



NOTTINGHAMSHIRE
Fire & Rescue Service
Creating Safer Communities

Nottinghamshire and City of Nottingham
Fire and Rescue Authority
Human Resources Committee

MAINTAINING A HEALTHY AND FIT WORKFORCE - FUTURE CHALLENGES

Report of the Chief Fire Officer

Date: 26 January 2018

Purpose of Report:

To set out the work being undertaken to maintain the health and fitness of the workforce, and to consider future challenges.

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1. BACKGROUND

- 1.1 Nottinghamshire Fire and Rescue Service (NFRS) is proud of the support it provides to its employees in terms of occupational health provision. The Authority makes a significant investment in maintaining the health and well-being of its workforce through the work of its Occupational Health (OH) Team, internal support mechanisms and other support provided through third party specialists.
- 1.2 At a time of budget reductions, the Service has recognised the importance of protecting funding which supports employee well-being and helps to maintain a fit and healthy workforce. This report summarises the initiatives undertaken by the Service to maintain this commitment.
- 1.3 However, as the impact of a reducing workforce and extended working age begins to impact, there will undoubtedly be future challenges in terms of maintaining fitness and health and dealing with changing workforce issues.

2. REPORT

- 2.1 The Service's Occupational Health and Fitness Team is made up of an OH and Fitness Manager (who is a registered nurse), an Occupational Health Support Officer and a Fitness Advisor. An OH Consultant attends clinics twice a month to provide advice to the Service on more complex or long-standing cases of ill-health, and to undertake statutory medicals. As previously reported to Members, the services provided by the team has resulted in a Gold Award achieved under the Workplace Well-Being Scheme and is a testament to the preventive and health promotion work undertaken by the team.
- 2.2 Fitness is a critical issue for the Service, and all operational personnel are required to maintain a national standard of aerobic capacity to ensure that they are fit to undertake the strenuous and demanding requirements of the Fire-fighter role. Support for operational personnel is provided by a network of station based Physical Training Instructors (PTIs) who test, advise and support their colleagues to maintain their fitness levels. Gym equipment is also provided on all stations and at Service Headquarters to develop strength and aerobic fitness. The Service Fitness Advisor provides expert support to the PTIs and provides advice and fitness programmes to rehabilitate employees who have been absent due to ill-health or injury or are having trouble in attaining fitness standards.
- 2.3 Musculo-skeletal injury is the most common reason for absence amongst operational employees. In 2017, this has accounted for 30.6% of all absence amongst this work group. These injuries are usually sprains or strains, but can also be more serious long-term issues linked to wear and tear on joints.
- 2.4 The Service introduced a dedicated on-site physiotherapist in January 2018 to work with employees who have significant or repetitive injuries. The

physiotherapist will also provide advice to employees on how to avoid such injuries occurring in the first place. This support is supplemented by therapy benefits under the Service's new Bupa healthcare plan.

- 2.5 Recent changes to the Firefighter Pension Scheme mean that fire-fighters who are members of the new 2015 pension scheme now have a normal retirement age of 60. The requirement to maintain fitness levels as employees age is likely to be an increasing challenge. However, if individuals maintain fitness and lead a healthy lifestyle throughout their career, they are more likely to retain fitness and avoid injury as they age.
- 2.6 In 2014, Bath University undertook a national research project on behalf of Chief Fire Officers Association to establish fitness levels for operational fire-fighters by replicating role demands. The outcomes from this review have been incorporated into the Service's Fitness Policy and Procedure and includes a drill ground assessment for those employees who have not been able to pass gym based fitness tests.
- 2.7 If employees are unable to reach the required level of fitness then they are removed from operational duties, and are placed on modified duties whilst they are supported to improve their fitness levels. If they are unable to meet fitness standards after six months then they are dealt with under the Service's Capability Procedure.
- 2.8 Whilst fitness is one aspect of maintaining health, there are other medical reasons which may prevent or limit the ability of employees to undertake their normal role. The Service provides support for employees who have long-term medical conditions with the aim of returning them to their normal duties as quickly as possible. This may include a reduction in hours for a temporary period or redeploying them to other modified duties whilst they are receiving treatment or recuperating. In all cases, the Service will seek to introduce reasonable adjustments so that they can continue in work. This generally involves the provision of specialist equipment, adjustments to the work environment or to the job role.

WELL-BEING STRATEGY

- 2.9 The Service is currently developing a Well-Being Strategy which summarises the approach and support for employees who may experience different health and well-being issues throughout their working lives, including mental health conditions.
- 2.10 Nationally, mental health is one of the major reasons for ill health and can range from stress and anxiety to depressive illness. Work in recent years has been undertaken to de-stigmatise the negative connotations associated with mental ill health, and to recognise it as a disability akin to other physical medical conditions. The Service has been working to raise awareness of mental ill health and to encourage its employees to be more open about talking about their experience and seeking help and support, and being able to identify issues which may be affecting work colleagues.

- 2.11 Nationally, MIND provide a blue light mental health support service which is open to all emergency service workers, and The Fire Fighters Charity provides residential support as part of its service for all members of the Fire and Rescue Services and their families.
- 2.12 The Service has a range of initiatives in place to identify and support employees who may be experiencing emotional or mental issues which may be affecting their everyday lives. This includes a peer support network which is confidential and available to all employees who wish to access it.
- 2.13 In 2018, NFRS is introducing an additional Employee Assistance Programme which provides enhanced support and counselling services through a third-party provider to offer more specific and specialist confidential and independent support if it is needed.
- 2.14 Absence due to mental health issues can result in a long period of recovery, the provision put in place aims to help employees deal with issues before they progress and manifest in more severe symptoms.

FUTURE ISSUES

- 2.15 Notwithstanding all the support referenced above, there will be individual instances whereby an employee is not able to return to the role for which they are employed. This is most likely to be the case where operational employees are no longer able to undertake fire-fighting activities. In this case, the Service will seek to redeploy them to an alternative job, subject to availability, based upon their skills and the nature of their medical condition.
- 2.16 However as workforce numbers reduce, the ability to redeploy employees into substantive vacant roles is diminished and this is likely to be an increasing challenge for the Service as budget reductions impact upon workforce numbers.
- 2.17 In terms of operational employees, this will increasingly include consideration of redeployment into non-operational roles under “Green Book” conditions – ie: employees providing support roles. Any such redeployment would mean a new contract based upon different conditions of service, pay rates and pension scheme membership.
- 2.18 If it is not possible to find a suitable redeployment, then employees are referred to an Independent Qualified Medical Practitioner (operational employees) or Registered Qualified Medical Practitioner (support employees) to establish whether they meet the criteria for ill-health retirement under the respective pension schemes. If they do not meet the conditions for ill-health retirement, then the employee is dealt with under the Service’s Capability Procedure, which can result in termination of their employment.
- 2.19 Whilst the majority of medical issues are not age related, extending retirement age for both operational and support employees will bring challenges in terms

of maintaining fitness, health and well-being. As already set out, this may result in an increase in the need to redeploy employees to alternate roles, a greater number of ill-health retirements or capability issues, than has previously been the case.

- 2.20 An ageing workforce and population will also raise challenges such as caring for dependant elderly relatives where factors such as dementia become a factor, working through menopause for female employees and other health and welfare issues which may affect attendance or performance at work. It will also raise issues for service delivery in terms of prevention and response. During 2018, work will be undertaken to identify and address the implications of an ageing workforce, which is likely to lead to changes to existing policy and provision.
- 2.21 At a national level, the implications of an ageing workforce and population has been recognised by the National Fire Chiefs Council (NFCC) as a challenge for the whole Fire and Rescue Service and the service will link into work being undertaken at this level when considering its own response.

3. FINANCIAL IMPLICATIONS

- 3.1 Whilst there are no direct financial implications arising from the report, any increase in ill-health retirements will impact upon pension costs.
- 3.2 The cost of occupational health support and provision of fitness support is already contained within existing budgets.

4. HUMAN RESOURCES AND LEARNING AND DEVELOPMENT IMPLICATIONS

- 4.1 Human resources implications are set out within the body of the report.
- 4.2 There are likely to be implications for learning and development arising from the provision of awareness and education for managers and employees to enhance understanding of mental health issues and impact of conditions, such as dementia, on service provision.

5. EQUALITIES IMPLICATIONS

An equality impact assessment (EIA) has not been undertaken as there are no direct implications arising from this report, however a full EIA will be undertaken as part of the development of a Well-Being Strategy.

6. CRIME AND DISORDER IMPLICATIONS

There are no crime and disorder implications arising from this report.

7. LEGAL IMPLICATIONS

In dealing with long term medical conditions, the Service is subject to the provisions of the Equality Act 2010 which includes the consideration of reasonable adjustments and affords additional protection for employees, as well as extending to the provision of services.

8. RISK MANAGEMENT IMPLICATIONS

The impact of extending the normal age of retirement will bring challenges in terms of supporting and maintaining the fitness, health and wellbeing of an ageing workforce. By seeking to identify and address issues, the Service will be better placed to develop policies and provision which seek to prevent, support and manage issues appropriately.

9. COLLABORATION IMPLICATIONS

There are no immediate collaboration implications arising from this report beyond the anticipated work with the NFCC ageing workforce project. Under the collaboration strategy, future opportunities to work with other organisations will be reported to members where there are anticipated efficiency and effectiveness benefits.

10. RECOMMENDATIONS

That Members note the contents of this report.

11. BACKGROUND PAPERS FOR INSPECTION (OTHER THAN PUBLISHED DOCUMENTS)

None.

John Buckley
CHIEF FIRE OFFICER