

**OPERATIONAL RESPONSE**

**FUNCTIONAL PLAN**

**ACTION TRACKER 2024/25**

**Our Purpose:**

HERE TO SERVE. HERE TO PROTECT.

HERE TO KEEP YOU SAFE.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Action Plan 2024/25** | | | | | | | | | | |
| **KEY DELIVERABLE** | | **ACTIONS TO ACHIEVE EXPECTED OUTCOMES** | **OWNER** | | **PROGRESS** | | **PROJECTED COMPLETION DATE** | | **BOARD REPORT DATE** | **BRAG STATUS** |
| **2.1 Enhance Appliance Availability & Efficiency –** We will review current appliance ridership arrangement in order to enhance appliance availability and productivity | | 2.1.1Review degradation of appliances in line with staffing levels and impacts on productivity via internal stakeholders. | Group Manager Response | | **Apr – Jun**  Staffing guidance reviewed and appendices updated around degradation of appliances after consultation with Time and Resource Management (TRM). Improvements in productivity at end of Functional Delivery Plan (FDP) 2023/24 noted around training, exercising and station-based performance to continue into FDP 2024/25. | | Qtr 1 |  | |  |
| 2.1.2 Embed and evaluate AURA dynamic cover tool to allocate resources effectively. | **Apr – Jun**  The latest version of AURA was released on 1st May 2024 to cover all fixes and improvements.  The main feature change being changes to station boundaries for Aintree (Long Lane) opening and the closure of Croxteth and Aintree. Along with remedial work for media wall configuration changes.  The project team visited Fire Control to conduct initial testing for media wall changes to AURA. However, due to performance issues with media wall and the need for new software this will be re-arranged once the new capture cards are received (see 2.2.1). | | Qtr 2 |  |
| 2.1.3 Explore alternative appliance ridership levels and mobilisation allocation in line with incident types. | **Apr – Jun**  Deliverable will be explored as part of CRMP project utilising appliance availability data. | | Qtr 3 |  |
| 2.1.4 Use the findings from 1.1/1.2/1.3 to embed new ways of working and enhance appliance availability and productivity. |  | | Qtr 4 |  |
|  | | | | | | | | | | |
| **2.2 Enhanced Mobilisation –** Embed new technologies within Fire Control to enhance the efficiency and effectiveness of operational response to incidents. | | 2.2.1 Work with internal and external stakeholders to implement redesign of Fire Control to support use of new technologies. | Station Manager Fire Control | | **Apr – Jun**  Redesign of Fire Control completed on 11th March 2024.  Some issues with the media wall and in dialogue with suppliers regarding the performance of the videowall software and PC. The media wall requires a software update and new capture cards. Currently the media wall is displaying AURA, National Resilience and news channel.  Telent received new capture cards and attended Fire Control to set them up on the Media Wall. However, it didn’t support the other applications. EGT, drone footage, MAIT and Vision 5 Stateboard. Telent gone back to suppliers to discuss further options. | | Qtr 2 |  | |  |
| 2.2.2 Develop timeframe for implementation of Enhanced Mobilisation across operational assets and identify trial stations | **Apr – Jun**  •Enhanced Mobilisation will form part of a Vision 5 software release 5.36  •5.36 Development begins in June with a testing release date of October  •Go Live Provisionally scheduled December 2024/January 2025  Meeting with FBU arranged for 19th July. | | Qtr 2 |  |
| 2.2.3 Introduce Enhanced Mobilisation across all MFRS locations to improve efficiency and effectiveness of operational response |  | | Qtr 3 |  |
| 2.2.4 Complete Assurance in use of new technologies within Fire Control and through Operational Assurance utilising mobilisation data from Strategy and Performance |  | | Qtr 4 |  |
|  | | | | | | | | | | |
| **2.3 Specialist Asset and Cross Border Training –** Evaluate the staffing and mobilisation arrangements of our specialist station assets to improve operational response to specific incident types and incorporate a structured training and exercising framework for cross border working arrangements. | | 2.3.1 Review and evaluate current PDA for Specialist Station Assets making suitable recommendations. | Group Manager Response | | **Apr- Jun**  Internal working group established with key stakeholder membership. Group has reviewed current Pre Determined Attendance (PDA) for specialist station assets, starting with the Hazardous Materials Environmental Protection Unit (HMEPU) at St. Helens and Incident Command Unit (ICU) at Liverpool City. Possible recommendations have been discussed, including:   * No change * Complimentary crewing * Wholetime crewing * Other alternatives   Marine Specialist capability at Wallasey and Crosby has been fully established. PDA recommendation includes:   * Increase from 3 to 4 pumps * 4th appliance will be mobilised from Wallasey or Crosby and be dedicated Marine Specialist roles. * MRSU will remain on Retained Recall.   Seatruck Exercise taking place on 24th June will incorporate new PDA test. | | Qtr 1 |  | |  |
| 2.3.2 Following evaluation, implement any recommendations for new or necessary changes to PDA/mobilising of Specialist Station Assess. |  | | Qtr 2 |  |
| 2.3.3 Expand knowledge & understanding of cross border working practices via the regional cross border group and collate/share learning across our Service. |  | | Qtr 3 |  |
| 2.3.4 Develop structured training and exercising framework with cross border services to evaluate knowledge & understanding and improve collaboration. | **Communication Alignment**   * Correspondence was dispatched to all station managers overseeing cross-border stations. The communication aimed to update them with the key deliverables from the functional plan 2024-25.   **Strategy Meeting**   * A face-to-face meeting was conducted with cross-border station managers. The agenda covered a range of topics including operational strategies, shared challenges, and potential solutions to enhance cross-border cooperation.   **Performance Review/Update**   * Station managers received performance data from the previous year. This data provided insights into operational efficiencies and areas requiring improvement. * In response to feedback, we've established a quick link on all station Portal pages to enhance user-friendliness when accessing cross-border information. This improvement aims to streamline the process and provide a more efficient experience for users. | | Qtr 3 |  |
|  | | | | | | | | | | |
| **2.4 One Team –** We will support Culture and Transformation in accordance with the outcomes of the most recent HMI report and enhance knowledge, understanding and application for station-based staff. | | 2.4.1 Evaluate Positive Action Station Performance Output 2023/24 delivered via Off Station Recruitment Days, Have a Go Days and Community Station Open Days | Group Manager Response | | | **Apr – Jun**  Evaluation of 2023/24 figures completed. Evaluation highlighted the following:   * Station Open Days - All complete bar station 21 Bromborough (due to pending refurb)   Positive Action Recruitment Events   * Completed events - **24.** * Total Registered Details Collected at these Events - **221.** * Protected Characteristics Collected **36%.**   District Have a Go Days:   * **5** completed. * **74** Attendees. * **32%** of which were people with Protected Characteristics   Station Open Days   * Completed – 21 (not Bromborough due to refurbish)   Positive results realised in relation to station outputs/performance.   * 24% increase in applicants compared to 2023 * 243 extra candidates compared to 2023 * 43% increase in female applicants compared to 2023 * 47 extra female applicants compared to 2023 * Highest proportion of female candidates in last 4 processes * 8.5% increase in non-white British/Irish compared to 2023 | Qtr 1 |  | |  |
| 2.4.2 Embed significant changes and learning from evaluation of Positive Action Station Performance Output 2023/24. | **Apr – Jun**  Yearly quarterly planner has been produced and distributed to stations to help with appliance availability. To be uploaded on Portal.  Standardised workflow documents have been produced. Service Instruction (SI) and Equality Impact Assessment (EIA) to be finalised, this will include risk assessment procedure. | Qtr 2 |  |
| 2.4.3 Support development of Culture and Transformation strategy in line with review of the outcomes of the most recent HMI report. | **Apr – Jun**  Operational Crews have been collecting details of local businesses, schools, charities, sports centres, etc whilst engaged in promoting their Positive Action Community Events. View to utilise contacts to build stronger relationships within communities through distribution lists. | Qtr 3 |  |
|  | | | | | | | | | | |
| **2.5 Increase number of appliances –** We will explore options to expand our appliance from 32 to 34 | | 2.5.1 Work with People and Organisational Development (POD) to identify retained contact holders and locations across the Service | CRMP Group Manager | | | **Apr-Jun**  Work has been on-going to keep an up to date list of the current 224 retained contract holders. Whilst the CRMP has not started until July then work will continue to keep the list up to date as required. | Q1 |  | |  |
| 2.5.2 Work with internal stakeholders to carry out analysis on impacts of increasing appliance fleet to 34. | **Apr-Jun**  Dialogue between the rep bodies has begun and meetings are scheduled to progress the response actions. Workshops have been updated on the need for additional appliances. Work continues on identifying the new specialist vehicles for the two stations where the 33rd and 34th appliances will be housed. | Q2 |  |
| 2.5.3 As part of fire cover review, explore possible locations for appliances and staffing options. | **Apr-Jun**  Stations 15 and 16 have been highlighted as the possible locations for the two retained appliances to be housed. | Q3 |  |
| 2.5.4 Present report to board with findings and timescales of implementation. | **Apr-Jun**  A presentation has been drafted and presented to the Assistant Chief Fire Officer (ACFO) who has approved. Presentation will be shared with the response AM with a view to taking to next Ops Board | Q3 |  |
|  | | | | | | | | | | |
| **2.6 Project Manage CRMP Objectives –** We will utilise the response Community Risk Management Plan (CRMP) planning Manager to develop and progress a suite of identified projects in line with the 2024/27 CRMP. | | 2.6.1 CRMP Planning Group Manager (GM) to compile Projection Initiation Documents (PIDs) and associated paperwork for Operational Response CRMP projects. | CRMP Group Manager | | | **Apr-Jun**  Project Initiation Documents (PIDs) have been submitted to Strategy and Performance. They will be updated during the course of the year. | Q1 |  | |  |
| 2.6.2 CRMP Planning GM to formalise from PIDs each CRMP Operational Response project, establishing roles and responsibilities. | **Apr-Jun**  Work continues to look at the next steps for the proposed Community Risk Management Plan (CRMP) response actions. Meetings are planned with Rep Bodies to progress with view to running pilots for each project. | Q2 |  |
| 2.6.3 CRMP Planning GM to oversee effective management of Operational Response CRMP Projects. | **Apr-Jun**  Work continues to look at the next steps for the proposed CRMP response actions. Meetings are planned with Rep Bodies to progress with view to running pilots for each project. | Q3 |  |
| 2.6.4 CRMP Planning GM to provide a quarterly progress overview and end of year overview to the Operations Board. | **Apr-Jun**  Update was given at Ops Board on 23/05/24. Further updates will be provided as requested. | Q4 |  |
|  | | | | | | | | | | |  |
| 2.7 **Reduce Exposure** – We will enhance our procedures to provide the most current information, instruction, and training for reducing exposure to Firefighter contamination from toxic fire effluents. | 2.7.1 Embed the dedicated Station Manager B (SMB) within the Firefighter Contaminants project supporting our regional commitment to deliver against the National Fire Chiefs Council (NFCC) nine key areas. | | | Group Manager Health and Safety | | **Apr – June**  SM (Station Manager) role impacted by SM changes. Liaison with People and Organisational Development (POD) to run temporary appointment process for SM Development to fulfil role (13th June) | Q1 |  | |  |
| 2.7.2 Explore new equipment, practices and procedures as informed by the outcomes of the regional group and the local Contaminants working group. | | | **Apr- June**  Learning gathered from regional group has informed changes to:   * Issue of additional flash hoods for stations. * Helmets on trial at Kensington for non-structural incidents to reduce frequency of wear. * Enhanced E-Learning around kit care including senior officers.   Station zoning exercise completed for all stations – plans now drawn up. Awaiting research and development exercise via Estates to provide signage/placards denoting zones. Service to be aligned to RAG principles in conjunction with clean at scene.  External testing for efficacy of flash hoods awaiting results.  Disrobe/Decon zone at TDA BA has been requested – to be discussed with Estates. | Q2 |  |
| 2.7.3 Implement best practice through amendment of policy and procedures in tandem with associated stakeholder parties. | | | **Apr-June**  Service Instruction to be reviewed once station zoning complete – to be presented for consultation once achieved.  Continued work against Training and Competence as part of the regional workstream. MFRS responsible for aligning training packages to apprenticeship standards. Awaiting phase 2 report and National Fire Chiefs Council (NFCC) Toolkit.  Informed of April 2025 Health and Safety Executive (HSE) inspections – information requested from HSE. | Q3 |  |
| 2.7.4 Implement and introduce training, equipment, information, and instruction in relation to protection from contaminants. Ensure work is underway/completed in respect of capital assets (fire stations/TDA). | | | **Apr-June**  Service Instruction to be reviewed once station zoning complete – to be presented for consult once achieved.  E-Learning now updated to reflect kit care – further package will be required for station zoning. | Q3 |  |
|  | | | | | | | | | | |
| **2.8 Oshens System –** Explore and utilise various applications on the Health and Safety market to improve or replace the current Health and Safety recording system. | 2.8.1 Summarise feedback from users and stakeholders associated with the current OSHENs system | | | Group Manager Health and Safety | | **Apr – June**  Feedback from internal stakeholders and users has identified that the OSHENS health and safety management system offers limited capability against other market competitors. Meeting held with supplier to discuss ownership of editing rights, ability to make changes, end of contract clauses and general in-service care. | **Q1** |  | |  |
| 2.8.2 Conduct a horizon scanning exercise across other FRS and comparable industry to seek best solutions. Consider wider implication of best fit for preparation to align to ISO 45001. | | | **Apr- June**  Aligned considerations of potential systems to Learning Management System project. GMFRS’ Maintenance of Competence (MOC) system appears to reflect the needs of MFRS. Contacted GMFRS for demo/information. | **Q2** |  |
| 2.8.3Undertake financial implications exercise and consider practicalities of retraining the workforce. Plan for transfer of existing data and information in respect of retention periods. | | | **Apr – June**  Organisational understanding that funding is reserved for the implementation of a new system (c/o Head of Data and Technology) | **Q3** |  |
| 2.8.4 Seek to obtain/purchase a new system with governance from the respective boards and affected parties. | | |  | **Q4** |  |
|  | | | | | | | | | | |  |
| **2.9 Subsurface incidents –** Explore the expansion of our Operational Response to subsurface incidents and other life risk water related incidents. | 2.9.1 Carry out a SWOT analysis for options explored in methods of conducting subsurface rescue. | | | Group Manager | | **Apr-Jun**  Station Manager continues to work on the SWOT analysis and updates will be provided when they are required. | Q1 |  | |  |
| 2.9.2 Generate a comprehensive cost analysis and training competency matrix for submission to the Operations Board regarding the options outlined in section 9.1 | | | **Apr-Jun**  A working group has been established and actions for different departments have been given for the costings to be looked at. Update will be provided to Ops Board once this is in place. | Q2 |  |
| 2.9.3 Using the research and data analysis, present an Operations board paper to advance the exploration of the subsurface rescue team. | | | **Apr-Jun**  This work is on-going and an update on the costs and workings of the team will be provided so a decision can be made on progress of this initiative. | Q3 |  |
| **BRAG Descriptor** | | | | | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Action completed** | **Action is unlikely to be delivered within the current functional delivery plan** | **Action may not be delivered by the designated deadline within the functional plan** | **Action will be delivered by the designated deadline within the functional plan** | **Action not yet started** |

|  |  |
| --- | --- |
| **STATUS SUMMARY – 30.06.24** | |
| **Total Number of Workstreams** | **34 (100%)** |
| **Action completed** | **0 (0%)** |
| **Action is unlikely to be delivered within the current functional delivery plan** | **0 (0%)** |
| **Action may not be delivered by the designated deadline within the functional plan** | **0 (0%)** |
| **Action will be delivered by the designated deadline within the functional plan** | **0 (0%)** |
| **Action not yet started** | **0 (0%)** |