

**THE MANAGEMENT OF HEALTH AND
SAFETY
AT NORTH WALES FIRE AND RESCUE
SERVICE**

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

DECEMBER 2009

INTRODUCTION

1.1 This report presents the findings of an inspection of the health and safety standards at North Wales Fire and Rescue Service (NWFRS) carried out by the Health and Safety Executive (HSE) in December 2009. The inspection followed the approach used in the HSE publication '*Successful Health and Safety Management*' (HSG65).

1.2 The HSE inspectors were Sean Bembridge, Gary Martin, Jenny Morris and Clare Owen.

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. Staffs were also seen either for formal interviews or during the inspection of specific 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 competence in core fire fighter skills including breathing apparatus and associated procedures and 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 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 North Wales Fire and Rescue Service to comply with its duties contained within the generality of the Health and Safety at Work etc. Act 1974 (HASAWA) and the Management of Health and Safety at Work Regulations 1999 (MHSWR).

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

1.7 Copies of this report are being sent to employee representatives, the Fire Authority and your occupational health and safety manager.

2. FINDINGS

2.1 POLICY

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

2.1.1 There was good evidence to show that an effective health and safety policy is in place. Service Administrative Policy & Procedure Order (SAPPO) Section 5 Order 1, subject: Health and Safety Policy sets out the direction that NWFRS will follow. The current policy is signed off by the Chief Fire Officer, showing commitment from the top of the organisation to the contents of the policy document. There is a clear process for review of policy documents and in fact, at the time of the inspection the health and safety policy was in the process of being reviewed and revised. SAPPOs and other supporting documentation were also found to be in place covering the key issues addressed during the inspection process. The policies seen during the inspection process were fit for purpose.

2.1.2 NWFRS adopt a very proceduralised approach to the management of health and safety. As a result of this, there is a large volume of documentation covering relevant guidance on core operational skills, incident command, breathing apparatus (BA) and compartment fire behaviour training (CFBT). The challenge for the service is to ensure that all this information is kept up to date and is readily accessible and effectively implemented by the end user.

2.1.3 The Chief Fire Officer has taken a proactive stance in relation to station visits including utilising unannounced visits to see stations in an unprepared state. The CFO also meets with all new recruits to reinforce the values and direction of the service.

2.1.4 All stations are visited by a Principal Officer twice a year. The Principal Officers divide the stations between them equally. The station visits comprise of attending on a drill night and then holding an open forum for the watch. Principal Officers also attend structured debriefs.

2.1.5 We received good feedback from the interviews conducted in relation to NWFRS and the CFO's commitment to health and safety. This included comments that the CFO recognised the importance of good health and safety standards and that he valued competency in the organisation.

2.1.6 We did receive comments at station level that there was concern about the balance between the 'traditional' role of the fire-fighter and the community fire safety role. The perception at some stations was that as performance indicators had been set for community fire safety work it was imperative that these targets be met at any cost. This was not entirely in accordance with the position of management who informed us that so long as justifiable reasons were given then an inability to achieve the targets was permissible.

2.1.7 There were concerns at station level about the perceived lack of clarity in relation to the completion of personal development records (PDR). NWFRS have taken steps to address these concerns and have put in place several support mechanisms to facilitate the PDR process. These include additional briefings and the introduction of Instructional Development & Facilitation Officers (IDFO) to support the individuals' development. Part of the IDFO role is to support personnel in the completion of PDRs.

2.1.8 A concern that was consistently raised during the inspection was that stations did not feel that they had sufficient access to the IDFO resource. This had been acknowledged by NWFRS who had put in place Support Instructors to free up IDFO time. However, stations still feel that they do not have sufficient access to their IDFO. This concern was most evident in relation to the Retained Duty System (RDS).

2.1.9 The issues highlighted above have also been identified in the most recent peer assessment audit report.

2.2 ORGANISING – CONTROL

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

2.2.1 There was evidence of a clear management structure with effective health and safety arrangements in place.

2.2.2 Roles and responsibilities are clearly defined throughout the structure.

2.2.3 We did find evidence of a lack of consistency in the delivery of the services policies and procedures at local management level. This was particularly highlighted by the varying standards of delivery of the PDR system.

2.2.4 We were pleased to note that this is an issue that has been recognised by the service and that steps have already been taken to address it. The roll out of specific training to Crew and Watch Managers should be of tremendous benefit in helping to address this.

Recommendations

See recommendation 2 under Competence

2.3 ORGANISING – CO-OPERATION

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

2.3.1 Consultation with employees took place in a number of groups and committees. This included the service health & safety committee meeting chaired by one of the Assistant Chief Fire Officers. The representative bodies also attend this meeting including those from the Fire Brigades Union (FBU), Retained Fire-fighters Union (RFU) and Unison. Minutes from these meetings indicate that operational issues are raised and discussed.

2.3.2 Concerns were expressed to HSE that employees were not always fully consulted prior to changes being made. Examples of this concern included the introduction of new operational equipment and changes in the incident command training given to Fire Fighters ‘in charge’. NWFRS were able to demonstrate that they had robust procedures in place for the introduction of new operational equipment. We also recognise that the changes to the incident command training were as a result of the identification of a potentially risk critical gap in incident command training. Whilst we recognise that management may need to take swift action to address immediate safety critical risks, such as those identified on the incident ground. Representative bodies should still be consulted as appropriate.

2.3.3 During the inspection, we encountered a significant level of resistance amongst employees to the PDR system. The clear message from the majority of those required to use PDR was that it was overly bureaucratic and time consuming. However, it is important that the service record skills and competencies and maintains records in order for the service to satisfy itself that employees are competent. We recognise the efforts that NWFRS have made and are making to address these issues. Not least the proposed introduction of the PDR Pro system.

2.3.4 The resistance seen does however demonstrate that in this instance NWFRS has not been successful in gaining the co-operation of employees to work with you in achieving implementation of the PDR system. This in turn raises issues for NWFRS regarding how the organisation deals with change management and associated factors such as employee involvement, consultation and communication.

Recommendation

1 The service should review the health and safety arrangements in place to ensure the trust, participation and involvement of employees. This review should take into consideration the difficulties experienced in bedding in the PDR system as well as exploring the perceived lack of consultation of employees when introducing new methods of working.

2.4 ORGANISING – COMMUNICATION

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

2.4.1 There were good examples of communication between departments and with other Fire and Rescue Services. Good examples of communication were also seen with external agencies. A good example of internal communications was the publishing of urgent safety notices on the services intranet system.

2.4.2 A number of key personnel were involved in national and regional forums.

2.4.3 The move towards mobile data terminals (MDT) will greatly improve the communication of key operational information to the end user. We were informed by the project lead that several sources of information would feed into the Risk Management system (RMS) including information from Fire Safety and Operations departments.

2.4.4 This project was also a good demonstration of communication both within the service and with other FRS and external agencies.

2.4.5 There was some feedback received about the amount of information that was produced centrally and that it was difficult to take all this information on board. This has been discussed earlier in the report. The MDT should go some way to alleviating this issue. However, the service does need to be mindful of the volume of information produced.

2.5 ORGANISING – COMPETENCE

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

2.5.1 During the inspection, HSE visited the training facility at Rhyl as well as the facility at Dolgellau. We were impressed by the standard of both facilities and by the dedication of the management and instructors in the Skills, Learning and Development centre (SLDC). The use of generic risk assessments (GRA) and other risk assessments as referred to in SAPPO Section 5 Order No.11 'Risk Assessment' informs the training provided to fire-fighters. These assessments are accessible to the user via a database contained in the public folders section of the services intranet.

2.5.2 NWFRS have shown a significant commitment to delivering a competent workforce. This was demonstrated by the appointment of an individual specialising in human resources and training at ACFO level. This appointment has already made significant improvements in the organisational delivery of a competent workforce.

2.5.3 The 2008/11 Workforce Development Strategy outlines the services aims and objectives in relation to learning and development. Some of the key aims and objectives include organisational development, workplace assessment, workplace development and operational competencies development and maintenance.

2.5.4 A significant amount of work has been done in order to achieve these aims and objectives and the service deserves recognition for this. In particular, we recognise the work being done in relation to training and development of Crew and Watch managers.

2.5.5 The IDFO role has been developed by the service to support stations. However as already mentioned there are concerns on stations that they do not have sufficient access to the IDFO in order to make best use of the resource. From the interviews conducted, we recognise the importance of the IDFO role. However whether through logistics or resource we were consistently told that IDFOs are not able to meet the full and important role that they have. The role of the IDFO in relation to local delivery plans, PDR checks and the assessment of drills is particularly important. Additionally the IDFO provides a link to the SLDC and knowledge of benchmark standards.

2.5.6 There are a number of mechanisms in place to aid NWFRS in their assessment of operational competence including Station Audits, Operational Audits, peer review and training assessment. The primary tool for local demonstration of competence appears to be the PDR system incorporating role maps for staff. We did find that it was not easy to establish what training a watch has to do. To work out a watch training programme the local manager has to go into each of the individual fire-fighters PDR records and look for when they last demonstrated that competency. This has led to different stations developing easier ways to achieve this, such as locally devised spreadsheets. As mentioned previously we encountered significant resistance to the PDR system and confusion over completion of the documents.

2.5.7 When inspecting at station level a significant number of those spoken to stated that they had done a lot of work to bring their PDRs up to speed prior to the HSE inspection. This appeared to be confirmed when we undertook an unplanned visit to a station where the completion of PDRs was poor. Clearly, this was just one station but it did demonstrate what we were being told at other stations.

2.5.8 The unplanned visit also revealed a lack of effective local management of the PDR process and brings into question the monitoring of station performance in this instance. Again, this is one example but it does serve to support the feedback we received regarding a lack of consistency in how PDRs were completed and checked.

2.5.9 As mentioned earlier we are aware of the other mechanisms that are in place to deliver competence. However, it should be noted that if these other measures are effective they should be able to identify local delivery issues and facilitate the delivery of PDRs to a consistent standard.

Core Skills

2.5.10 This issue with demonstrating competence through the PDR along with the expanded role of community fire safety appears to be having an effect on both the Retained Duty system and the Whole time Duty System. Locally we were informed that the RDS were re-prioritising to focus on safety critical training and delivery on community fire safety targets. We were told that the administration supporting the training plans sometimes had to be completed outside of paid hours.

2.5.11 Wholetime fire-fighters reported their immediate complaint as being the perceived bureaucracy and time required to complete the PDR process. We were also told that a significant issue for them is the perception (rightly or wrongly) that the balance between community fire safety work and maintaining competence for the 'traditional' fire-fighter role is wrong. An example given was that rather than running through an activity 'hands on' during a drill, watches were using a – in their view - less satisfactory format such as a talk through.

2.5.12 The effect of the issues raised above is that there is some anecdotal evidence to suggest that the systems in place for delivering core skill maintenance are not being robustly followed. This includes the management of the delivery, the support mechanisms in place, the monitoring and the consistency of delivery.

2.5.13 It needs to be stressed that we cannot conclude from the anecdotal evidence obtained whether this is having any type of significant impact on the services aim of delivering and maintaining competence. It does however warrant further examination by the service to ensure that the system does deliver and maintain competence.

2.5.14 We were pleased to note that from the draft report of the recent peer review audit that the issues relating to PDRs and IDFO support have already been identified and that the service is already taking steps to address these issues.

BA and CFB training

2.5.15 Overall we received very positive feedback on the quality and content of both hot and cold BA training. Fire-fighters receive formal BA refresher training annually. This training involves hot BA training one year followed by cold BA training the following year. BA wear and maintenance training is provided on station during drills.

2.5.16 The service operates a carbonaceous hot fire training facility at Dolgellau. The training house provides sufficient scope to change the fire scenario so that fire fighters will not be fighting a scenario that they have used before. The hot fire training provided incorporates fire behaviour training and BA refresher training in a single course. Fire fighters attend this course at Dolgellau every other year.

2.5.17 The SLDC has undertaken a skills analysis and is satisfied that the training meets the Fire and Rescue Service's national training expectation, which is reiterated in Wales Fire and Rescue Service Circular W-FRSC (09) 15 'Fire-fighter Safety at Operational Incidents'. The course comprises of an instruction element, practical fire fighting and demonstration of use of hoses and BA as well as a written examination. The written examination is changed annually to reflect current practice.

2.5.18 If a fire fighter does not achieve a suitable standard then an individual development plan is raised. In risk critical instances fire-fighters will not be permitted to wear BA operationally until this standard has been achieved and re-assessed. This goes to the Watch manager, IDFO and County Ops Manager.

2.5.19 We could not evidence any formal procedure for quality assurance of training delivered by trainers. Trainers informed us that whilst they do pick up information from other trainers and by observation, there is no formal documented procedure. We understand that the service already has plans in place to put in place a quality assurance system for trainers.

2.5.20 We were pleased to see examples of good practice such as the recognition that it is difficult for crew managers to maintain certain of their core skills levels. For example it has been identified that Road Traffic Collision (RTC) technology and hardware change very quickly and that personnel need to be abreast of these changes, especially as RTC forms a significant part of the operational work undertaken by the service. It had also been identified that BA use is low due to a combination of type of incidents attended and the role taken by crew manager. The concerns were that an erosion of experience and confidence with BA would have safety critical implications.

2.5.21 To address these potential shortfalls a Supervisory Core Skills Update has been written covering BA and RTC skills to ensure core competencies are maintained. This is a good example of NWFRS identifying a training need and implementing measures to address the issues identified. Course notes for this module were provided and reviewed and were considered to be clear and concise. This module has been delivered across the service and a second module is in development. The second module will be delivered during the next financial year and will address administrative and managerial skills to boost confidence with the new PDR Pro that is being introduced. The service is also developing a manual of core competencies for all operational staff, incorporating step-by-step pictures and simple instructions.

2.5.22 Whilst generally satisfied with the quality and content of training in relation to BA and CFBT we were frequently told that fire-fighters did not feel that they received enough exposure to hot fire conditions. The reduced number of fire incidents attended exacerbated this. The common feeling expressed was that annual hot fire training would be preferred in order to maintain skills and that the cold BA training could be delivered on station as part of local delivery plans.

2.5.23 We are satisfied that the current arrangements meet the national standards in terms of frequency and content. Therefore, any change to facilitate fire fighter concerns would be for local consideration. It should be noted that local factors, such as when fire-fighters have only attended a low number of calls and have not worn breathing apparatus at a fire during any 12 month period, will necessitate those fire-fighters receiving refresher training in heat and smoke, in accordance with W-FRSC(09) 15.

Incident Command

2.5.24 We recognise the significant work that has been undertaken to ensure that incident command training is delivered to whole time and retained fire-fighters who require it.

2.5.25 The service has identified the operational need for incident command training for Fire-fighters in charge. The current course being offered is a 2 day internal incident command development utilising Vector simulation and practical real time exercises. This has been reviewed as the candidates being put forward were found to be less experienced than before. From January 2010, the training will change to incorporate pre-learning, interim assessment by IDFO and a 2-day training module (Vector). This will be followed up by consolidation on station.

2.5.26 For Crew managers and above either the Welsh Region Vertical Training (WRVT) or the Fire Service College at Moreton in Marsh are used for initial incident command training.

2.5.27 The service is currently in the process of using Vector for refresher training / assessment of Fire-fighters in charge and crew managers. This has resulted in some staff failing the assessment and being taken off the run.

2.5.28 NWFRS operate an incident command map, which identifies all those who can perform an incident command role. Included in the map are details of when they

were last trained, the format of the training and when they were last assessed. This list is monitored by the SLDC who will organise training / assessments required.

2.5.29 We did receive some concerns over the number of temporary promotion (TP) positions in the service. In particular, the concern was over what if any incident command-training individuals in TP positions received. We were informed by the SLDC that if a TP position is offered the individual will undergo Vector assessment with two Group Managers to determine levels of competence and to identify any development needs. The individual will also receive support from the SLDC. Where an individual fails to demonstrate the required level of competence, they will not be offered the position until such time as they are able to do so. In instances where non-risk critical development needs are identified these will be detailed as part of the individuals' development plan.

2.5.30 During interviews we did come across some practical issues in the flexi duty manager system. This was highlighted by individuals in TP positions or who were in development saying that they had attended in an incident command role and due to travelling distances; the flexi duty manager had not been able to attend whilst the incident was still open.

2.5.31 Formal assessment of incident command competence takes place annually. The service recognises that there is some slippage in delivering this target and this is tolerated within reasonable limits (up to 2 months over). The assessment process is robust however and the consequence for not demonstrating competence would be that the individual would be removed from an incident command role until they satisfactorily demonstrated competence.

2.5.32 The service has undertaken a review of incident command in light of Wales Fire and Rescue Service Circular W-FRSC(09) 15. As a result of the review the service are satisfied that they are compliant and that actions identified in the circular were already in hand.

2.5.33 We were satisfied that the service is broadly compliant with circular W-FRSC (09) 15. However some work still needs to be done to fully embed refresher training. The service needs to ensure that this is completed.

Recommendations

2 Review the arrangements in place to enable local management to fulfil their role in the delivery of a competent workforce. This review should include the effectiveness of the support mechanisms currently in place (e.g. IDFO, audit etc.) as well as local management issues and the monitoring arrangements in place.

3 Ensure that the systems in place to support those less experienced individuals who are placed in incident command positions are fit for purpose and used consistently and correctly.

4 The service should ensure that a robust process is in place for the quality assurance of training provided by trainers.

2.6 PLANNING AND IMPLEMENTATION

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

2.6.1 In the main we saw good evidence that there was an appropriate level of planning and that this was done in a systematic way. An example of this is the structured approach taken to implementing the Operational Intelligence Gathering Policy.

2.6.2 An example of less successful planning and implementation is the issues that have arisen whilst trying to embed the PDR system. The reasons for this and the effects on the service have already been discussed in some depth elsewhere in this report. The positive aspect of this is that the service has recognised the problem and can use the experience to better inform the planning and implementation process in the future.

2.6.3 The introduction of the PDR Pro system offers an ideal opportunity to put this into practice.

Risk Information

2.6.4 The service has a clear policy on the gathering of risk information. SAPPO Section 2 Order No 2 'Operational Intelligence Gathering' sets out the routes by which information is gathered, who should be gathering it and how the information should be presented. Within this document are the forms used for information collection. The format of the forms is clear and directs the user to the collection of the appropriate information. This includes for example, information on the construction of buildings and details of any potentially hazardous processes.

2.6.5 There was good evidence to show that the service was working well with external agencies including the police and local authorities to identify those premises that may present a risk to fire-fighters.

2.6.6 Additionally there was good information flow within the service to capture information obtained by other departments such as fire safety.

2.6.7 A specific project is currently under way to improve the capture of risk information. This is a key priority for the service as detailed in the 2008/09 'Improvement Plan and Annual Risk Reduction Plan'. This is a good example of the service acting decisively to address a recognised organisational risk. The work has also served to assist in the services move to mobile data terminals (MDTs) in front line appliances.

2.6.8 The Project lead informed us that there were currently approximately 19000 premises known to the service. Of these approximately 400 had been classified as presenting a high risk to fire-fighters, 2000 a medium risk and 11000 as low risk. High-risk sites included premises falling under COMAH and high-rise building such as blocks of flats.

2.6.9 Good practice was seen in the methods of information collection including approaching local authorities for details of void premises as well as liaison with internal groups such as the arson reduction team. The project lead has also sought a wider view in relation to the project by joining the English task group dealing with risk information.

2.6.10 The benefits of the work undertaken thus far are already being seen. We received extremely positive feedback from fire-fighters about the format and content of the Hazard Information Cards (HICs) that were now in circulation.

2.6.11 Targets have been set for watches to complete HICs. With Wholetime Crews expected to complete 12 HICs quarterly and retained to produce four HICs annually. These are mainly being met by 7(2)(d) visits to premises. Visits have been organised to ensure that all high-risk premises are given priority.

2.6.12 We were satisfied that the service have put in place a robust system for the capture and maintenance of risk critical information.

2.7 MEASURING PERFORMANCE / AUDITING

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

2.7.1 This is a key area both for the purposes of the inspection and for the service.

2.7.2 We were pleased to see that there are comprehensive systems in place to undertake both proactive and reactive monitoring.

2.7.3 In terms of proactive monitoring, we saw good examples including the use of station audits and the active involvement of the SLDC in monitoring training delivery at both service and station level via the IDFOs. The peer review audits also provide a good indicator of where the organisation is in relation to delivery of agreed standards.

2.7.4 Reactive monitoring systems are also in place including the measures set out in the incident debriefing policy. Another good example of reactive monitoring is that Health and safety events / operational incidents are standing agenda items on both Watch Managers and County Operations Managers meetings. The Executive Group meetings also review health and safety issues and monitor trends.

2.7.5 The use of NWFRS operational assurance provides an opportunity to critically assess incidents to see what learning outcomes can be achieved. Additionally the hot debrief sessions provide a quick method of analysing the outcomes of incidents.

2.7.6 Training attendance is also monitored and reasons for non-attendance followed up to ensure that those who have an identified training need do receive the training. We did come across some examples where individuals informed us that they had not been given another date for training after non-attendance however, the majority of those interviewed confirmed that the system was robustly followed.

2.7.7 As previously mentioned we do have some reservations about the effectiveness of the monitoring of local management delivery to ensure that agreed standards are met. The mechanisms are in place to facilitate this however, they do not appear to be being rigorously followed in all instances.

Recommendation

See recommendation 2 under Competence.

2.8 OTHER ISSUES (noted during the course of the intervention)

2.8.1 Concerns were raised about the suitability of a 'spare' appliance, which had been provided whilst the regular appliance was being repaired. The concern was around the safety implications resulting from a lack of storage compared to the regular appliance. The service demonstrated that there was a clear policy in place to deal with this issue. The issue that had arisen would appear to have been a failure to implement this policy at the local level. This matter was dealt with quickly and effectively at the time of the visit.

2.8.2 It was brought to our attention that those involved in internal accident investigation may not be adequately trained to fulfil this function. The service should investigate this matter to establish whether this is the case and take appropriate action to remedy any deficiencies identified.

3 RECOMMENDATIONS

1 The service should review the health and safety arrangements in place to ensure the trust, participation and involvement of employees. This review should take into consideration the difficulties experienced in bedding in the PDR system as well as exploring the perceived lack of consultation of employees when introducing new methods of working.

2 Review the arrangements in place to enable local management to fulfil their role in the delivery of a competent workforce. This review should include the effectiveness of the support mechanisms currently in place (e.g. IDFO, audit etc.) as well as local management issues and the monitoring arrangements in place.

3 Ensure that the systems in place to support those less experienced individuals who are placed in incident command positions are fit for purpose and used consistently and correctly.

4 The service should ensure that a robust system is in place for the quality assurance of training provided by trainers.