Ref	Risk Title	Causes	Mitigations	Mitigated Risk Score	Actions	Review Date	Corporate Risk Owner
CR1	Health & Safety non- compliance	 Policy and practices not effective Policies not followed Inconsistent implementation H&S approach is not effectively targeting the highest risk areas Lack of proactive / preventative measures to reduce likelihood Specific issues regarding Face fit testing and Management of Contractors 	 Training programmes in place Policies in place Appropriate systems exist Changes to the management and staffing structure Governance for Health, Safety & Wellbeing in place Revised estates policy for management of contractors Secondment of individual into Facilities Management (FM) role to deliver improvements in processes for estates / management of contractors for 12 months H&S peer review and implementations of findings 5-year audit plan Acceleration of "facefit" programme for respirators using external contractor 1st year overview of delivery of Regional H&S Audit Action Plan presented to Oct 2020 HSWC Business Partners recruited with start date in October 2021 		 Health and Safety (H&S) policy framework review including the implementation of a new H&S management system planned for implementation in October 2021 Developing the H&S legal register Implement the 2nd year of the 3-year action plan drawn together following the Regional H&S audit undertaken in July 2019 	December 2021	AD People Services
CR2	Future financial viability	 Reducing funding stream (uncertainty) Failure to identify and deliver savings Difficult to predict future needs / resources required Changes in legislation increasing burden Impact of Covid 19 	 Business Rates Pool extended for 2021/22 Delivery of savings monitored and reported to SLT and Fire Authority Resource Planning meeting to monitor operational establishment 	Impact = 2 Likelihood = 3 Score = 6 Moderate	 Exploration of potential new areas for efficiencies as set out in the budget papers Continued review of opportunities for grant funding e.g., CIL Review sustainability of capital programme Assess funding gap post Star Chambers and work with SLT to develop options to balance the budget Monitor implications of EU exit on costs including potential tariffs on certain goods and services Explore options for fire sector finance benchmarking and cost driver review with NFCC FCC / FFN 	December 2021	AD Resources / Treasurer
CR3	Ability to meet developing legislative requirements evolving from central fire safety regulatory reviews	 Policy or legislative changes that are likely to arise from reviews and investigations Unknown burdens on service delivery Likely increased funding required Knowledge and competence needed Lack of capacity and capability inability to adapt service delivery models 	Introduction of firefighter business safety		 Refresh and publish a new Protection Strategy to take account of the emerging issues. Allocate ESFRS officers to national working groups to steer and understand the implications of the proposed national changes. Sector is lobbying Govt. for additional funding for investment in protection services Investment in CRM and related mobile devices/software to enable required flexibility and mobile working to improve efficiency in work processes, ensure delivery of reviewed RBIP, BRR and respond to internal audit findings to ensure full compliance with legislation. Deliver the Building Risk Review Respond to fire safety consultation Utilise the Government Protection Funding to identify improvement and support for existing protection team. Seeking regional alignment through regional board on key matters initially such as legal/prosecutions, engineering, consultations and RBIP (Risk based inspection programme). 	October 2021	ACFO

Ref	Risk Title	Causes	Mitigations	Mitigated Risk Score	Actions	Review Date	Corporate Risk Owner
CR4	Effective workforce planning e.g., professional services	 Increasingly difficult to recruit into professional services HR policy flexibility (grades/salaries) Recruitment pool processes Already lean workforce Cognisant of the HMICFRS findings Immediate Detriment and Firefighter pension transitional arrangements decisions Response to the McCloud and Sargeant cases lowering potential retirement ages Financial implications of reinstatement to old schemes Loss of senior level experienced officers and staff earlier than expected Failure to interpret rules or legislation correctly Immediate Detriment Cases 	 by SLT. Continue to consider the wider recruitment market to assess salary points for specialist posts). Recruitment and selection framework Process Improvement Project to deliver efficiencies in roles and policy supporting lean workforce Redesign current talent pool process at each operational level within the Organisation Access professional legal advice where necessary FPS administration successfully transitioned to WYPF wef 1 April 	Impact = 2 Likelihood = 4 Score = 8 Moderate	 Strategic Workforce Plan to be signed off at <i>Dec</i> SLT Embed and reinforce workforce plan. <i>Market Supplement policy has been drafted but needs amending prior to sign off. Completion expected prior to end of 2021</i> To re-engineer the recruitment and selection processes for professional services To review salary structure with Hay (2022/23) <i>Retirement profile has been built to identify future establishment pressures.</i> Monitoring developments through LGA / NFCC / Home Office Liaising with our actuary to ensure liabilities are reflected in IAS19 reports Issuing communications to staff to keep them informed Paper to P&R Panel July 2021 following joint legal advice in relation to Immediate Detriment cases with position and recommendations to approach 	December 2021	AD People Services
CR5	Failure to mobilise effectively	 ESFC incident / significant system failure Software providers unable to maintain support for system over longer term. Loss of staff resulting in insufficient staff to maintain business as usual operational service 	 Fall-back and business continuity arrangements designed, tested and operating (this includes fully functional secondary control at Maresfield. Refreshed approach to attendance management. Crewing degradation policy in place. Resilience plan in place and being managed via weekly conference calls Interim single service model developed for period Dec 2019 to Nov. 2021 and now operating. Required additional funding identified and agreed for interim period Authority has approved future transition to partnership with Surrey and West Sussex FRS through Project 21. Project 21 now mobilised and progress on track including effective joint working across partner FRS Phase One, Two and Three Station end equipment completed Corporate Wi-Fi roll out complete. Contract and support arrangements with Remsdaq extended to 31 March 2022 Further audits and remediation plans for Mobile Data Terminals, Wi-Fi and Station End Equipment Zero hours contracts being utilised Staff s with experience of control room seconded from other departments L2 officers now trained on radio operation 	Impact = 4 Likelihood = 2 Score = 8 Moderate	Scenario planning for future options / outcomes underway including recruitment if necessary.	December 2021	DCFO

Ref	Risk Title	Causes	Mitigations	Mitigated Risk Score	Actions	Review Date	Corporate Risk Owner
CR6	Failure to manage the effects and impacts of a major loss of staff event	 Lack of engagement with unions / staff Poor / ineffective consultation practices Ineffective communications Lack of business continuity Pandemic Flu Major travel disruption Failure of National pay negotiation leading to action short of a strike 	 Review outcomes of Retained Firefighters Union report Introduction of the On-call action learning set Establish a resilience group to refresh the resilience contingency plans and loss of staff protocols. Establish regional loss of staff working group to share best practice and assist in contingency planning". Introduce a revised Business Continuity Plan for major loss of staff Deliver an Emergency Management Team (EMT) exercise to test the plans and response by the key staff within the continuity plans. Close working with NFCC to determine local and regional resilience New National Security Risk Assessment for industrial action prompting Sussex Resilience Forum support IRMP proposals for Operational Response Plan (ORP) and flexible on-call contracts to improve resilience approved September 2020 IRMP Implementation team and governance in place Internal and partner (SRF) governance arrangements in place to manage Covid-19 impacts 	Score = 9 Moderate	 The established continuity handbook (informed by the NFCC prioritised activities) for staff to assist in managing the early stages of a major loss of staff has been reviewed following the HMIC&FRS audit and EU Transition. Working with Sussex Resilience Forum (SRF) to assess threat and risk as part of community risk IRMP implementation team taking forward ORP and new on-call contracts. <i>Resilience group to undertake annual review of response to strike action through resilience group</i> 	October 2021	ACFO
CR7	Inability to respond effectively to a cyber incident	 Lack of effective Business Continuity Plan (BCP) in place Underestimation of risk likelihood Poor policies and procedures Human error Lack of staff awareness (e.g., phishing) Poor protection of systems leading to increased severity 	 Telent to progress IT Risk Treatment Plans Annual IT Health Checks now scheduled Information Security Management Forum meeting on a regular basis Information Security e-learning in place with mandatory annual re-test Annual review of ISO27001 gap analysis Information Security Management System in place New suite of Information Security policies in place Annual IT Health Checks implemented along with associated Telent mitigation plans Information Security Project now complete and closed down 	Impact = 4 Likelihood = 2 Score = 8 Moderate	 Telent (working with Aristi) progressing risk treatment plans following scheduled IT Health Checks. Review of NRR and further national guidance being considered by Sussex Resilience Forum. ESFRS involved closely in this work and any relevant actions to be fed back to the service. IT Health Checks taking place in Jul 2021. ESFC IT Health Check risks to be remediated as part of Project 21 4i decommissioning phase, which will be completed in Mar 2022 Progress towards ESFRS achieving Cyber Essentials Plus accreditation in 2022, in line with NFCC IT Managers' agreed FRS cyber accreditation standard 	December 2021	DCFO
CR8	Failure to deliver key corporate projects	 Lack of adherence to governance processes Lack of experienced staff managing projects Inability to recruit to vacant posts in the Programme Management Office (PMO) Over optimistic delivery plans 	 Assignment of programme management office Set up of the PMO – team, processes, standards, PMO Manual Set up of Projects Tool Kit Intranet pages including templates, guidance and information to project managers and all staff involved in projects. Portfolio capture in place and rationalisation of clusters and sub clusters of projects. Set up of monthly reporting of projects into the PMO and quarterly / yearly PMO reporting to SLT. Strategic Change Board in place Key projects managed directly by the PMO (FireWatch, CRM, Business Intelligence, Respiratory Protective Equipment, ESMCP). Project management now in place for delivery of fleet and engineering projects Dependencies analysis and risks of extant project now complete New PMO structure, terms of reference and funding agreed by SLT to meet the business need. Additional Estates project management capacity in place (Major Capital Projects Manager) 	Impact = 3 Likelihood = 2 Score = 6 Moderate	 Reports further developed for Strategic Change Board and exception reporting at SLT. Compliance against project monitoring improving Carrying out Project health checks with PMs Implement agreed actions from Internal Audit Report (reasonable assurance opinion) Most actions are complete. Reporting project finances is identified for this year PMO quarterly drop-in sessions in place. 	December 2021	AD Planning & Improvement

Ref	Risk Title	Causes	Mitigations	Mitigated Risk Score	Actions	Review Date	Corporate Risk Owner
CR9	Collaboration	 Collaboration fails to deliver desired outcomes Resources required to support collaborative activities not justified by improvements in efficiency and / or effectiveness 	 Collaboration Framework agreed and in place Priorities agreed for 2018-21 Regular tracking of collaboration activities through business performance system Governance in place e.g., 4F and Integrated Transport Function (ITF) Legal advice on formal collaboration agreements Update report on the agreed collaborations (as outlined in the Collaboration Framework) to SLT in May 2020 Areas of focus for 2021/22 agreed with 4F collaboration leads 	Impact = 3 Likelihood = 2 Score = 6 Moderate	 Regular review of collaborative activities through SLT and Scrutiny and Audit Panel Full update report to SLT and the FA in summer 2021 to concentrate on efficiencies Occupational Health Collaboration Contract reviewed for renewal. Considering 5yr commitment 	December 2021	AD People Services
C CR10	Security and safety of staff and visitors on ESFRS sites	 Damage to buildings and assets Injury to Personnel Service Delivery: Unable to deliver training and requalify personnel if interruption continues Industrialisation of areas surrounding ESFRS premises perpetually halting operational practice on sites. 	 Safety Measures implemented in affected areas of Service Training Centre (STC) when burning i.e., PPE, Cordons. The use of Community Order prohibiting protagonist from attending Authority premises Increased safety officers Temporarily ceased some lay flat testing to Air Quality Testing Independent Air Quality Testing Report Meeting with Traveller Rep, ESCC Rep and Sussex Police to discuss concerns. Review of whole site security in conjunction with Estates. Traveller Community Engagement, education and information around work and function of STC. Project long term review of live fire training facilities Initial phase of security improvements at STC completed New security gates installed at STC 	Impact =3 Likelihood = 3 Score = 9 Moderate	 Feasibility study for enhancements to training facilities including a clean burn strategy approved at Change Board in Oct 2020 and being commissioned, now FBC being developed with full costings and will go to September 2021 Change Board 	December 2021	AD People Services
CR11	Spread of infectious pandemic diseases	 Risk to workforce and service delivery over the spread of Covid – 19 (coronavirus) 	 SRF meet every week to review current issues PHE are monitoring and assessing the risk to public health in the UK and providing guidance to emergency services Guidance business service and operations on protocols for dealing with high consequence infectious diseases. Organisational update of business continuity plans reviewed to ensure fit for purpose EMT established Covid 19 Working Group and supporting cells in place and local BC plans reviewed. Regular staff updates in both service brief and by email. Access to test facilities for key workers Established PPE supply chain and key organisational working practices to prevent infection/spread of virus within service. Premises risk assessments for covid safe premises. Weekly monitoring of Sussex health system and Covid data via Sussex Monitoring Group National PPE guidance to be released. ESFRS BC plans reviewed and tested against Reasonable Worst-Case Scenario SRF Pandemic Flu Plans updated and published Weekly Common Operating Picture established by SRF Balance of Covid-19 grant held to cover 2021/22 costs 	Impact =3 Likelihood = 2 Score = 6 Moderate	 Public awareness communication plan. Review of longer-term impacts of mental health and wellbeing Return to workplace protocols and expectations being considered by SLT EMT / CWG to deescalate in line with government roadmap and SRF step-down 	December 2021	DCFO
CR12	Ageing workforce	 Increasing ageing workforce Increasing number of age-related injuries Increase in injury recovery times having a cost to recovery Increase into alternative specialist equipment causing further costs Increased number of ill health retirements 	 Trained personnel in manual handling training Membership to Fire and Recuse Risk Group (FARRG) help discus ongoing issues with other services may have already dealt with including issues with National Resilience Equipment Wellbeing strategy that is looking at supporting an ageing workforce Service Fitness Advisor embedded into the Complex Case Mgt review meetings Reviewing manual handling training via station assurance programme Weekly absence stats scrutinised by ADs to identify trends Complex Case Mgt Review meetings review cases specifically to assist in addressing this issue Training video for operational crews in relation to patient handling/carrying 	Impact =3 Likelihood = 2 Score = 6 Moderate	 Review of sufficient or appropriate training 2021/22 we will be scoring compliance manual handling training policy L2 accident investigation to all manual handling injuries to ascertain underlying causes Provision of additional manual handling equipment 	December 2021	AD People Services

Ref	Risk Title	Causes	Mitigations	Mitigated Risk Score	Actions	Review Date	Corporate Risk Owner
CR13	Financial & operational impacts of UK's withdrawal from the EU	 Economic shock and impact on funding Supply chain problems Additional tariffs and other price increases Data warehousing located in EU countries 	 Existing Business Continuity plans have been reviewed Linking with work being carried out nationally through NFCC Risk / impact assessment of supply chain complete 	Impact = 2 Likelihood = 3 Score = 6 Moderate (increased from 4 – Tolerable)	 On-going monitoring of supply chain / procurement issues and related financial / operational impacts Internal Audit Review of Post Brexit Supply Chain Management due to start Q3 	December 2021	DCFO
CR14	Health & Safety non- compliance	Management actions not completed in accordance with safety event reports	 Log of all outstanding actions from H&S Investigations provided to ADs so they can provide updated position on implementation Assistant Directors receive a quarterly report from the H&S team with outstanding actions All outcomes to be discussed at DMTs 52 out of 252 outstanding actions identified now completed Regular weekly reports provided by HMI officer to Assistant Directors of actions taken to clear historical actions backlog (in mitigations) and actions CAMMS has been updated with details of the responsible officers for actions and identify priority. Regular reports obtained from CAMMS to monitor progress All outstanding actions are being reviewed for continued appropriateness/duplication and are being cleared/closed as and when required, with target of 60 % to be closed by end of December 2021 	Substantial	 Outstanding actions to be highlighted and discussed at the HSWC H&S BPs to work with the appropriate departmental managers to agree suitable timescales and priority Remaining 204 added to CAMMS so monitoring be undertaken on progress on a monthly basis. HMI Seconded officer to have oversight of progress HMI officer producing weekly reports of actions taken to clear historical backlog Regular reports from CAMMS to monitor progress Continue to review outstanding actions for duplication/appropriateness and to close where appropriate. 	December 2021	AD People Services
CR15	Workforce Planning – Operational competence	 Workforce modelling suggests that ½ of the operational workforce can retire over the next 5 years. Therefore, there will be a loss of operational knowledge 	 Workforce planning group providing collective understanding of current picture and forecasting through resource management plan. Firefighter recruitment review and actions. Maintain a transfer pool approach 	Impact = 4 Likelihood = 2 Score = 8 Moderate	 Ensure focus on development of those with potential through equitable and fair pathways Supervisory and model manager Leadership development supportive programme Mentoring/Coaching as an assistive tool Gap analysis of competencies that are at high risk of not being retained. Alternative options for securing specialist skills (sharing with other services) 	December 2021	AD Safer Communities
CR16	Grenfell Tower Public Inquiry – Non-compliance with Phase 1 recommendations	 Non-compliance with recommendations arising from the Grenfell Tower Inquiry Phase 1 (2019). Failure to deliver improvements in call handling & operational response for high rise buildings with ACM cladding Insufficient resources allocated to GT1 activity 	 A detailed gap analysis has been carried out between current positions against the 46 formal recommendations that has resulted in a detailed and defined improvement plan. ESFRS has established suitable and sufficient governance and project management processes to oversee progress against the plan including a prioritisation and tracking system. All details of delivered actions and planned activities yet to be delivered are monitored from a specific intranet page that also includes a live copy of the improvement plan. 	<i>Impact</i> = 4 <i>Likelihood</i> = 3 <i>Score</i> =12 <i>Substantial</i>	 Gap analysis required to identify any further weaknesses requiring action Identify sufficient resource to deliver very high and high rated priorities by 31.07.2022 Address remaining 33 medium and low rated priorities through BAU activities by building into normal business plans Identify and secure sufficient management support and resources (people, time, money) to be enabled for the delivery of the actions identified and subsequent assurances that improvements are embedded across ESFRS 	December 2021	ACFO