2019

Northamptonshire Fire and Rescue Service

SERVICE IMPROVEMENT PLAN IN RESPONSE TO HMICFRS RECOMMENDATIONS

VERSION 1.0

Introduction

Northamptonshire Fire and Rescue Service (NFRS) is committed to our vision of Making Northamptonshire Safer. This Service Improvement Plan has been created to ensure that we address the areas of concern and recommendations, which were highlighted during a recent HMICFRS inspection of NFRS.

NFRS was inspected by HMICFRS in November 2018 while under the governance of Northamptonshire County Council (NCC) Fire Authority. Overall, NFRS was graded as requires Improvement. Below are the three inspection areas and the grades that were given under each of the question criteria:

The HMICFRS inspection was based around three questions:	EFFECTIVENESS	REQUIRES IMPROVEMENT
1. How **Effective** is the fire and rescue service at keeping people safe and secure from fire and other risks?	Understanding the risk of fire and other emergencies	Good
	Preventing fires and other risks	Requires Improvement
	Protecting the public through fire regulation	Requires Improvement
	Responding to fires and other emergencies	Inadequate
	Responding to national risks	Requires Improvement
2. How **Efficient** is the fire and rescue service at keeping people safe and secure from fire and other risks?	EFFICIENCY	REQUIRES IMPROVEMENT
	Making best use of resources	Requires Improvement
	Making the fire and rescue service affordable now and in the future	Requires Improvement
3. How well does the fire and rescue service look after its **People**?	PEOPLE	REQUIRES IMPROVEMENT
	Promoting the right values and culture	Good
	Getting the right people with the right skills	Inadequate
	Ensuring fairness and promoting diversity	Requires Improvement
	Managing performance and developing leaders	Requires Improvement

The findings of this inspection also highlighted two causes for concern and two recommendations in relation to responding to fires and other emergencies, and getting the right people with the right skills. Both of these areas were graded as inadequate by HMICFRS.

EFFECTIVENESS - <u>**Responding to fires and other emergencies**</u>

Cause of concern – *'We have serious concerns about Northamptonshire FRS's ability to respond to incidents. The service consistently doesn't have available its minimum number of fire engines. Senior managers are not routinely told when this happens.'*

Recommendation
- The Service should improve its process for monitoring the number of fire engines available, so that senior managers can make effective decisions

PEOPLE - <u>**Getting the right people with the right skills**</u>

Cause of concern - *'Northamptonshire FRS needs to ensure that it has systems in place to effectively provide, record and monitor risk-critical training.'*

Recommendation
- By September 2019, the Service must ensure that it provides, assesses and accurately records suitable operational training and that all operational staff have the proper risk-critical skills

NFRS has taken these areas of concern very seriously. To support greater transparency, this document provides a detailed plan in how the Service intends to address these issues to make Northamptonshire a safer place.

This plan supports our current Integrated Risk Management Plan and the Police, Fire and Crime Commissioner (PFCC) Fire and Rescue Plan; both of which can be found on our website.

We will continuously monitor the progress of this Service Improvement Plan through our internal scrutiny functions as well as reporting to the PFCC scrutiny boards.

Progress to date

The Service were informed of the two areas of concern on 14 March 2019, asking the Service to submit an action plan setting out how we would address these causes of concern. The Service then developed an internal action plan which was shared with the HMICFRS inspection team.

NFRS requested that the HMICFRS inspection team revisited the service in June 2019 to view progress against the action plans. It was noted within the revisit letter:

"The Service has detailed action plans which have senior responsible owners, deadlines and specific action owners. We found appropriate governance structures within the Service and through the PFCC who scrutinise progress. We believe the service and its senior managers now have a better understanding of the problems, helped by better data. This helps decision-making and allows for better monitoring. Overall, we are encouraged by what we found on our revisit. Although the service has more to do in relation to both causes of concern, it has made significant improvements".

A copy of the HMICFRS Inspection Report and the revisit letter can be found [here](#).

This revisit was after governance had changed from NCC to the PFCC. The Service had also restructured to provide greater strategic focus around these particular areas. This is presented in the following governance structure, demonstrating how accountability and scrutiny has been enhanced.
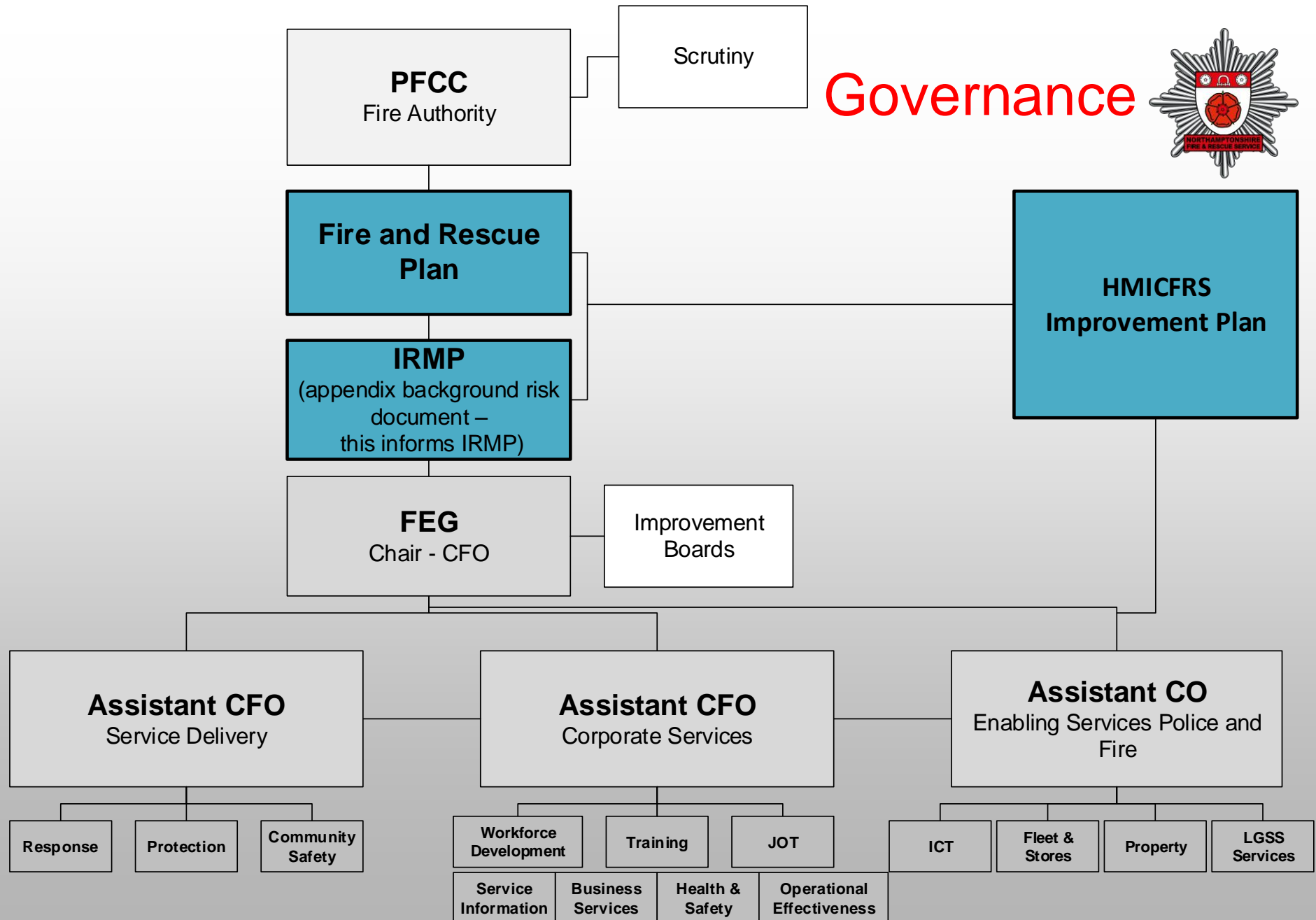
Fire Cover Improvement Action Plan

Below are the actions that we have identified as part of our improvement against the Cause for Concern relating to our ability to respond effectively to incidents. The Senior Responsible Owner for this plan is the ACFO Service Delivery who is happy to report that many of these actions have now been completed and our progress against those that are still open are on track. We monitor this action plan through regular improvement boards. The plan is monitored through various other boards via the Office of PFCC including the monthly Accountability Board.

EFFECTIVENESS - **Responding to fires and other emergencies**

Cause of concern – '*We have serious concerns about Northamptonshire FRS's ability to respond to incidents. The Service consistently does not have available its minimum number of fire engines. Senior managers are not routinely told when this happens.*'

Recommendation
- The Service should improve its process for monitoring the number of fire engines available, so that senior managers can make effective decisions

NFRS RAG Rating Guide		
Red	**Amber**	**Green**
Action within the Plan is experiencing issues which may affect the success of completing against the specified timeframe	Action within the Plan is progressing well against the specified timeframe	Action is completed against the specified timeline

Fire Cover action plan:

Objective: Ensure Minimum Fire Cover is maintained and managerial action in response to reduced appliance availability is consistent.

Action: FC1: Implement new Standards of Operational Response (SOR) and Fire Cover Model.

Ref:	Details	Deliverables	Due date	Owner	Status	RAG (Red - Overdue/ Amber - In Progress/ Green Completed)
FC 1.1	Agree Standards of Operational Response (SOR)	SOR Embedded within draft IRMP 2019-2022	31-Jan-19	ACFO Service Delivery	Completed	
FC 1.2	Establish minimum level of fire cover with the public.	Minimum number of pumps set at 14, included within public consultation of IRMP 2019-2022	31-Jan-19		Completed	
		Police, Fire and Crime Commissioner supports setting a minimum standard of 14 appliances, presented to Accountability Board.				
FC 1.3	Public Consultation on revised IRMP 2019-2022 that introduces changes to Standards of Operational Response and sets a minimum standard of Fire Cover.	Effective Consultation process that captures a wider stakeholder view of proposals.	31/03/2019		Completed	
		Consideration of public feedback on proposals.				
FC 1.4	Fire Authority Approval of Post Consultation IRMP 2019-2022	Post Consultation Review of IRMP/ Changes at Accountability Board. Including formal decision in approving the IRMP 2019/2022.	02-Apr-19	CFO	Completed	
		Police and Crime Panel Scrutiny of PFCC Decision on approving IRMP 2019-2022	04/04/2019		Completed	

Action: FC2: Confirm Fire Cover Model and Organisational Response to appliance availability

Ref:	Details	Deliverables	Due date	Owner	Status	RAG (Red - Overdue/ Amber - In Progress/ Green Completed)
FC 2.1	Publish Fire Cover Review	Internally published report to support evidence base around Fire Cover Review. Report to consolidate Fire Cover Review and develop wider understanding of county risk profile and Fire Cover Model.	(Date updated from the 31/05/2019) **30/06/2019**	ACFO Service Delivery	Completed	
FC 2.2	Confirm organisational action in response to reduced appliance availability.	Embed the Fire Cover Model to promote awareness of appliance availability, where a local response is available or if the service is managing cover strategically, and confirm action when resources go below a minimum. This will link the degradation plan and strategic locations to ensure spatial coverage.	30-Apr-19		Completed	
		Agree Fire Cover Model with OOD's to ensure consistent action.	30-Apr-19		Completed	
		Embed Model within ServiceMobilising Policy (B1).	31-May-19	Operations Manager	Completed	
FC 2.3	Enhance notifications of predicted and actual appliance availability to ensure managerial response to Fire Cover Issues.	RMC to provide weekly forecast of appliance availability to show hourly coverage. To enhance organisational awareness of strategic fire cover and promote managerial action. This also raises awareness of organisational resilience at different times of the day.	31-Jan-19	RDS & RMC Review Manager	Completed	
		To ensure that the OOD is informed when appliances < 14 as per service mobilising policy (B1). RDS & RMC Review Manager to monitor to ensure this is happening.	30-Apr-19		Completed	
		Embed within the Fire Cover Model organisational action if appliance availability becomes critical, i.e. if less that 10 for more than 2 hrs. Notification to be made to duty Gold/ CFO/ Duty PO. Consideration of declaring a critical incident. Ensure accountability Board update, performance board and debrief.	31-May-19	ACFO Service Delivery	Completed	
		Ensure that Officer Group (Duty Gold/ OOD) review predicted availability on a weekly basis, and respond to actual availability in a consistent manner.	31-May-19	AM Operational Support	Completed	
FC 2.4	Review structure of Resource Management Function to provide greater oversight of fire cover issues, RDS availability and predicted Fire Cover.	Realign Group Managers to provide greater oversight over RMC Function.	30/03/2019		Completed	
		Review the use of CRG Watch Managers to provide additional Fire Cover and support the RDS staff, particularly around predicting availability.	(Updated from the 31/05/2019) **30/07/2019**	ACFO Service Delivery	Completed	
		Implement new duty system for CRG WM's to provide enhanced RDS support and weekend managerial availability around Fire Cover and support weekend (Bank availability)	31/10/2019	AM Response	Open	
		Define the RMC Function to ensure clarity of role within the organisation.	31/05/2019	AM Response	Completed	

Action: FC3: Develop resilience arrangements to ensure minimum Fire Cover is maintained.

Ref:	Details	Deliverables	Due date	Owner	Status (Open/closed/ proposed)	RAG (Red - Overdue/ Amber - In Progress/ Green Completed)
FC 3.1	Review the Bank System to provide broader skill base and more flexible options around staff availability during the week and at weekends.	Review costing model for Bank to align to Grey Book conditions.	07-Apr-19	ACFO Service Delivery	Completed	
FC 3.1a		Establish a trial to recruit a resilience crew for a 6 month period to structuralise the bank model to enhance organisational resilience.	31/10/2019	ACFO Service Delivery	Open	
FC 3.2	Establishing crewing model to improve 07:00-09:00 and 17:00-18:00 availability.	Review close proximity crewing viability.	31-May-19	AM Response	Completed	
		Trial Split Bank Shifts 07:00 - 13:00, 13:00 - 19:00. Review costing model.	31-May-19		Completed	
		CRG Station Managers to review P11D's, liaise with RDS staff to address the issue within current policy.	31-May-19		Completed	
FC 3.3	Review Duty System for Daventry and Rushden VCS	Review duty system to provide weekend availability. (Budget requirement)	(Updated from 30/09/2019) **31/01/2020**	AM Response	Open	
FC 3.4	Review RDS Competencies and identify quick wins regarding skills gaps that will have the greatest impact on appliance availability	Prioritise training/ recruitment to provide weekend and daytime availability.	31-May-19	CRG Group Managers.	Completed	
FC 3.5	Formalise mobilising arrangements to enhance organisational resilience for a large scale incident.	Establish model to mobilise all available RDS staff (if not on an appliance) to a central point/ or incident to provide relief/ resilience crew.	(updated from 31/05/2019) **30/06/2019**	ACFO Service Delivery	Completed	
FC3.5a		To embed F3.5 within mobilising policy B1 (post consultation)	31-Aug-19	AM	Open	
FC 3.6	Utilise all On-Call staff to respond to small scale incidents with reduced crew.	Flexi Crewing training rolled out to all RDS sections.	30-Apr-19	AM Response	Completed	
FC 3.7	Enhance resilience by mobilising two Flexi-Crewing pumps to single location to provide an appliance.	Develop Flexi Crewing model for RDS, to converge and provide an additional pump if required.	(Updated from 30/04/2019) **30/06/2019**		Completed	
FC 3.8	Review the RAPPEL policy around booking on and off by using the mobile phone to ensure the Service retains organisational oversight of appliance/ RDS appliance availability.	Ensure notification to control of how long a person will be off in the event of it affecting appliance availability. Managerial action if this puts fire cover below minimum levels. (Date extended to allow for staff engagement)	(Updated from 30/06/2019) **30/09/2019**	AM Response	Open	
FC 3.9	Review the Failure to mobilise process to ensure managerial action is effective in reducing occurrences.	Review the CRG Management action in response to notification from control of a failure to mobilize.	31-May-19	AM Response	Completed	

Action: FC4: Review RDS Model to ensure Fire Cover is sustained.

Ref:	Details	Deliverables	Due date	Owner	Status (Open/closed/ proposed)	RAG (Red - Overdue/ Amber - In Progress/ Green Completed)
FC 4.1	Establish RDS Review	Appoint Project Manager for RDS Review.	30-Apr-19	AM Response	Completed	
		Review current learning/ models across the sector to identify where improvements can be made.	**30-Sep-19**	RDS & RMC Review Manager	Open	
		Establish RDS Working Group/ focus on recruitment/ Retention/ Engagement.	30-Jan-19	AM Response	Completed	
FC 4.2	Consider the option for staged RDS response model.	Review Two stage RDS mobilising arrangements. To ensure immediate response capability and then delayed response capability. (Part of RDS Review)	**30-Sep-19**	AM Response	Open	
FC 4.3	Review RDS Recruitment Campaign/ Material	Establish recruitment campaign that highlights diversity and understanding of the role of a Firefighter.	30/04/2019	AM Response	Completed	
FC 4.4	Review RDS leavers to identify retention issues.	Review exit questionnaires/ length of service and data around RDS staff who have let to identify trends that can inform action.	30/04/2019	IRMP Manager	Closed/ Ongoing	
FC 4.5	Review the use of RAPPEL as a resource management system.	IMSG to review other systems that will provide enhanced forecasting/ flexibility and reporting capability for the RDS model as part of the review.	30/10/2019	ACFO Corporate Services	Open	
FC 4.6	Review the current RDS Pay Model that supports the proportional cover provided, personal impact and enhanced daytime and weekend availability.	Supports the proportional cover provided, personal impact and enhances daytime and weekend availability. (Additional Funding Required)	30/10/2019	ACFO Service Delivery	Open	
FC 4.7	Establish a Fire Cover Improvement Board	To provide greater managerial oversight around wider Fire Cover issues, that will replace the RDS Review working group. To include representative bodies that supports wider negotiation around changes to duty systems, RDS models and managerial decision.	30/08/2019		Open	

Action: FC5: Enhance Performance Information of appliance availability						
Ref:	Details	Deliverables	Due date	Owner	Status (Open/closed/ proposed)	**RAG** (Red - Overdue/ Amber - In Progress/ Green Completed)
FC 5.1	Ensure appliance availability and SOR Performance is embedded within the organisation performance reports.	SOR Performance information embedded within the Score Card	31-May-19	Operational Performance & Information Manager	Completed	
		Appliance availability provided that compares predicted against actual availability.	31-May-19		Completed	
		Accountability Report includes appliance availability/ SOR.	31-May-19		Completed	

Maintenance of Competency Action Plan

The Maintenance of Competency Action Plan was developed initially after a debrief session with the HMICFRS inspection team after the November 2018 visit; the Senior Responsible Owner for these actions is the ACFO Corporate Services. The initial prioritisation of essential action at the outset of this plan has meant that the majority of risk-critical actions are now complete. The actions still outstanding will be completed within the specified timeframe. The plan is monitored through various forums including our Strategic Risk review meeting, improvement board, Fire Executive Group and via the Office of PFCC at the Accountability Board.

PEOPLE - **Getting the right people with the right skills**

Cause of concern - *'Northamptonshire FRS needs to ensure that it has systems in place to effectively provide, record and monitor risk-critical training.'*

Recommendation
- By September 2019, the Service must ensure that it provides, assesses and accurately records suitable operational training and that all operational staff have the proper risk-critical skills

NFRS RAG Rating Guide

Red	Amber	Green
Action within the Plan is experiencing issues which may affect the success of completing against the specified timeframe	Action within the Plan is progressing well against the specified timeframe	Action is completed against the specified timeline

Managing competence action plan:	

Objective: Support station personnel in the management of the MOC framework, ensuring Redkite records are accurate and up to date

Action: MC1: Implement a robust audit process that is linked with a centrally-directed training programme and prioritised on risk critical competences.

Ref:	Details	Deliverables	Due date	Owner	Status	RAG (Red - Overdue/ Amber - In Progress/ Green Completed)
MC1.1	Process to be implemented that directs station and watch managers to conduct a quarterly audit of identified risk critical competences as directed by the Phase 3 team.	First audit with clear instructions sent to CRG station managers (focussing on risk critical competences)	31-Dec-18	ACFO Corporate Services/AM Operational Support	Completed	
		All station managers to have returned first quarterly audit outcomes to Phase 3 team	25-Jan-19		Completed	
		Template to be designed to provide consistency for SM audit returns for ongoing audit processes	26-Apr-19		Completed	
MC 1.2	Quality Assurance process of station manager audit to be undertaken by Phase 3 team in quarter immediately following the station manager audit.	Phase 3 team to have completed QA of SM audit and prepared report highlighting issues requiring action. Report to be shared with CRG Group managers, AM Service Delivery, T&D Manager and AM Operational Support (as well station reports to station manager reports). Report to include: % of audited units that show expired competence, training requirements or approaching expiry (to provide an indication of activity against MOCs); sampling of information recorded against units denoted bright or dark red; sampling to confirm correct enrollment; response to issues identified during audit.	31-May-19	Phase 3 Team	Completed	
		Two year sampling plan for use in ongoing QA of SM audit	30-Sep-19	Phase 3 Team	Open	
MC 1.3	Service-wide training programme to be designed which identifies competences to be trained on for each quarter. Programme to be linked to the ongoing audit process i.e. records for quarterly training will be audited in the following quarter by station managers, and the SM audit to be Quality Assured by Phase 3 team the next quarter.	2 year programme identifying themed training for each quarter	31-May-19	Phase 3 Team	Completed	
		2 year audit programme aligned with Training programme	31-May-19		Completed	
MC1.4	Audit process completion and outcomes to be part of CRG performance management framework	Monthly service standards report to include: confirmation of audit completion by station managers and actions as result of outcomes, monitoring of dashboard on a monthly basis, monitoring that training programme is being followed.	31-May-19	CRG Managers	Completed	
		AM and GM CRG inspections to include review and capture of how MOC issues identified through audit have been addressed	31-May-19	AM Response/CRG Managers	Completed	

	Action: MC2: Publish policy and guidance that clarifies requirements and responsibilities for the management of MOC framework						
Ref:	**Details**	**Deliverables**	**Due date**	**Owner**	**Status**	**RAG** (Red - Overdue/ Amber - In Progress/ Green Completed)	
MC2.1	Overarching Policy and guidance sheets for each competence area to be prepared that clarifies: • which competences are regarded as risk critical and hence impact on operational status of individuals • Who is responsible for overseeing and managing risk critical competences; • Who will make the decision as to whether staff are removed from operational duties based on not maintaining competence in a specific area.	Draft policy sent out for consultation	29-Mar-19	Training Manager	Completed	
		Policy to be included in roll-out of training on the redkite MOC process	31-May-19	Training Manager/Phase 3 Team	Completed	
		policy published	31-May-19	Training Manager	Completed	
		Overview guidance sheets to be prepared for each of the identified core competences that explains how that particular competence is managed on the Redkite system and who is responsible for each assessment. It will also include actions to take when revalidation dates are exceeded for risk critical competencies. ORMG will approve actions on expired comptencies following recommendations from capability groups.	31-May-19	Phase 3 Team	Completed	
		Guidance sheets to be uploaded onto Moodle and included in roll-out of training on the redkite MOC process	31-May-19	Phase 3 Team	Completed	

Action: MC3: Ensure admin processes surrounding the recording of competence are effective

Ref:	Details	Deliverables	Due date	Owner	Status	RAG (Red - Overdue/ Amber - In Progress/ Green Completed)
MC3.1	Ensure that FB47, FB48 and FB 49 arrangements are being correctly processed so that personnel are listed on Redkite against correct locations and enrolled in appropriate competences	Review redkite records at Brackley in direct response to the findings during HMICFRS inspection to ensure that leavers have been removed from the system	31-May-19	Phase 3 Team	Completed	
		Instruct all fire stations to check their redkite records to ensure all personnel are recorded at correct locations and enrolled in correct competences, including the removal of leavers from the system.	31-Jan-19	CRG Managers	Completed	
		Review current FB HR form notifications to ensure the processes are allowing for all T&D requirements, including informing the Phase 3 team of staff moves so that RedkIte can be updated.	31-May-19	Phase 3 Team	Completed	
MC3.2	Review and, where appropriate, removal of unnecessary competence assessments for competences that are assessed centrally.	Following consultation with workstream leads, removal of ACs from system (facilitated by Redkite), and notification sent to all watches and station personnel (to be also included in redkite refresher training programme (MC4.1)). Due date moved as awaiting third party to make amendments	Previously dated as 31/05/2019. Changed to **30/09/2019**	Phase 3 Team	Open	
MC3.3	Review of FB29 process to ensure process is correctly informing redkite records.	Interim improvements through the setting up of a single mailbox for FB29 submissions	08-Feb-19	Training Manager	Completed	
		Investigate potential of workflow system that is fully auditable and supports the process of FB29 recording	31-May-19	Training Manager/ICT	Completed	
		Look to use the course booking system to get central-based instructors to update redkite automatically for central courses, and to implement a reviewed FB29 process for station based courses (ACs) so that instructors can more accurately record training courses	31-May-19	Phase 3 Team	Completed	

Action: MC4: Implement a refresher training programme for the use of redkite and the Management of MOC						
Ref:	**Details**	**Deliverables**	**Due date**	**Owner**	**Status**	**RAG** (Red - Overdue/ Amber - In Progress/ Green Completed)
MC4.1	Refresher training programme for Redkite/MOC management to be prepared and implemented for exsiting staff to include:• Training for all station personnel to ensure understanding of how to achieve and maintain competence; • Training for all line managers in managing, recording and auditing the competence of staff and actions to take in relation to each competence if staff are not maintaining competence	Design content for training programme and delivery arrangements to include refresher on the use of redkite for all station based staff and to include training on updated arrangements such as the need to record information against red indicators, competence guidance sheets, policy, restructure of ACs, dashboard, audit process/responsibilities, training programme, revised FB29 process, the need to record all activities against MOCs (including training, incidents, standard tests, etc).	15-Apr-19	Phase 3 Team	Completed	
		Present training programme for approval to a workgroup comprising end users, line managers, auditors, T&D manager and AM Op Support for approval	26-Apr-19		Completed	
		Commence roll-out training programme to agreed timeline - to include initial hit of CRG WMs delivery followed by longer-term follow up by Phase 3 team	01-May-19		Completed	
MC4.2	Ongoing arrangements to ensure new staff are trained on the Redkite/MOC process, and existing staff are refreshed regularly and updated on any changes	Add MOC input to all firefighter, supervisory manager, and middle manager development programmes or induction processes	01-Jun-19		Completed	

Action: MC5: Training workstream leads to triangulate and audit redkite information

Ref:	Details	Deliverables	Due date	Owner	Status	RAG (Red - Overdue/ Amber - In Progress/ Green Completed)
MC5.1	Training workstream leads to ensure that all staff are up to date with centrally-run training/ assessments and that Redkite accurately reflects current status. This includes: BA assessments; ICS, inc JESIP; Driving & EFAD; Safe working at height; Water; Hazmat/CBRN; RTC; IEC; Safeguarding; H&S; Phase 1 Ff program.	workstream leads to triangulate local records with redkite records to ensure accuracy and consistency	31-May-19	Workstream leads	Completed	
		Scorecard reports to be put in place for each workstream for T&D Manager to review on a monthly basis that show % of respective staff competent. The scorecards should report on the risk critical elements of each workstream in line with redkite records. Any training needs identified or expired competences need to be recorded and respective watch managers notified (training needs recorded and uploaded onto redkite via FB167). Scorecards are required for ACs (Assessments of competence) for:			Completed	
		BA assessments (including monthly scorecard for Oct - March BA programme)	31-May-19			
		ICS, inc JESIP				
		Driving & EFAD				
		Water rescue and awareness				
		Hazmat				
		Phase 1 Ff prog				
		RTC				
		Safe Working at height				
		IEC				
		Winching				
		CBRN				
MC5.1a	Health & Safety and Safeguarding E-Learning packages to be requested following procurement process	Safeguarding	30/09/2019	Training Manager/Prevention/Health & Safety	Open	
		Health & Safety				

Glossary of Terms

AC	Assessment of Competency		JOT	Joint Operations Team
ACFO	Assistant Chief Fire Officer		MOC	Maintenance of Competency
AM	Area Manager		Moodle	Online platform for NFRS training information
BA	Breathing Apparatus		NFRS	Northamptonshire Fire and Rescue Service
CBRN	Chemical, Biological, Radiolocial and Nuclear		OOD	Office of the Day
CFO	Chief Fire Officer		ORMG	Operational Risk Management Group
CRG	Community Risk Group		PFCC	Police, Fire and Crime Commissioner
CRG WM	Community Risk Group Watch Manager		Phase 1 FF Prog	Phase 1 Firefighter Development Programme
Duty PO	Duty Principal Officer		QA	Quality Assurance
Duty Gold	Duty Gold Officer		RAPPEL	Availability system used to record availability of the retained (on-call) sections
EFAD	Emergency Fire Appliance Driving		RDS	Retained Duty System
FB	Fire Brigade specific forms		Redkite	Recording system for training and development activity and competency records
FEG	Fire Executive Group – chaired by CFO		RMC	Resource Management Centre
Flexi-crewing	Type of crewing system which involves mobilisation of smaller crews together		RTC	Road Traffic Collison
FRS	Fire and Rescue Service		SOR	Standards of Response
GM	Group Manager		SM	Station Manager
HAZMAT	Hazardous Materials		T & D MANAGER	Training and Development Manager
HMICFRS	Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services		VCS	Variable Crewing System
HR	Human Resources			
ICS	Incident Command Structure			
IEC	Immediate Emergency Care			
IMSG	Information Management Steering Group			
IRMP	Integrated Risk Management Plan			
JESIP	Joint Emergency Services Interoperability Programme			