manager monitoring standards by regularly drilling crews themselves.
- 2.4.5 There is a system in place to ensure that Service Delivery Bulletins are communicated to firefighters. Firefighters sign an ‘Information Activity Sheet’ each month to acknowledge they have read the contents of the bulletins etc. for that month. Although the completion of these sheets is subject to audit, this type of system is limited to demonstrating that the information has been read, not that it has been assimilated.
- 2.4.6 The Incident Audit process, whereby Audit Officers attend designated incidents, appeared to be a good mechanism for monitoring compliance and establishing learning points.
- 2.4.7 There were some concerns about the content and consistency of reports and action taken by Audit Officers. The form appears to focus on the role of the Incident Commander rather than an examination and analysis of all Service functions, as stated in the relevant Service Order. There is limited guidance provided on completion of the form. The current system makes it

difficult to identify trends and associated training needs.

- 2.4.8 Site Specific Risk Information forms and records of dynamic risk assessments are centrally monitored by Watch Manager Risk.
- 2.4.9 The Health and Safety Advisor produces quarterly summaries of accidents and injuries but there is no apparent discussion or analysis of trends. The 2009 CFOA Audit report recommended greater analysis of causes, trends and common features of accident data, as did the 2000 Health and Safety Executive Inspection Report.
- 2.4.10 The safety event reporting and investigation procedures are currently being revised, although this project appears to be slipping behind schedule.

Recommendations

R13. The planned introduction of the new quality assurance system for Workplace Assessments should be progressed according to clear timescales.

R14. The Incident Audit form and associated guidance should be revised to meet to stated objectives of the Incident Audit Service Order.

R15. There should be greater analysis and discussion of safety event trends.

2.5 Auditing and Reviewing health and safety performance

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

- 2.5.1 There are regular audits by a number of external bodies e.g. ROSPA, CFOA SE Region, Hampshire County Council.
- 2.5.2 Although the Health and Safety Policy refers to auditing by the Health and Safety Team, their workload has meant that to date little has been carried out.
- 2.5.3 There are a number of examples of incidents/ notices in other Fire and Rescue Services, and Fire and Rescue Service Circulars, being used as a prompt for the Service to review its own performance. The clearest example resulted in the Service identifying that risk information was a weak area and putting in place short and long term plans to improve.
- 2.5.4 There is a robust system of incident debriefs. Reports on the outcomes of debriefs are published on the website and notified by Service Bulletin. There was evidence of incident debrief leading to specific action plans for departments and changes in policy and training.
- 2.5.5 The Response Policy Group regularly reviews the findings of Audit Officer reports and incident debriefs. The annual debrief report is timed to feed into annual training needs analysis.
- 2.5.6 Although the Incident Debrief system was highly regarded and there was evidence of mechanisms in place to communicate information on the system, a number of firefighters were not clear who attends debriefs and when they are held. It was also felt more could be done to encourage lower level debriefs by Incident Commanders to cover the periods of time before an Audit Officer arrives or where the incident does not trigger Audit Officer attendance.

Recommendation

R16. Greater use should be made of lower level debriefs by Incident Commanders, particularly in relation to early stages of incidents which may take place before the arrival of Audit Officers.

3. SUMMARY AND CONCLUSIONS

The above report is based on a sample inspection which focused on specific operational topics. Based on this inspection we found Hampshire Fire and Rescue Service to be an organisation with a positive health and safety culture which, although having areas for improvement in certain aspects of their health and safety management systems, is striving to continually improve, and this is very encouraging.

Particular strengths were considered to be in the areas of 'monitoring' and 'reviewing' of their arrangements, which has allowed the Service to identify for themselves areas of improvement in their health and safety management systems and to subsequently put plans in place to address these. Again this was encouraging.

During this inspection HSE gave 16 recommendations for Hampshire Fire and Rescue Service (HFRS) to action. Those recommendations are listed below under 'Summary of Recommendations'. However, in order to assist HFRS with prioritising we believe there are 4 key areas, namely:

1. The Service should review the training requirements for the use of specialist appliances by RDS fire fighters to ensure adequate training is provided to maintain competencies in these areas.
2. Although six monthly assessment of BA competency is carried out, the Service should ensure that their BA refresher training provides a standard at least equivalent to that recommended in Fire and Rescue Service Circulars 18/2009 and 17/70.
3. There are a number of ongoing projects and initiatives which involve health and safety issues. A Health and Safety Plan should therefore be produced to prioritise the work of the Health and Safety Department and others involved in projects to improve standards of health and safety.
4. The Service have identified weaknesses in its procedures for the provision of risk information at incidents and produced an Improvement Action Plan. This Plan should be progressed according to clear detailed timescales and procedures included for evaluation of the measures introduced.

Action now required by HFRS

The Service should produce an action plan that identifies how and when it intends to implement all the recommendations from the report. The action plan should be agreed with the lead inspector within a mutually agreed timescale. It is our intention to return to the Service in due course to ascertain progress with implementing the action plan.

Summary of Recommendations

- R1. The Health and Safety Policy and Service Order on risk assessment should be updated to reflect current arrangements and provide an overview of the various procedures for risk assessment.
- R2. The terms of reference of the three main health and safety committees should be reviewed and communicated to the staff involved and employee representatives.
- R3. The Service should review the training requirements for the use of specialist appliances by RDS fire fighters

to ensure adequate training is provided to maintain competencies in these areas.

- R4. The Service should ensure that their BA refresher training provides a standard at least equivalent to that recommended in Fire and Rescue Service Circulars 18/2009 and 17/70.

- R5. The Service should monitor closely the use of the 'rapid deployment' BA start up procedure.
- R6. The plan to reassess competence of 'Accredited Instructors' should be progressed according to a clear timescale.
- R7. The plan to introduce Instructor portfolios should be progressed according to a clear timescale.
- R8. The provision of CFB training should be reviewed to ensure effective use is made of available training places.
- R9. There should be a mechanism for central corporate overview of all the risk assessment procedures. The revision of Policy documents in Recommendation 1 should assist in this process.
- R10. The Project to revise the Dynamic Risk Assessment should link in with national work currently being undertaken in this area. Terminology used should reflect that in the Fire and Rescue Manual on Incident Command.
- R11. A Health and Safety Plan should be produced to prioritise the work of the Health and Safety Department and others involved in projects to improve standards of health and safety.
- R12. The Improvement Action Plan in relation to risk information should be progressed according to clear detailed timescales and procedures included for evaluation of the measures introduced.
- R13. The planned introduction of the new quality assurance system for Workplace Assessments should be progressed according to clear timescales.
- R14. The Incident Audit form and associated guidance should be revised to meet to stated objectives of the Incident Audit Service Order.
- R15. There should be greater analysis and discussion of safety event trends.
- R16. Greater use should be made of lower level debriefs, particularly in relation to early stages of incidents which may take place before the arrival of Audit Officers.