

Report of the Head of Operations Support

6. Regional Health and Safety Audit of Hereford & Worcester Fire and Rescue Service

Purpose of report

1. To inform the Audit and Standards Committee of the outcomes of the CFOA West Midlands Regional Health and Safety Audit undertaken in January 2015.

Recommendations

It is recommended that the Audit and Standards Committee agrees the actions taken by the Health and Safety Committee following receipt of the CFOA Regional Audit in discharging the report recommendations.

Background

2. Hereford & Worcester Fire and Rescue Service (HWFRS) are currently working within the region on matters of health and safety via the Chief Fire Officers Association (CFOA) West Midlands Regional Health and Safety Committee.
3. During 2014, the Regional Committee commissioned a piece of work to introduce an Inter-Fire and Rescue Service Health and Safety Management Audit Protocol. The protocol allows each Fire and Rescue Service (FRS) within the region to share resources for health and safety auditing and provides an opportunity for peer challenge which is a proven tool for improvement and shared learning. This type of challenge demonstrates a strong commitment towards health and safety management, exhibiting greater accountability and transparency.
4. The protocol has been designed to give each FRS the opportunity to review areas they feel would be worthwhile being audited against, building upon firefighter safety. Within the protocol are 14 key areas covering the most common hazards and each FRS has the autonomy to select two areas in which they would like to be audited.
5. In January 2015, HWFRS became the first FRS within the region to undergo the audit with the two areas being:
 - Personal Protective Equipment (Firefighting PPE)
 - Water Rescue
6. These areas were selected based on historical operational activity and on recent investigations carried out by internal Specialist Investigators. (SI)

Audit Findings

7. The audit team found a clear commitment to health and safety at all levels and evidence of a positive health and safety culture. All personnel were welcoming, had a positive outlook and fully engaged in the audit process.
8. The audit found that HWFRS is performing well in the areas audited but also identified certain areas that could be improved leading to the audit team making 12 recommendations. (Appendix 1).

Further Actions

9. The 12 recommendations made by the audit team have now been considered by the Health and Safety Committee and have been allocated to individual managers for action.
10. The progress against the recommendations is now being tracked and a further report will be presented to the Health and Safety Committee in September 2015 to gain agreement of completion.

Conclusions

11. The CFOA West Midlands Regional Health and Safety Audit has concluded that the Service is performing well but has also identified areas for improvement and gives 12 specific recommendations relating to the two work areas audited.
12. The recommendations are now being actioned and will be tracked and monitored by the Health and Safety Committee to ensure completion.

Financial Considerations

Consideration	Yes/No	Reference in Report i.e. paragraph no.
There are financial issues that require consideration	No	

Legal Considerations

Consideration	Yes/No	Reference in Report i.e. paragraph no.
There are legal issues e.g. contractual and procurement, reputational issues that require consideration	No	

Additional Considerations

The table below sets out any additional issues arising from the proposals contained in this report and identifies the relevant paragraphs in the report where such issues are addressed.

Consideration	Yes/No	Reference in Report i.e. paragraph no.
Resources (e.g. Assets, ICT, Human Resources, Training & Development, Sustainability).	No	
Strategic Policy Links (e.g. IRMP, Authority Plan, Equality & Diversity, Partnerships, Environmental Impact).	No	
Risk Management / Health & Safety (e.g. risk management and control measures, risk register score).	Yes	See - 12 recommendations (Appendix 1)
Consultation with Representative Bodies	Yes	

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Appendix 1 CFA Regional H&S Audit Recommendations

No.	Recommendation	Assigned to:	Actions & Progress (Detail & Date)	Status
1.	The dust mask guidance does not reflect the current operational practice. In particular there appeared to be a misunderstanding on the protection that is being provided by the comfort wear arrangements that are in place. The review of the available guidance and development of operational practice needs to be reviewed.	Ops Policy & Ops Logistics GC Palmer/Sherry	Review/Revise current SPI and level of PPE – Create a specific policy for respirators to include levels of RPE/PPE	Open
2.	The evidence provided during the audit suggested that training for the use and maintenance of PPE had been omitted from the Phase 1 development module for trainee firefighters.	Training Centre GC Lown	Introduce/cover during Phase 1 course	Open
3.	The PPE checks carried out by Bristol should include PPE used by flexi duty officers and non-station based personnel.	Ops Logistics GC Sherry	Introduce a six monthly check at Command Group meetings	Open
4.	There are many documents that appear to be outdated and overdue for review. This isn't unique to a particular type of document but was seen in policies, procedures, guidance notes, risk assessments and PowerPoint presentations/training materials.	Ops Assurance GC Marshall	Review with department heads as part of the information management strategy to ensure monitoring checks are in place	Open
5.	Where documents require dates, names or signatures, these are often missing. Where a review date is indicated, it is unclear if it refers to the review being due or being completed. The addition of	Health & Safety GC Palmer	H&S Advisor to update forms accordingly	Open

	a word or two would improve clarity.			
6.	Interdependencies need to be identified, to enable assessment of the impact of new, reviewed and amended documents and to ensure the availability of a single version. In some cases, there isn't a standard document used, for example, the crew record form, which is inconsistent in recording checks carried out on PPE.	Service Delivery & Ops Logistics GC Sherry / AC Ball	Create Standard Crewing sheet to include recording of PPE checks	Open
7.	When changes are made, all relevant groups/sites need to know. An example of this was a recent communication for personnel to complete the PPE training package. There are two live versions of this package, on different SharePoint sites. Personnel may have reviewed the wrong version. Consideration should be given to ensure there is only one live version available. Some evidence was found of local records being developed in addition to corporate systems. This loses control but also creates work for personnel, as they acknowledge it is difficult to keep their local records up to date	Ops Assurance GC Marshall	Audit required by assurance GC to evaluate document management within all departments – findings to influence future information management strategy. Ops Logistics to remove current PPE PowerPoint hosted on their internal SharePoint site	Open
8.	Opportunities exist to take a more holistic approach to reviewing documents when improvements have been identified. For example, accident investigations, debrief outcomes and audits may make recommendations for improvement. The opportunity could be taken	Ops Policy GC Palmer	Tier three debrief to include a check of current Service literature - post review, all documentation to be updated and signed off by AC responsible for tier three debrief	Open

	to also review related documents, policies, risk assessments and training material to extend the 'review date'.			
9.	Opportunities exist to streamline some risk assessments. For example, different stations carry out their own assessments of training venues. The potential exists for multiple assessments for each venue, possibly with different information and risks contained within.	Health and Safety GC Palmer	Create a single SharePoint site for Risk Assessments	Open
10.	Communication of the temporary risks at training venues appears good within the individual station, but consideration needs to be given to wider sharing of this information with other stations that also use the same venue.	Service Delivery & Training GC Lown / AC Ball	When created host training RAs for training venues on the Risk Assessment SharePoint site	Open
11.	Risk assessments and procedures should be readily available to all personnel; therefore consideration should be given to storing these documents in a shared library.	Health and Safety GC Palmer	Create a single SharePoint site for Risk Assessments	Open
12.	A risk register has been created in relation to reviewing out of date procedures with a plan to review these over 3, 6 or 9 months. However this is not necessarily being adhered to.	Ops Assurance GC Marshall	Monitor and update SMB directorate lead	Open