Avon Fire & Rescue Service: HMICFRS accelerated causes of concern (August 2023) – action plan

Site-specific risk information (updated 8 November 2023)

HMICFRS report page ref.	ltem	Issue	Our actions and/or response	Lead Director / Statutory Officer	Lead Officer	Timescale	Cross-reference to other plans and documents	Remarks
Understandi	ng fires and	other risks						
7/8	Accelerated Cause of Concern	The service still doesn't have an effective system to make sure it gathers and records relevant and up-to-date risk information to help protect firefighters, the public and property during an emergency. We found examples of risk information available not being effective, accurate or up to date. Concerningly, most operational staff haven't been given the support they need to collect risk information, and there is limited strategic oversight in place to improve the risk information process. Recommendations By 19 September 2023, the service should provide an action plan to demonstrate how it will meet our recommendations, and it should have an effective risk information process in place. The service should make sure:	We will deliver a plan that effectively and robustly: meets the six accelerated requirements; delivers a site-specific risk information (SSRI) policy delivers associated processes which support the po develops a culture of SSRI visits, data publication at enables effective sharing of data across multiple org ensures that the response to emergency operations	licy; nd quality assuranc panisations and plat	e within the organisat	tion;		wider AF&RS community.
		it has identified all those premises that require a site-specific risk visit;	Complete work to identify current risk inspection data available on CFRMIS and DragonMap. Align these sites to the defined SSRI risk assessment grading 5 (very high risk) to 1 (low risk) of premises; issue to Service Delivery – Response to complete SSRI visits and data collection; and identify visits to be completed in the short term.	ACFO – Service Delivery Support	Group Manager – SSRI	02 Oct 23		Update 12 Sep 23: Assessment has identified 610 visits to allocate in the short-term phase.
			Define the SSRI risk assessment (SSRI-RA) process detailing risk levels 1-5 (see above) linked to the NatOG strategic gap analysis (SGA) requirements for SSRI inspections data collection.		Group Manager – SSRI	02 Oct 23		Update 12 Sep 23: Avon FRS will follow the NFCC PORIS scoring; slight adjustment needed to ensure risks are not scored too low. Partially completed,

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									discussions held with Dorset & Wiltshire FRS. Use of the five level scoring is standardised, cross-mapping with the London Fire Brigade. Update 08 Nov 23: Definition is complete and fixed, digital version hosted on MSSharePoint. Completing this SSRI-RA is referenced and delivered within the face-to-face training sessions in process of delivery. Guidance to complete the process is contained within the ARA document.
			Use the updated SSRI-RA and risk level to identify new SSRI risks linking in available data sets from community risk management planning (CRMP), risk partners, local knowledge, etc.		Group Manager – SSRI	31 Mar 24	•		Update 13 Sep 23: New sites are being sent into SSRI team from Business Fire Safety and the number of SSRI sites is growing. The formalised process of generating a more detailed SSRI work packet database has not yet started. Update 08 Nov 23: The Avon Data Warehouse (ADW) is the final method of delivering this process. The work is ongoing to integrate the SSRI-RA and additional data sets and process into CFRMIS. This will facilitate the ADW-linked work packet generation in the future. The SSRI team has a number of data sets available
									that will be analysed centrally to identify new sites. The SSRI team has been working with Environment Agency to identify sites of concern. A desktop review was completed to close gaps in SSRI data, against key risks to inform the first tranche of visits issued to staff for completion in Oct 23.

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HMICFRS report page ref.	Item	Issue	Our actions and/or response	Lead Director / Statutory Officer	Lead Officer	Timescale	9	Cross-reference to other plans and documents	Remarks
			 Produce suitable templates to record and capture SSRI data which comply with Fire Standards, NatOG and available best practice guidance. To date these have been defined as: SSRI-RA / data collection form; Initial Attendance Plan (IAP); and Tactical Action Plan (TAP) Each to be readied for training delivery, use during inspections and for digitisation within a suitable system, over the medium- to long-term timeframe of the SSRI project. 		Group Manager – SSRI	31 Oct 23			Update 05 Sep 23: These were completed via a sprint day. Require QA tracking data method page to be added prior to sign-off and inclusion in training delivery. Once tracking sheets added this can be signed off. Update 08 Nov 23: Templates completed, stored on MSSharePoint and staff now being trained in completion. NFCC support in Nov 23 looked at templates and were satisfied with the formats used. Incident command training team are using IAPs as prompts and document content for ICS scenarios in training events to build familiarity (first used ICL2 assessments in Nov 23).
			Define sites to be visited in the short-term based on current organisational SSRI-RA position.		Group Manager – SSRI	05 Sep 23	√		Update 05 Sep 23: Sites have been identified; work required to start visits, capturing data and hosting. Update 08 Nov 23: Phil O'Connor met with Group Managers on 17 Oct 23 to allocate jobs to stations – this has been completed and jobs issued. As staff are trained, visits are starting. A booking management system has been developed to manage bookings and monitor progress, this is being used to allocate work packets.
			Task visits to start – collect, store, and share up- to-date data on identified premises.		Group Manager – SSRI	31 Mar 24	√		Update 12 Sep 23: SSRI team building MSExcel spreadsheet to host on MSSharePoint to enable the job list to be given to Service

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									Delivery – Response to start planning against station activities; once teams receive training visits can start. Aimed completion between nine and 15 weeks from end of training evolution. Update 08 Nov 23: Visits have started and teams tasked with respective visit allocations; as training is completed, visits start. System created to manage and monitor bookings of visits (as above).
			Develop systems and processes to embed a culture of SSRI gathering, recording and communication. Develop a process to support required policy update of SSRI site identification and risk assessment from the current position to one that is integrated with wider organisational data sets. As a minimum this should include Business Fire Safety, CRMP, Community Safety, partner agencies and neighbouring organisations.		Group Manager – SSRI	31 Mar 24	•		Update 12 Sep 23: SSRI team will build this during the short-term phase so that full process can go live at start of medium-term planning. Update 08 Nov 23: Training has started and this will affect (and is affecting) the culture of SSRI completion. Work tasking for policy and process review issued on 08 Nov 23 to SSRI team as
			Record significant findings during/after inspections; staff to use the SSRI-RA and the process of transposing the data collected to Initial Attendance Plans and Tactical Action Plans.		Group Manager – SSRI	31 Mar 24			Update 13 Sep 23: The 15 sites subject to the Control of Major Accident Hazards (COMAH) Regulations 2015 in the Avon FRS area and several other Level 5 sites have been completed and are in the process of publication. Update 08 Nov 23: Staff being trained and starting visits. Quality assurance (QA) process and MSSharePoint hosting in place. Progress reviewed weekly.
			Gain local specialist advice from partner agencies or other organisations. Create and formalise process of sharing and gathering data from partners, neighbouring fire and rescue services, Local Resilience Form (LRF)-identified agencies, link in with the Risk		Group Manager – SSRI	31 Mar 24	•		Update 13 Sep 23: This process has not formally started; scoped to start after training delivery is completed and capacity in SSRI team

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			Intelligence Team to create a two-way system of data sharing.						allows. Aim to be in place and formalised for Apr 24. Update 08 Nov 23: Sharing with neighbouring FRS exists and we are hosting this data on the MSSharePoint site and MDTs via SCResponse. This is formalised via Resilience Direct (RD). South Wales FRS does not currently share via RD; SSRI team has contacted them for data. SSRI team has started working with partner agencies such as the Environment Agency (as described above). SSRI has approached National Highways with reference to key risks such as Avonmouth Bridge and the Severn Tunnel.
			Ensure that familiarisation visits and exercises are carried out at identified premises or sites (this may require participation from cross-border resources). Build a revisit schedule and familiarisation process that balances the work output capability of operational response staff against the current and future list of SSRI tasks. Link SSRI to testing and exercising on operations, ensuring cross-border events are facilitated.		Group Manager – SSRI	31 Mar 24		Link to review of operational Testing and Exercising Policy that was partially superseded by the Operational Assurance Policy.	Update 13 Sep 23: Process of re-visiting, familiarisation and cross-border SSRI visits has not started. This will be built as part of the wider quality assurance process; data on visit times and feedback from SSRI work packets needed to set re-visit frequency.
		staff are trained in how to carry out a site-specific risk visit and identify site- specific risk information;	Create a two-stage training process, starting with the delivery of face-to-face training for all operational staff from Crew to Area Manager to instruct on methodology of completing SSRI visits.	ACFO – Service Delivery Support	Group Manager – SSRI	31 Dec 23	✓		Update 09 Sep 23: Course training plan completed w/e 09 Sep 23; requires testing on a team/Watch, revision and finalisation prior to training start in Oct 23.
									Update 08 Nov 23: Training trialled and started, face-to-face training planned for completion by end of Dec 23 (anticipated 75% complete by end Nov 23). Stage 1 creation is complete.

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									As detailed above, ICS training using IAP and TAP to support training of commanders and staff, and to build familiarity with operational use of documents and SSRI data.
			Develop an e-learning solution for refresher training of staff after the initial input.		Group Manager – SSRI	31 Mar 24	0		Update 08 Nov 23: Jo Farrow has looked at the training sessions to develop an understanding of context. Discussions held to scope creating videos for completing IAP and TAP. During the face-to-face training we are identifying areas to focus e-learning package on.
			Identify specific operational knowledge, equipment, skills and understanding which may need to be incorporated into local training plans.		Group Manager – SSRI	31 Mar 24	-		Update 12 Sep 23: Not yet started – once visits start and data is fed into the SSRI
			Build into SSRI process method of feeding learning back into the operational learning process to inform training, equipment, etc.		Group Manager – SSRI	31 Mar 24	•		team under new process of data capture, trends can be identified. Trends can then be collated by SSRI team and fed into operational learning system so that relevant adjustments in service can be made.
									Update 08 Nov 23: Operational Assurance (Guidance) team is developing a system to mange Operational Learning (OL). SSRI is a workstream within that project build to ensure that all SSRI learning from data capture and visits that will impact learning and equipment is tracked into the OL process, risk assessed and cross-mapped against NatOG strategic actions (SAs).
									A Monitoring Officer prompt sheet is being produced by the OL team and will have SSRI prompts to ensure SSRI data use, availability and new risks are identified.

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									The QA tracker has sections to highlight learning, equipment and exercising needs from inspections; this is then passed to OL.
		it has effective quality assurance and strategic oversight arrangements in place;	Embed a quality assurance programme; build into the start of the plan delivery and formalise over the short-term phase through feedback.	ACFO – Service Delivery Support	Group Manager – SSRI	31 Mar 24			Update 13 Sep 23: Plan for process to start with work packet completion is in place, formalising this is required once feedback from visits is received and processed. Update 08 Nov 23: QA process built and being overseen by SSRI team and dedicated staff member. QA is part of the face-to-face delivery. QA process with managers may require further dedicated input; there is a guidance document on MSSharePoint that instructs staff for each step of the QA process.
			Schedule reviews and audits for the validity and accuracy of such information.		Group Manager – SSRI	31 Mar 24	•		Update 13 Sep 23: Review and auditing process to be developed during short-term phase whist initial data is being captured. Update 08 Nov 23: Monthly review and audits planned and programmed in for review and auditing process.
			Encourage feedback from personnel about any errors or omissions in SSRIs.		Group Manager – SSRI	31 Mar 24	•		Update 13 Sep 23: Not yet started (unable to start until SSRI work packets start to be completed and data is received by SSRI team using new data collection and communication methods). Update 08 Nov 23: Feedback as per this task is being delivered as part of the initial training process, to encourage staff to feedback and assist with system

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									refinement and SSRI improvement.
			Ensure any inaccuracies in, or omissions to, SSRIs are resolved and systems updated.		Group Manager – SSRI	31 Mar 24			Update 13 Sep 23: Not yet started (unable to start until SSRI work packets start to be completed and data is received by SSRI team using new data collection and communication methods). Update 08 Nov 23: Process has started to be developed but will need data in need of refinement to be processed through the SSRI team; as yet, no data requiring this process has been created or identified. SSRI team is waiting for data to flag up so that process can be refined and formalised.
		temporary risks, including individual vulnerabilities that are added onto the risk information system, are managed appropriately;	Establish a task-and-finish group to resolve the issue of transient data held on the mobilising system and owned by Prevention/Protection.	ACFO – Service Delivery Support	Group Manager – SSRI	31 Mar 24	•	Existing RP/011 process for risk information gathering	Update 13 Sep 23: Discussions held with Area Manager (Risk Reduction) – agreed that this can be processed. Update 16 Sep 23: Discussed with Station Manager (Control) – agreed that this work packet can start. Update 08 Nov 23: Meeting scheduled with Risk Reduction for 08 Nov 23 was cancelled at short notice – to be rebooked. Preliminary conversations have taken place to scope the issue.
			Establish a task-and-finish group to define the temporary tactical action plans and build an agreed process to embed to the SSRI system.		Group Manager – SSRI	31 Mar 24	•		Update 13 Sep 23: Provisional solutions identified; e-mail trail generated by stakeholders discussing issues available. Aim to start by Nov 23.
		risk information is uploaded in a timely manner; and	 Establish a delivery method to present SSRI in a clear and timely manner: SC Response, PDF; MSSharePoint; 	ACFO – Service Delivery Support	Group Manager – SSRI	31 Mar 24	-		Update 13 Sep 23: Two of the methods, front MDT/SC Response and MSSharePoint are set up as at 12 Sep 23; the final method in the short- term needs formalising

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HMICFRS report page ref.	Item	Issue	Our actions and/or response	Lead Director / Statutory Officer	Lead Officer	Timesca	le	Cross-reference to other plans and documents	Remarks
			 hard copies of IAP on appliances and within Fire Control Room (FCR). 						(paper copies on appliances and within FCR).
			 Ensure communication systems are in place to inform relevant personnel, stakeholders, and partner agencies of the SSRI; this may need to include resources across borders or boundaries. Move data from Resilience Direct (RD) to MSSharePoint (shared). Upload our data onto RD for sharing. Formalise this process. Link to LRF via Risk Intelligence Unit to ensure data is shared/made available where appropriate. 		Group Manager – SSRI	31 Mar 24	0		Update 13 Sep 23: Process not yet formalised/finalised – this will need to be constructed. MSSharePoint is ready to host data from other agencies and this data is available from a number of neighbouring services; data needs moving from Resilience Direct sharing files to our site.
			Make SSRIs available to personnel in accessible formats to help them successfully plan for, and resolve, incidents.		Group Manager – SSRI	02 Oct 23	✓		Update 05 Sep 23: Three agreed formats produced, finalised and ready for use (proven with COMAH visits and in use).
			Structure risk information so it is easy to identify risk critical content such as evacuation arrangements and significant hazards.		Group Manager – SSRI	02 Oct 23	✓		Update 05 Sep 23: Structure of risk information has been finalised and agreed – three document types, ready for use. Once feedback on end user interface and authoring is received these can be adapted as needed against NatOG requirements.
		fire control has access to relevant and up-to-date risk information, including evacuation strategies, in high-rise residential buildings.	Assess and build a detailed set of solutions to the FCR needs regarding SSRI. Using a solution to host in the short-term, allowing development time during the medium phase and solution in the long-term, where digitisation is desired as part of the PORIS process	ACFO – Service Delivery Support	Group Manager – SSRI	31 Mar 24	•		Update 16 Sep 23: Mobilising system is hosting evacuation information for high-rise buildings where Avon FRS holds the data. The majority of high-rise/tall buildings have this data provided and this information is available to FCR and operational staff via flash messages. This will need expanding during the SSRI capture process. Methods of ensuring data relating to SSRI is effectively hosted on the mobilising system, quality assured, and

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HMICFR report page re	Issue	Our actions and/or response	Lead Director / Statutory Officer	Lead Officer	Timescale	Cross-reference to other plans and documents	Remarks
							removed after lifespan has elapsed (requires formalising). Update 08 Nov 23: FCR managers have assessed SSRI availability within FCR, Solutions exist – agreed process with SM(C) Kirkby and FCR trainers will ensure all staff are refreshed prior to HMICFRS re-visit in Dec 23; trainer has been allocated. FCR can access SCResponse, MSSharePoint and have printed plans for tall buildings available.

Avon Fire & Rescue Service: HMICFRS accelerated causes of concern (August 2023) – action plan

Mobilising system (updated 21 November 2023)

HMICFRS report page ref.	ltem	Issue	Our actions and/or response	Lead Director / Statutory Officer	Lead Officer	Timescale		Cross-reference to other plans and documents	Remarks
Responding	g to fires and	l other emergencies							
25	Accelerated Cause of Concern	The service's mobilisation system, which records information and dispatches resources to emergency incidents, isn't reliable and crashes during emergency 999 calls. This unnecessarily delays the mobilisation of resources, which results in the public receiving a slower response to emergencies. Recommendations By 19 September 2023, the service should develop an action plan to make sure:	We will:						
		the mobilisation system is effective and that it doesn't result in the public receiving a slower response to emergencies;	Continue to implement enhanced, interim, mitigation and bespoke contingency arrangements to ensure that the impact of isolated console errors is reduced to as low as reasonably practicable. Specifically, this will include:	ACFO – Service Delivery	Area Manager (Response)	From 03 Jul 23 until suitable 'fixes' are deployed	✓		
			 i) establishing daily meetings with our software provider's Service Delivery Manager (SDM) and software engineers to evaluate new instances of individual console errors, so that data can be analysed to enable dynamic hot fixes to be developed and implemented; 		Group Manager (Fire Control and Comms.)	03 Jul 23	✓		Update 03 Jul 23: Twice daily meetings were established on 03 Jul 23 moving to ongoing daily meetings as of 26 Jul 23.
			 ii) the isolation of specific software errors that have minimal impact on the mobilising system, while issues are investigated (<i>ie</i> the 'lock tool' function); 			03 Jul 23	✓		Update 03 Jul 23: The 'lock tool' function was removed while solution identified.
			iii) installing provisional hot fixes on the 'reference' (test) system for the 'fatal forms' error to enable Fire Control Officers (FCOs) to interrogate the fix prior to installation on the 'production' (live) system;			w/c 21 Aug 23	✓		Update 23 Aug 23: Hot fix deployed to three consoles to vigorously test over the next few days before deploying to rest of consoles.
			 iv) installing the tested/verified software upload to resolve the fatal forms error into the production system; 			31 Aug 23	✓		Update 29 Aug 23: Hot fix deployed to all consoles at primary Fire Control Room (Lansdown).

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									Update 31 Aug 23: Hot fix deployed to all consoles at secondary Fire Control Room (Kingswood).
			v) undertaking a system health check with the software supplier's Engineering Director to assess configuration and infrastructure needs, prior to a full version software upload; and			31 Aug 23			Update 07 Sep 23: Configuration/infrastructure assessment undertaken; report pending. Due to system stability following hot fix deployment decision taken to return to the standard meeting frequency with the software provider (SM(C)/ System Manager/SDM fortnightly; and GM(C)/SDM monthly). Update 26 Sep 23: Following the health check by Engineering Director it has been highlighted the client's operating system (OS) needs upgrading from Windows 7 to Windows 10; quotation suppled and test PC with W10 delivered, awaiting product license key to activate. Update 11 Oct 23: Product license key chased up with SDM. Update 16 Oct 23: Product license key chased up with Engineering Director. Update 08 Nov 23: Windows 10 licence deployed to Windows 10 machine on Console 8. The Client PC has been pointed to VASB and will arbitrate between VASB and VASA to split the load and
			Receive a full version software upgrade from v4.33.3 to v4.33.5 to address the reported P1/P2 issues and increased stability for ongoing P3 issues.			w/c 25 Sep 23	√		balance the risk. Update 21 Aug 23: Software supplier have advised they are working towards releasing v4.33.5 for testing in the reference system w/c 25 Sep 23. As soon as the version is released, priority will be given to running test scripts to as part of the site acceptance testing.

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								Update 07 Sep 23: Hot fix deployed to all consoles has not resolve the crashing issues. Supplier has advised v4.33.5 should fix these issues. Update 04 Oct 23: v4.33.5 uploaded to Reference for testing before uploading to Production and Training; completion date for testing 20 Oct 23. Update 11 Oct 23: A bug has been found in v4.33.5 by another FRS, a Beta patch has been developed and deployed into their system which has fixed the issue. This patch will be deployed into our reference system w/c 16 Oct 23 where it will be fully tested. Update 19 Oct 23: v4.33.5.1 deployed to Reference on 17 Oct 23 and will be tested until 03 Nov 23 when decision will be taken whether to deploy to Production. Update 08 Nov 23: Supplier SDM has submitted change request to Governance Board to deploy v4.33.5.1 to Production w/c 13 Nov 23. Update 14 Nov 23: Service request submitted to SSS for v4.33.5.1 to be deployed into the production system on 16 Nov 23. Update 16 Nov 23: v4.33.5.1 has been deployed to Production on all clients across both sites.
			Undertake market research to bring forward an options paper to the Service Leadership Board (SLB) and/or Directors meeting to consider the ability/impact of either an On-Prem or Hosted		Area Manager (Response)	05 Oct 23		Update 12 Sep 23: Meeting scheduled on 19 Sep 23 between the Area Manager (Response), the Procurement & Supplies Manager and the

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			Depending upon the decision of the SLB, submit a report to the Capital Steering and Prioritisation Group to ensure that any proposed changes to the capital programme are considered holistically within the constraints of identified funding, value for money and the wider capital spend profile.		Group Manager (Fire Control and Comms.)	21 Nov 23	✓		GM(C) to finalise the options paper. Update 04 Oct 23: Draft Options Paper written between Group Manager (Control), Procurement & Supplies Manager and Area Manager (Response); and sent to ACFO (Service Delivery) for submission to SLB on 18 Oct 23. Update 19 Oct 23: Options paper considered at SLB on 18 Oct 23 with approval to submit a paper for a system tec refresh to the Policy and Resources Committee (PRC) of the Fire Authority, following confirmation regarding additional capital funding being sought from the Capital Steering and Prioritisation Group (CSPG) on 20 Nov 23. Update 12 Sep 23: Will be informed by the option paper decision. Update 19 Oct 23: Following approval by SLB on 18 Oct 23, an update will be provided to the CSPG to consider the potential impact on the Control capital programme to inform the PRC paper to be tabled on 13 Dec 23. Update 20 Nov 23: Exempt report for PRC (mobilisation system business case — written by Group Manager (Fire Control and Comms.) and Procurement & Supplies Manager) is currently with Chief Fire Officer. It was agreed at CSPG that when the option has been decided it will need to be put into the capital programme.

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			Undertake a review arrangements to esupplier is providing contractual custom resolution response. Note: Target time response. Category. Initial response. On-site. Fault identified. Service restored if software fault. Category. Initial response. On-site. Fault identified. Service restored if software fault. Service restored if software fault. Service restored if software fault.	ensure that the m ng appropriate ar ner service with r se times. conses that Cust	nobilising system and timely regards to fault	Officer	Group Manager (Fire Control and Comms.)	30 Nov 23			Update 14 Sep 23: Fault resolution response times from Apr 23 onwards requested from SDM to inform review. Update 01 Nov 23: Service Level Agreement (SLA) data received from SDM and reviewed by Group Manager (Control). 2 out of 230 (<1%) instances of initial response being breached were not met but incidents now resolved. SLA data will be included in monthly service reports and will form part of monthly service review meetings as an agenda item with SDM from Dec 23. Update 14 Nov 23: Control Manager has met with Performance and Information Manager and determined that this will be reported as part of the monthly Control target tracker commencing Dec 23 to ensure that it is easily identifiable that the SLA is being monitored and managed. It will be included in Area Manager (Response) / Group Manager (Fire Control and Comms.) 1:1s. The key metrics included on the monthly tracker will, in future, (ie Dec 23 onwards) also include "mobilising system fault response times" which it has been agreed will stand at 90% minimum of all critical and major calls being responded to within the target time responses for the call categories as per the SLA. This information is available to
											all staff to view via the Service intranet and scrutinised by SLT. Call categories:

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									P1 = Critical P2 = Major P3 = Minor No operational effect
		it has strategic oversight arrangements in place and that any faults are recorded regularly and escalated to senior leaders where necessary; and	Conduct a Fire Control Room (FCR) business continuity management (BCM) review to evaluate additional learning and good practice to enable a range of escalation thresholds to be embedded and understood within the FCR function. Specifically, this will include:						
			i) for all 'critical' (P1) and 'major' (P2) faults on the mobilising system, the duty FCR flexi-duty officer (FDO) is informed, and business continuity plans implemented to mitigate their impact;	ACFO – Service Delivery	Group Manager (Fire Control and Comms.)	31 Oct 23	√		Update 14 Sep 23: Control Manager tasked to conduct a BCM review with Business Continuity & Resilience Manager. Update 05 Oct 23: Control Manager to update G&I page and check understanding with Watch Managers and reaffirming Mobilising Policy to report to FDO. Business continuity plans (ie fallback working) if necessary.
			ii) the FCR FDO will then inform the Duty Group Manager (DGM) of the issue, actions taken and whether there is tangible impact to the delivery of service (in the absence of an FCR FDO being available the DGM shall be informed, and a decision will be taken whether to recall a FCR FDO to duty);			31 Oct 23	✓		Update 14 Sep 23: As above. Update 05 Oct 23: Escalation procedure to be added to G&I page and check understanding with all Watch Managers.
			iii) where necessary, the Group Manager (Fire Control and Comms) or duty Station Manager (Control) or, in their absence the DGM, will contact the mobilising system supplier's SDM to discuss the issue and put in place additional fault management plans for fault tracking and hot fix deployment;			31 Oct 23	✓		Update 14 Sep 23: As above. Update 05 Oct 23: Include escalation procedure in G&I page for awareness and to be included in Communications Faults Book.
			iv) all faults are recorded at the time of occurrence to the mobilising system supplier's helpdesk in line with the current fault reporting process (details of the fault are recorded on an incident log in the mobilising system so all Control staff are informed and can track the fault progress); and			30 Sep 23	✓		Update 03 Jul 23: This message has been reinforced following the daily meeting reports sent into the Fire Control Room.
			v) the development of a 'dashboard' to enable key performance indicators (KPIs) to be set and routinely monitored to support contract			30 Nov 23	✓		Update 12 Sep 23: Discussion started with the Performance Improvement

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			management, system performance, proactive wellbeing support and/or escalation thresholds/process. The dashboard will include triggers to underpin escalation thresholds ensuring strategic oversight at the appropriate stage.					Manager regarding data capture and metrics. Update 14 Sep 23: Monthly SLA data requested from SDM for response and resolution times on mobilising system to monitor KPIs. Update 05 Nov 23: E-mail sent to Performance Improvement Manager to develop a dashboard on Control target tracker to monitor KPIs following receipt of SLA data from SDM. Update 14 Nov 23: Control Manager has met with Performance Improvement Manager and determined that this will be reported as part of the monthly target tracker to ensure that it is easily identifiable that the SLA is being monitored and managed. There will be a dashboard on Control target tracker to monitor KPIs following receipt of SLA data from SDM and will be reported on the monthly scorecard. This will be a standing item on routine meetings between Area Manager (Response) and Group Manager (Fire Control and Comms.). The key metrics included on the monthly tracker will, in future, (ie Dec 23 onwards) also include "mobilising system fault response times" which it has been agreed will stand at 90% minimum of all critical and major calls being responded to within the target time responses for the call categories as per the SLA. This information is available to all staff to view via the Service intranet and scrutinised by

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									SLT. In this instance the trigger for escalation via the SLA will be anything less than 90% performance against the target time responses for the different call categories.
			Benchmark with existing networks – for example, the Mobilising Officers' Group (MOG) and/or NFCC Communication Leads – as to whether commonality of software issues exist or are attributable to local configuration. Application		Area Manager (Response)	31 Dec 23			Update 11 Sep 23: Enquiries made with the MOG Chair to see if the MOG can be used to host this conversation and have it as a standing agenda item going forward. Next MOG meeting is scheduled for 07/08 Nov 23. Update 12 Sep 23: Following liaison with NFCC Emergency Services Network (ESN) Business Change Lead, a national group will be scoped/established to include FRSs which use the same software. Update 19 Sep 23: The Chair of the MOG has advised she will set up a Fire User Group for all FRSs which use the same mobilising system supplier. The aim is to have this prior to the MOG meeting in Nov 23, but if this is not achievable it will be on the agenda for day one of the MOG meeting. Update 01 Oct 23: No further update available as this work progresses. Update 19 Oct 23: NFCC Strategic User Group meeting undertaken – chaired by the NFCC Strategic Lead for Operational Communications – to consider learning across users and to ascertain if a level of coordination nationally could assist with resolutions. Following discussions, it was agreed that due to the infrastructure and version differences across users, and ongoing engagement with the provider, future strategic

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									meetings would not be necessary, and that ongoing resolution would be monitored at the tactical level via the National User Group. Update 03 Nov 23: Chair of MOG has circulated communication to establish the group; Station Manager (Control) (Training and Improvement) assisting with group facilitation. Update 09 Nov 23: Discussion held with Control Managers at the MOG and understanding gained of issues which other product users are experiencing. Commonality in faults identified and a MOG sub-group is being established to discuss further. Details will be fed up to NFCC Strategic Comms. Lead where appropriate. Avon's Station Manager (Control) (Training and Improvement) will chair the national group.
			Review, enhance and embed current risk escalation thresholds/mechanisms between departmental (Response), directorate (Service Delivery) and organisational (SLB/SLT) to ensure the appropriate level of oversight (tactical, strategic, corporate) is maintained and, when applicable, is recorded on the Corporate Risk Register (CRR).		Area Manager (Response)	31 Oct 23			Update 11 Sep 23: Current isolated issues have been added to CRR06 for corporate oversight. Meeting scheduled in w/c 18 Sep 23 with Corporate Assurance Team to explore whether a separate entry on the CRR is required. Update 01 Oct 23: Following the meeting with Corporate Assurance team on 23 Sep 23 it was determined that the risk was sufficiently captured and highlighted in CRR06. Update 21 Nov 23: The key metrics included on the monthly tracker will, in future, (ie Dec 23 onwards) also include "mobilising system"

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								fault response times" which it has been agreed will stand at 90% minimum of all critical and major calls being responded to within the target time responses for the call categories as per the SLA. Any P3 occurrences (low/no operational impact) will be managed locally between Control and the provider and any P1 or P2 occurrence will be reported to the on-duty Control flexi-duty officer and the Duty Group Manager will be informed. In all instances the trigger for escalation via the SLA will be anything less than 90% performance against the target time responses for the call categories for P1 critical and P2 major faults. To ensure the appropriate level of oversight (tactical, strategic, corporate) is maintained any breeches of the 90% minimum threshold will be reported to SLT/SLB via the monthly tracker and will also be reported to the Area Manager (Response) as an agenda item on periodic meetings with the Group Manager (Fire Control and Comms.). Oversight will be maintained via CRR06 (Control and Mobilising) on the CRR with issues/risks highlighted alongside mitigation measures in place. In order to embed these risk escalation thresholds, regular management team updates will be held by the SM (Control) and this will also be an agenda item in the monthly Fire Control User Group meetings.
		fire control staff are provided with regular	Review and enhance, where appropriate, mechanisms to ensure timely updates on fault					

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HMICFRS report page ref.	ltem	Issue	Our actions and/or response	Lead Director / Statutory Officer	Lead Officer	Timescale		Cross-reference to other plans and documents	Remarks
		updates and welfare support is put in place.							
			i) following the current monthly meeting between the Group Manager (Fire Control and Comms.) and the mobilising system supplier's SDM a communication will be sent to the Area Manager (Response), the FCR Middle Manager Group and the FCR Watch Management Teams to inform them of any issues, P1/P2/P3 fault progress, and upcoming changes/hot fixes;	ACFO – Service Delivery	Group Manager (Fire Control and Comms.)	30 Sep 23	✓		Update 14 Sep 23: Updates commenced 14 Sep 23.
			ii) for 'critical' (P1) and 'major' (P2) faults where additional reporting/meeting arrangements are put in place, details of these meetings will be sent to all interested parties following the meeting, so all FCR staff are aware of the latest position and projected hot fix deployment date; and			31 Oct 23	✓		Update 03 Jul 23: P1/P2 reporting arrangements as part of the daily meeting reports sent into the FCR. It will be embedded within guidance/General Information (GI) pages as part of the BCM review being undertaken with the Business Continuity & Resilience Manager.
			iii) a FCR User Group is established consisting of the Station Manager (Control) (Training and Improvement), Systems Manager and representatives from the four FCR Watches with the terms of reference set to take a holistic view of the mobilising system from an end users' perspective; this information can then be fed back to the mobilising system supplier, where relevant, via the SDM.			30 Nov 23			Update 30 Aug 23: Communication sent to the Watch Management Teams informing them of the user group which will be set up and to ask for a representative from each FCR Watch. Update 11 Sep 23: Inaugural meeting scheduled for 11 Oct 23. Update 05 Oct 23: Meeting agenda has been circulated to the group in preparation for the meeting on 11 Oct 23. Update 11 Oct 23: Inaugural
									meeting held, minutes and actions stored in the G:\ drive. Update 16 Nov 23: The Terms of Reference for this group were determined at a FCR user group meeting on the 11 Oct 23:

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									"AK set the terms of reference for the group, which is: to take a holistic overview of the mobilising system from an end users' perspective and to provide updates regarding the ongoing work between Avon Fire and Rescue Communications Department and [the supplier]." These minutes are stored on the G:\ drive within the ACoC evidence folder.
			In consultation with the Control and Communications Team and the FCR User Group, explore what additional welfare/wellbeing support can be established in addition to the current Service wellbeing provision; for example, this may include: i) thresholds for proactive welfare support based on the type and/or frequency of faults; ii) thresholds for reactive enhanced welfare support; iii) temporarily over-crewing each shift by one, when resources allow; and/or iv) health & wellbeing training for FCOs; v) health & wellbeing conversation training for all managers.	ACFO – Service Delivery	Health, Safety, Wellbeing & Fitness Manager	30 Nov 23			Update 11 Sep 23: Health, Safety, Wellbeing & Fitness Manager has been invited to the FCR User Group meeting on 11 Oct 23. Update 31 Oct 23: Reps. from the HSW team will be attending the next FCR User Group meeting on 09 Nov 23 to discuss additional wellbeing support in relation to the system issues. Also, contact will be made with the FCR Watch Managers to meet each FCR Watch to discuss wellbeing of FCR staff. Update 09 Nov 23: HSW representative attended the FCR User Group meeting and discussed with the group the services available to staff as well as asking the Watch representatives what support they would like specifically. Watch representatives will take this back to their respective watches to discuss. In addition, the Watch representatives will supply the HSW team within the next week a date for them to come and speak to the Watches and discuss in detail the wellbeing support available and how this can be tailored to the Watches' specific needs and requirements.

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								Close monitoring of system issues by Control middle managers and enhancing the shift numbers if required. Due to the infrequent occurrences of system crashes this has not been required but will continue to monitor and react accordingly. Update 20 Nov 23: Watch representatives from the FCR User Group are liaising with their teams to schedule the input sessions with HSW team. Red Watch has a date confirmed; reminder sent to the other Watches with the circulation of minutes and actions from the meeting on 09 Nov 23 to make contact with HSW to arrange. All FCR middle managers received tailored input in Q1 2023 from the HSW team manager on TRiM process and how FCR flexi-duty officers can support Control Staff from a welfare perspective when dealing with distressing / difficult situations. It was discussed at the last FCR User Group that the group is a permanent group and will continue indefinitely. This will ensure the FCR Watches and middle managers maintain good communications and proactive welfare support is considered when required and reactive support is provided for every occurrence. Staff welfare is a standing agenda item and is considered at the time of need and not just when the group meets monthly.

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