

UNDER EMBARGO UNTIL 00.01 ON TUESDAY 12 APRIL 2016



The tri-service review of the Joint Emergency Services Interoperability Principles (JESIP)

April 2016

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1. Summary

- 1.1. Events over recent years have shown the need for the emergency services to operate together as effectively as possible during major, serious or catastrophic incidents or events. The public expects no less and the Joint Emergency Services Interoperability Programme (JESIP) was established to address the issue of interoperability¹ across the blue light services.
- 1.2. The programme prepared Doctrine, a Joint Decision Making Model and a common format of shared situational awareness and training was provided to commanders and control room staff across the blue light services. With the completion of the formal initial training in 2014, the programme has evolved into 'principles'. This recognised the closure of the formal two-year programme, which was primarily training, and focused on building the longer term foundations for interoperability. A small residual team based in the Cabinet Office remains to provide a continuing focus on emergency service interoperability. It is recognised that the JESIP team has made significant progress in providing JESIP training to emergency service responders.
- 1.3. In January 2015 the JESIP Ministerial Board commissioned an HMIC-led tri-service review of the level of JESIP is across the emergency services. This review was welcomed and included visits across England and also Northern Ireland and Wales by invitation.
- 1.4. The review was conducted against a maturity matrix² provided by JESIP and although there were issues with the terminology used in the matrix, the services visited were assessed by using it and were supported by a narrative judgment which is considered to be more accurate. Their overall findings were as follows:
 - Doctrine - Level 2. Joint doctrine exists, but not widely accepted or understood.
 - Training - Level 3. A nationally consistent approach to joint training, though not formally integrated into existing training programmes.
 - Testing and Exercising - Level 2. Some isolated examples of joint testing and exercising, but a highly inconsistent national picture.

¹ Interoperability in this context means "the extent to which organisations can work together coherently as a matter of routine". See JESIP joint doctrine (the October 2013 interoperability framework).

² The maturity matrix was developed as a means of providing a clear and consistent assessment of embeddedness.

- Joint Organisational Learning - Level 1. Consistent failures to respond to lessons which have been identified.
 - Culture - Level 3. A national consistent commitment towards interoperable working, but not yet fully ingrained as part of the culture.
- 1.5. Overall the review team considers that interoperability has yet to be fully embedded across the services visited with an overall assessment that England is at Level 2. There are considered to be some isolated but positive examples, but a highly inconsistent national picture.
- 1.6. Several observations emerge from the review:
- All three services across the country recognise the importance of interoperability and consider that JESIP provides a welcome focus and structure to develop the associated skills.
 - JESIP was driven top-down whereas if it is to become fully embedded then it needs to be part of the initial and continuation training and shared across the wider responder community such as the Maritime and Coast Guard Agency and Border Agency.
 - Central guidance and direction remains necessary to provide the focus and drive to ensure JESIP remains a high priority.
 - All three services have very different historical backgrounds, ethos and cultures. Improving interoperability has been and will remain a challenge. The introduction of METHANE³ as a method of sharing situational awareness is a step forward but it needs to be used more frequently so that it becomes part of normal day-to-day business.

³ METHANE is a mnemonic for passing information in an agreed standard format, described in paragraph 4.6.

2. Introduction

- 2.1. In times of emergency, the ‘blue light’ services of ambulance, police, and fire and rescue must be able to work together effectively and seamlessly to contain and respond to the crisis, protect the public and save lives. However, reviews following major incidents such as the July 2005 London bombings, the wide-area floods across the UK in 2014, and the shooting of 12 people in Cumbria by Derrick Bird in 2010 all reported gaps and failings in the interoperability⁴ between the services.⁵ Employers also have a duty to train and protect their responders in order for them to fulfil their life-saving roles.
- 2.2. The Joint Emergency Services Interoperability Programme (JESIP) was established in 2012 following a report⁶ by the Association of Chief Police Officers, Chief Fire Officers Association (National Resilience) and Association of Ambulance Chief Executives (AAACE) which was submitted to the Home Secretary in April 2012. The programme is administered by the three blue light services, and was initially funded for two years by the Office for Security and Counter-Terrorism (OSCT),⁷ and supported and overseen by a cross-departmental Ministerial Oversight Board.
- 2.3. JESIP’s stated aim is:
- “[t]o ensure the blue light services are trained and exercised to work together as effectively as possible at all levels of command in response to major or complex incidents (including fast moving terrorist scenarios) so that as many lives as possible can be saved.”⁸
- 2.4. In May 2013, the Ministerial Oversight Board asked HMIC to lead on a short review of the arrangements in place for the development and implementation of the programme. This was conducted by a review team, comprising representatives from the Association of Ambulance Chief Executives (AAACE), the Chief Fire and Rescue Adviser (CFRA), and HMIC.

⁴ Interoperability in this context means “the extent to which organisations can work together coherently as a matter of routine”. See JESIP joint doctrine; the interoperability framework dated October 2013.

⁵ Coroner’s Inquests into the London Bombings of 7 July 2005: Report under Rule 43 of the Coroner’s Rules 1984, The Rt. Hon Lady Justice Hallett DBE, May 2011; Learning Lessons from the 2007 Floods, Sir Michael Pitt, June 2008.

⁶ Blue Light Interoperability Programme, Association of Chief Police Officers, Chief Fire Officers Association (National Resilience) and Association of Ambulance Chief Executives, April 2012.

⁷ JESIP was allocated funding of £1.76m for the period 2012 to 2014.

⁸ See www.jesip.org.uk

- 2.5. The review team submitted the first part of the review – an interim report on JESIP’s governance, leadership and resourcing – in June 2013. In October 2013, the review team submitted the second part of the review; a review of the JESIP delivery and implementation plan.
- 2.6. JESIP as a programme formally ended in September 2014 and moved into a period of consolidation. In April 2015, it was renamed as the Joint Emergency Services Interoperability Principles. The JESIP Interoperability Board has agreed terms of reference to ensure that the capability built by the programme is sustained, developed and embedded in the emergency services. A small central JESIP team representing the blue light services remained to support the board, to continue rolling out the training, and to ensure that the principles in the longer term are established within organisations.
- 2.7. In January 2015, the JESIP Ministerial Board commissioned a further HMIC-led tri-service review. This was intended to provide independent assurance on the extent to which JESIP is embedded across the emergency services.

3. Methodology

- 3.1. The review governance board agreed the terms of reference in conjunction with the JESIP team and the JESIP Interoperability Board service leads.
- 3.2. We then issued a formal invitation to all blue light services across England to participate in the review and received a very positive response from all areas. The final selection of services to be visited was made to ensure representation of the differing governance and operational structures across the services and trusts, including some areas which had recent experience of major incidents. We also made visits to Northern Ireland and Wales by invitation.
- 3.3. The review team⁹ analysed documentation provided by the JESIP team and conducted interviews with the JESIP team, including the Senior Responsible Officer and Deputy Senior Responsible Officer. The strategic leads of the blue light services with responsibility for JESIP, and members of the Civil Contingencies Secretariat who provide support to the programme were also interviewed.
- 3.4. In June and July 2015 we conducted fieldwork in the ten ambulance trust areas within England.¹⁰ This included one police force and one fire and rescue service within each trust area.
- 3.5. The fieldwork included:
 - interviews with strategic and tactical JESIP champions;
 - interviews with strategic leaders across the blue light services;
 - focus groups with operational staff including control room staff;
 - reality testing to demonstrate and confirm knowledge of JESIP;
 - consultation with Local Resilience Forums (LRFs) and partners; and
 - visits to and discussions with devolved administrations (Northern Ireland and Wales).

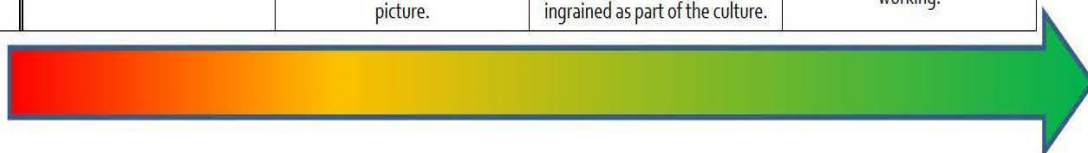
⁹ The review team comprised representatives from HMIC, the police service, Association of Ambulance Chief Executives and, through DCLG, a representative of the Chief Fire and Rescue Adviser.

¹⁰ The ten Ambulance Trust Areas are North West, North East, Yorkshire, West Midlands, East Midlands, East of England, South Western, South Central, London and South East Coast.

- 3.6. We distributed an online survey across all three blue light services and received over 5,000 completed responses. The results of the survey have been analysed and extracts have been included in this report to inform the recommendations. The full survey results and methodology can be found at Annex B.
- 3.7. The agreed terms of reference¹¹ specified that the following JESIP maturity matrix would be used to provide a clear and consistent assessment of embeddedness. We shared the maturity matrix with all services prior to the review team’s visit.

Figure 1: Maturity matrix

	Level One (Chaotic/Intuitive)	Level Two (Informal/Ad-Hoc)	Level Three (Managed/Effective)	Level Four (Optimal/Best Practice)
Doctrine	Single service doctrine.	Joint doctrine exists, but not widely accepted or understood.	Universally accepted and understood joint doctrine on interoperable working.	Joint doctrine on interoperable working fully embedded and aligned with all current & future single service and specialist doctrine.
Training	Single service training.	Some isolated examples of joint training, but a highly inconsistent national picture.	A nationally consistent approach to joint training, though not formally integrated into existing training programmes.	Joint training fully embedded as the default position for the Emergency Services and integrated into existing training programmes.
Testing & Exercising	Single service testing & exercising programmes.	Some isolated examples of joint testing & exercising, but a highly inconsistent national picture.	A joint testing and exercising strategy developed and accepted by all services.	A joint testing and exercising strategy fully embedded within all services.
Joint Organisational Learning	Consistent failures to respond to lessons that have been identified.	Some positive examples of responding to lessons identified, but a highly inconsistent national picture.	A joint organisational learning strategy developed and accepted by all services.	A joint organisational learning strategy fully embedded, nationally.
Culture	A fundamentally ingrained culture of single service working.	Some positive examples of an 'interoperable culture', but a highly inconsistent national picture.	A nationally consistent commitment to interoperable working, but not yet fully ingrained as part of the culture.	A fundamentally ingrained culture of interoperable working.



- 3.8. However, upon examination and throughout the review, we found the matrix to be inconsistent and unworkable as a method of providing an assessment of JESIP embeddedness. As an example the change in classification from level 2 to level 3, is significantly wider than between levels 1 and 2, and 3 and 4.

¹¹ Review Governance Board May 2015, and consultation with JESIP strategic leads.

- 3.9. Some of descriptors contained in level 3 are by definition nearly impossible to meet. For example, the use of terms such as “universally accepted and understood” are not helpful. It was also found that some aspects of level 3 could be achieved without delivering any change to current practice. In Joint Organisational Learning, level 3 can be reached by a strategy being developed and agreed with no corresponding requirement for that strategy to be put into practice.
- 3.10. While the following assessment has been made against the five elements in the maturity matrix, it is supported with a narrative judgment which we consider to provide a more accurate view of how well JESIP is embedded. Of note is that a revised version of the matrix has now been issued which removes culture as a standalone theme. It is also understood that a full review of the descriptors will be undertaken in November 2015.

4. Doctrine

Summary

The overall assessment of doctrine against the existing JESIP maturity matrix is level 2. This is defined as:

“Joint doctrine exists, but not widely accepted or understood.”

Key points

- The level of understanding of the five principles (co-location, co-ordination, communication, shared situational awareness and joint understanding of risk) among strategic, tactical and operational commanders was good.
- Awareness of JESIP amongst frontline operational responders, as opposed to JESIP trained commanders, was poor.
- The understanding and use of the Joint Decision Model and common approach known as METHANE (see paragraph 4.6) varied across the three services.

Background

- 4.1. The shared understanding of a major incident by the blue light services by applying joint doctrine is considered essential for improved interoperability.
- 4.2. JESIP joint doctrine was ratified by the JESIP Strategic Board in October 2013 and formed a significant part of the training delivered by the JESIP team.
- 4.3. Joint doctrine can be summarised as to:

"provide operational and tactical commanders with a framework to enable them to effectively respond together."

It contains the five key principles of:

- co-location;
- communication;
- co-ordination;
- joint understanding of risk; and
- shared situational awareness.

4.4. The five key principles of the joint doctrine introduce changes to the way in which emergency services work together at the scene of major and complex incidents. The five principles are underpinned by three significant elements:

- a Joint Decision Model;
- an agreed format for sharing situational awareness (METHANE); and
- an overarching response structure.

Joint Decision Model

4.5. Individual emergency services previously used different models to support decision making. The Joint Decision Model introduces a structured approach for decision making, information gathering and risk assessment to be used jointly by commanders at the scene of a major or complex incident. This model was largely based on the National Decision Model modified from the police service.

Figure 2: Joint Decision Model



Shared situational awareness

4.6. The joint doctrine also clarifies the need for blue light services to pass and assimilate information in an agreed and standard format known as METHANE:

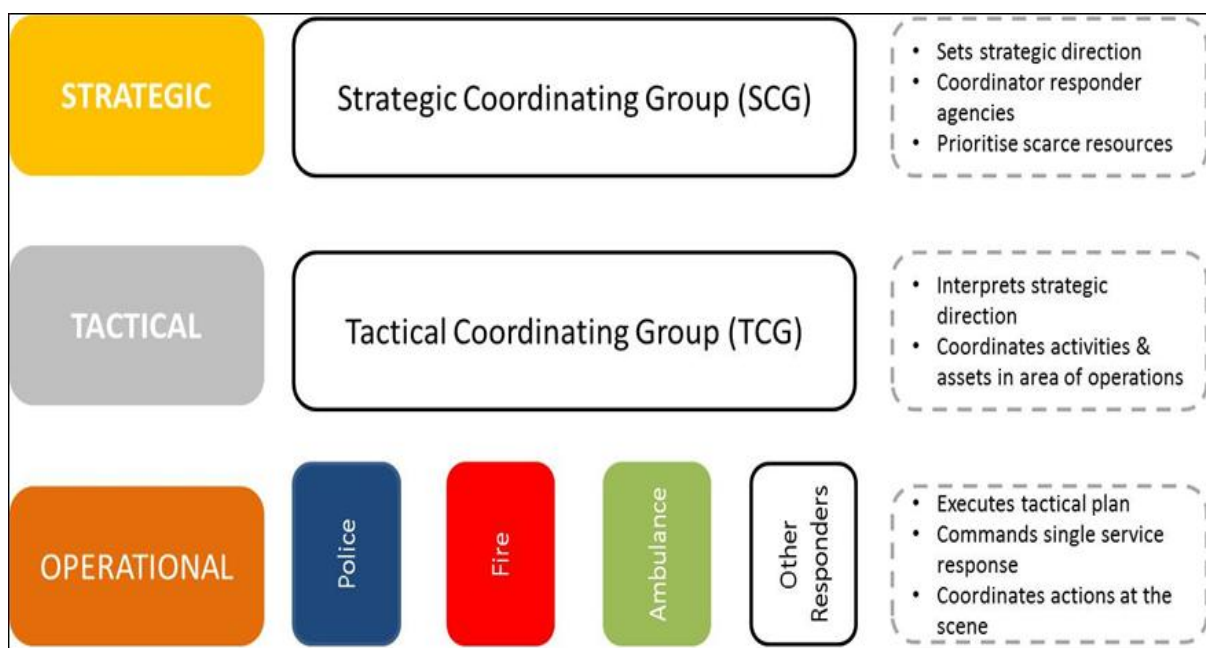
- **Major incident declared;**
- **Exact location [of the incident];**
- **Type of incident e.g. explosion, building collapse;**
- **Hazards present, potential or suspected;**
- **Access – routes that are safe to use;**
- **Number, type, severity of casualties; and**
- **Emergency services now present and those required.**

4.7. Use of this mnemonic enables early situational awareness to be shared between the services and respective control rooms. This method of passing information was predominantly in use by the ambulance service before the doctrine was introduced.

Overarching response structure

4.8. The joint doctrine illustrates how the command structures employed by each individual service are broadly similar; however the terminology to describe the tiers of command differs. To overcome this, the joint doctrine provides guidance on the command structure at a major or complex incident including clarification of strategic, tactical and operational roles.

Figure 3: Overarching response structure



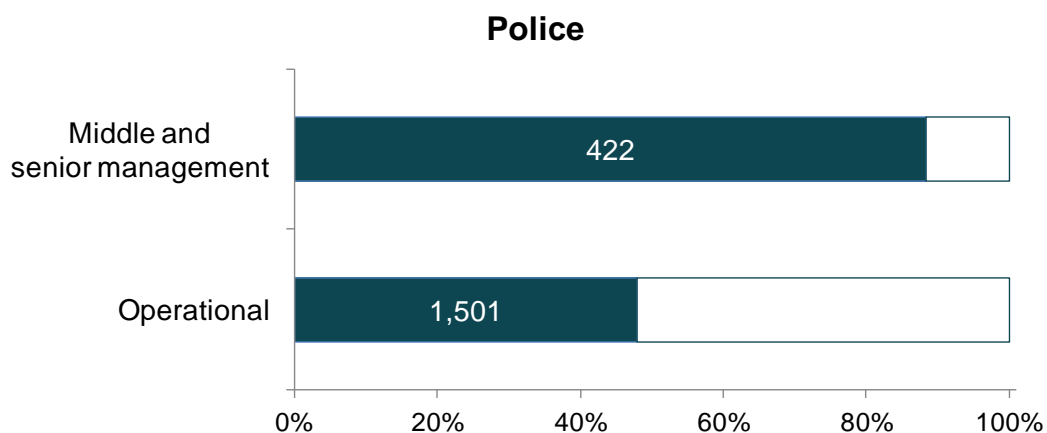
Findings from fieldwork

- 4.9. The strategic leads for each of the services visited are committed to the principles of the joint doctrine. The review team is confident that this commitment is shared across the leadership of all blue light services.
- 4.10. While all services visited have committed to the principles of joint doctrine, fully aligning this with single service policies and doctrine has yet to be achieved. Some services have undertaken a review of all policies and, where appropriate, ensured that JESIP is integrated.
- 4.11. We found that some services had decided to view JESIP as an addition to single service policies. Through discussions with focus groups there was an inconsistent understanding as to when personnel would switch from their own service policy to the JESIP policy. We recognise that this is work in progress.
- 4.12. The review team has two areas of concern. First, some services believed that JESIP was a two year programme to carry out training and this has now been achieved. Consequently JESIP is regarded as completing a discrete piece of work (further discussed in paragraphs 5.12-13) rather than ongoing work to embed the principles in the organisation. Second, there appears to be confusion as to when JESIP doctrine should be applied. Some believe it is initiated at a major or complex incident; others apply the principles at what they describe as a significant incident. The JESIP team is already aware of this anomaly which will be clarified in the forthcoming review of the joint doctrine, expected in February 2016.
- 4.13. A particular issue for each ambulance trust is that their operational area covers more than one police force, fire and rescue service and Local Resilience Forums (with the exception of London) which presents strategic, logistical and resource challenges. Despite this, the majority of senior personnel and control staff in the ambulance service view joint doctrine as a good framework for them to have discussions with partner organisations using common language.
- 4.14. Representatives from Local Resilience Forums (LRFs) stated that the progress of joint working and partnerships may have been hindered in some areas by JESIP training because it initially focused only on blue light services. While the JESIP training was never intended to exclude LRFs and other responders, the sharing of JESIP and access to training involving partners was extremely varied.
- 4.15. Where services have included LRFs in the JESIP training, it has had a positive impact resulting in improved working relationships and a better understanding of each others' capabilities. This confirms the need to extend

awareness and/ or training to LRFs and other category 1 and 2 responders.¹² Our fieldwork also highlighted that the knowledge of joint doctrine among frontline operational responders across the blue light services (less so in the fire service) was poor.

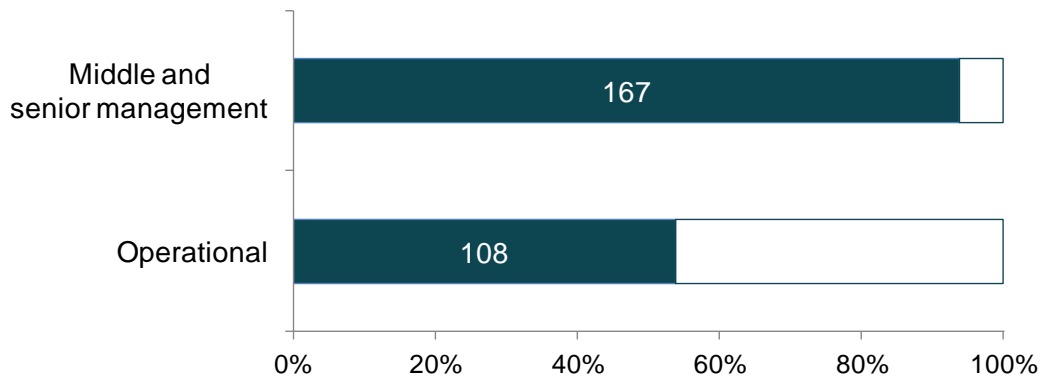
Key findings from the survey

- 4.16. Of the 5,107 respondents across the services only 59 percent (3,011) reported that they positively knew that their service had adopted JESIP joint doctrine. The picture was not consistent across services, however, with 51 percent (2,007) of respondents from the police aware that their service had adopted the joint doctrine, compared with 72 percent (282) and 94 percent (722) of ambulance and fire respondents, respectively.
- 4.17. Respondents at different levels of seniority for each service varied (see survey methodology – Annex B), and the proportion of respondents aware their service had adopted JESIP doctrine was not consistent across those levels of seniority. As may be expected a higher proportion of respondents at more senior ranks were aware of their service’s adoption of JESIP joint doctrine.
- 4.18. Respondents from police and ambulance services show greater awareness of the adoption of JESIP doctrine at strategic levels than at operational levels; this is not so much the case for the fire service (figure 4). We believe this is because fire services provided training to watch commander level where appropriate.
- 4.19. Figure 4: The proportion of respondents within the three services who were aware that their service had adopted JESIP joint doctrine, by level of seniority (middle and senior management aggregated due to small volumes of respondents at a service level).

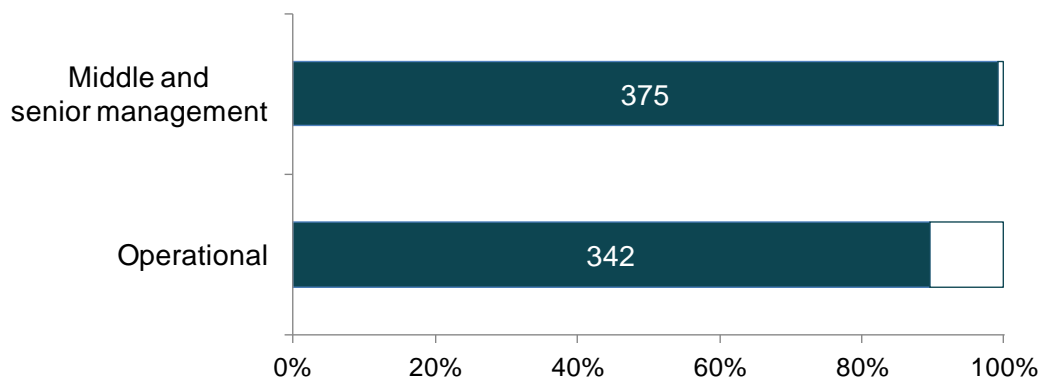


¹² See Annex C

Ambulance



Fire



5. Training

Summary

The overall assessment of training against the JESIP maturity matrix is level 3. This is defined as:

“A nationally consistent approach to joint training, though not formally integrated into existing training programmes.”

Key points

- The approach to joint training is good. The training has been delivered to the command level that each respective service considers to be appropriate.
- There is a risk to effective interoperability because the majority of first responders at major or complex incidents (particularly police) may not have received any JESIP training or awareness.
- Many staff members across the services hold the view that JESIP is a programme of training which has now been concluded.
- Arrangements to carry out future JESIP training for new commanders, new recruits and refresher training are sporadic. In most services it is dependent upon competing priorities.
- The extent to which JESIP awareness and/ or training has been extended to Local Resilience Forums and other partner organisations is extremely varied accepting that this was never the expectation.

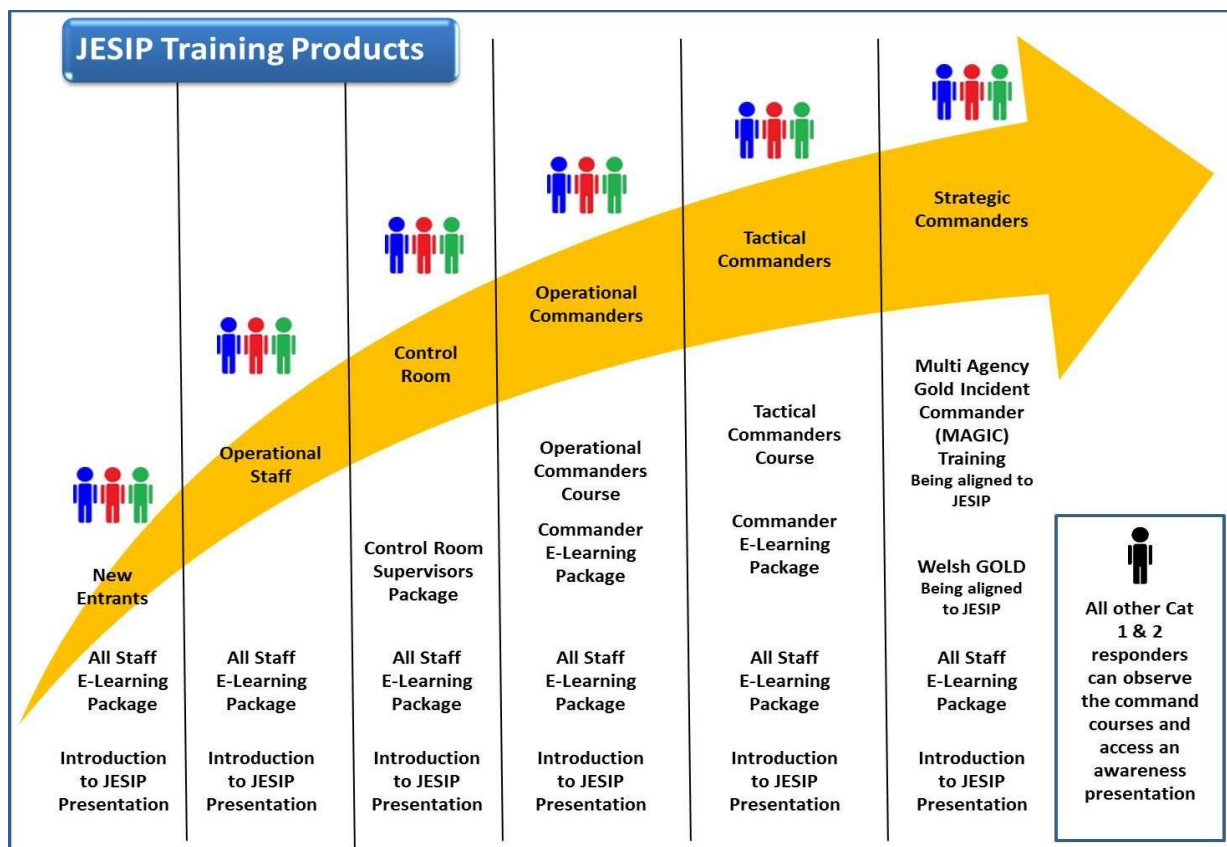
Background

5.1. To support the introduction of joint doctrine and recommend how services should work together at the scene of a major incident, the JESIP team produced a series of training products.

5.2. These included:

- an introduction to JESIP presentation;
- an e-learning package;
- a control room supervisors' course;
- an operational commanders' course; and
- a tactical commanders' course.

Figure 5: JESIP training products



5.3. Nationally, JESIP training was initially provided by the JESIP team to all training representatives from the emergency services. Representatives were then accredited to ‘train the trainers’ and the training cascaded to appropriate commanders and personnel within each service.

Findings from fieldwork

5.4. The approach to joint training is good. Each of the services had conducted an assessment of who should be trained based upon local need and this included control room staff. As a result the rank and role of those trained differed in each of the services and geographically.

5.5. First responders at incidents are at different command levels across the three services. This has created an element of inconsistency which the review team considers could be a risk to effective interoperability. The fieldwork identified that in some cases (police, particularly) it can be hours before a JESIP-trained commander arrives on the scene of a major or complex incident. Of note is that British Transport Police recognised this as a potential risk given their geographical spread and consequently trained a number of first line supervisors (sergeants) as JESIP commanders. This highlights the need for individual services to train commanders at a suitable level to ensure the early arrival of a JESIP-trained commander at a scene, when necessary.

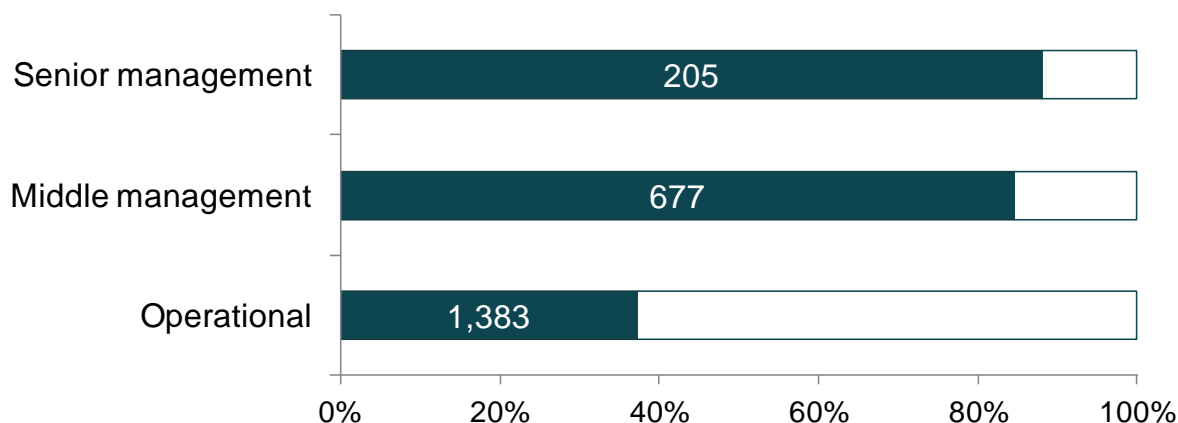
- 5.6. While relevant training products (the presentation and e-learning package) have been made available to all services, the extent to which they have been used is variable, and consequently staff awareness remains low across services. This became more apparent when staff were asked to complete a short knowledge check to confirm their understanding of the principles of JESIP, the Joint Decision Model and METHANE. The level of knowledge was limited. At the very least all staff should receive some awareness of JESIP which could also include an informative video.
- 5.7. In focus groups with staff that had received either the operational or tactical command training, they expressed a positive attitude towards training alongside colleagues from the other blue light services. Many of the staff explained that they felt the benefits of joint training was being able to talk with other colleagues outside an operational environment and having the opportunity to better understand each others capabilities and operational demands.
- 5.8. If the principles for effective scene management were used more regularly, not just for major and complex incidents, this would create greater staff awareness. Most operational staff interviewed expressed the view that they want to have a greater understanding of JESIP and its application. This would continue to build momentum and lead to greater embeddedness.
- 5.9. A similar observation was made by The Rt. Hon Lady Justice Hallett DBE, in her review of the London Bombings of 7 July 2005. A recommendation was made that the 'provision of multi-agency training (specifically London in this instance) for frontline staff was reviewed; in recognition that it is those staff who are tasked with responding to the initial chaos of a major incident. This reinforces the need for first responders across the blue light services to receive JESIP awareness training.
- 5.10. A similar view of JESIP awareness was expressed by Local Resilience Forum members. The level of JESIP awareness and participation in training varied significantly across the regions. We found that in some areas, additional responders such as the Maritime and Coast Guard Agency and the Border Agency had been invited to attend the training and where Local Resilience Forums have been included it has had a positive impact. The opportunity to widen participation in training beyond blue light services has been missed in some areas.
- 5.11. The fieldwork confirmed that the training of control room staff was good and had been well received by staff. The improved level of knowledge enabled supervisors to task staff on-scene to undertake essential cross-agency actions.

- 5.12. While the training had been well received there is very little planned training for the future, specifically for new commanders, new recruits and refresher training (whether single service or multi-agency). This reinforces a belief held by some that the JESIP programme has achieved its objective which was simply to deliver a significant programme of training and is now closed.
- 5.13. It is imperative that services view JESIP training as an ongoing requirement. It should not be viewed as having been delivered as part of a programme which is now complete.
- 5.14. All three services were unequivocal in their view that future JESIP training should continue to be tri-service to ensure the continued sharing of expertise and understanding of capabilities. Our fieldwork established that this had been vital to improving effective interoperability.

Key findings from the survey

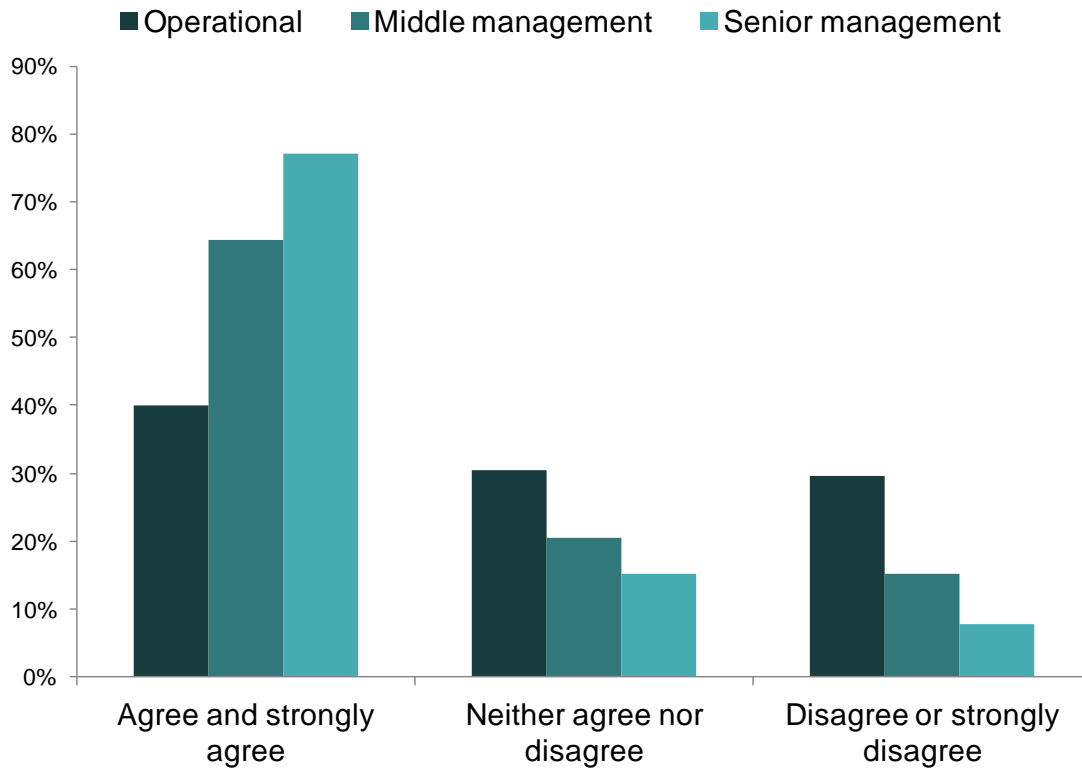
- 5.15. For training, we look at a large subset (93 percent) of the total respondents to the survey, excluding those less likely to use JESIP principles in their day-to-day work, for example, HR staff. Of the respondents in this subset 48 percent (2,265) stated that they had received some form of JESIP training or awareness, highlighting the fact that more needs to be done to make sure that everyone who is likely to attend a major or complex incident has a basic awareness at the very least.
- 5.16. The take up of training across levels of seniority varied considerably, with only 37 percent (1,383) of respondents at an operational level having received some form of JESIP training, compared with 85 percent (677) and 88 percent (205) at middle management and senior management levels respectively (figure 6). See Annex B for survey methodology for management levels.

Figure 6: The proportion of survey respondents from the three blue light services who have received some form of JESIP training, by level of seniority.



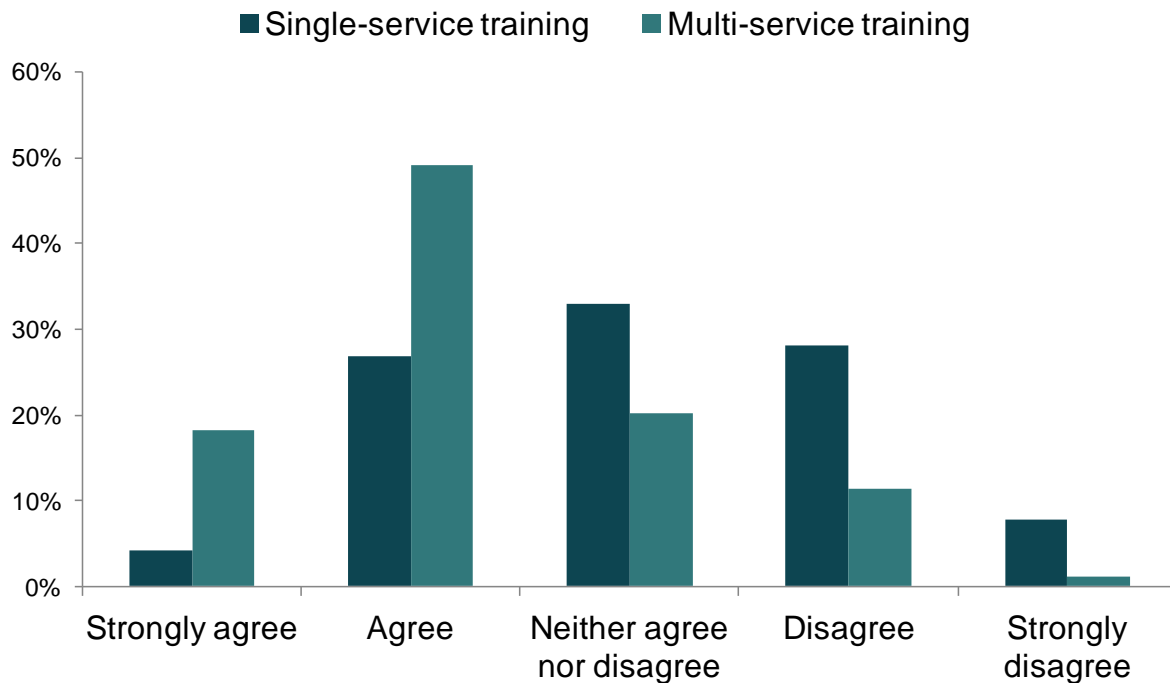
5.17. Those respondents who had received JESIP training were asked whether their training needs had been met: those at a higher level of seniority within the services were more likely to agree or strongly agree (figure 7).

Figure 7: Responses from all three blue light services on whether or not they felt all their training needs had been met to prepare them to work effectively across services at the scene of a major incident, by level of seniority.



5.18. The proportion who either agreed or strongly agreed that their training needs had been met was also higher for those who had undertaken joint training with the other services (figure 8).

Figure 8: Responses from all three blue light services on whether or not they feel all their training needs have been met to prepare them to work effectively across services at the scene of a major incident, by those who received their training joint with other services (1,225), and those who did not (1,040).



Recommendations

Recommendation 1

All operational staff across the blue light services likely to attend operational incidents need at the very least to have an awareness of JESIP regardless of rank or grade.

Recommendation 2

The blue light services need to develop a programme for delivering future tri-service training. This should incorporate refresher training, initial training for newly promoted commanders and awareness for new recruits. It should also be extended to Local Resilience Forums and other category 1 and 2 responders.

6. Testing and exercising (including Airwave)

Summary

The overall assessment of testing and exercising against the JESIP maturity matrix is level 2. This is defined as:

“Some isolated examples of joint testing and exercising, but a highly inconsistent national picture.”

Key points

- There are reasonable testing and exercising programmes across the blue light services. There is some evidence of co-ordination through the Local Resilience Forums, but less so between individual services.
- Multi-agency exercise programmes do not routinely consider risks beyond those identified through Local Resilience Forum Community Risk Registers. Exercises appear to be designed in isolation. They need to incorporate issues identified from alternative sources such as learning following counter terrorism exercises.
- The testing of Airwave was largely consistent across the services but limited to control rooms only. The understanding of its operational capability and interoperable channels was poor.

Background

6.1. One of the aims of JESIP is to ensure that emergency responders are trained and exercised to work together as effectively as possible, at all levels of command, in response to major or complex incidents.

6.2. The JESIP team recognised that:

“Having well-trained and exercised commanders on scene in the early stages of a major or complex incident is an essential element in ensuring an effective joint response.”¹³

6.3. The JESIP team set a number of targets to be achieved which were:

- a multi-agency calendar of regional and national exercises is kept up to date and used to plan training;
- all commanders are tested at an exercise every three years;

¹³ Available at www.jesip.org.uk/wp-content/uploads/2014/09/Legacy-Special-LR.pdf

- interoperability objectives are built into all exercises where there is a joint working element; and
- a toolkit which is kept up to date as a downloadable resource and emergency services are using it.

Findings from fieldwork

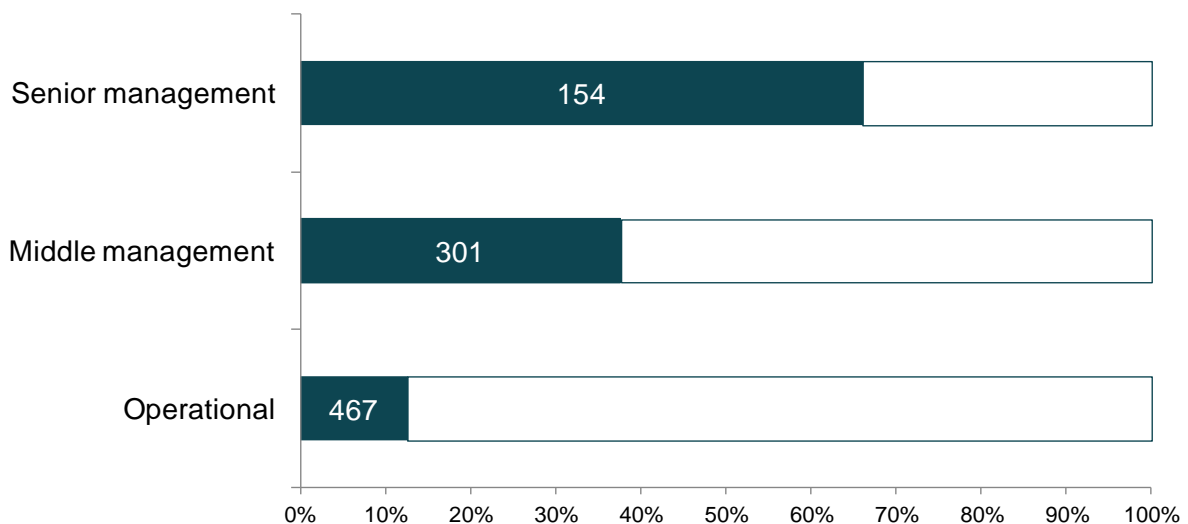
- 6.4. The services reviewed have established individual testing and exercising arrangements in accordance with risk and local requirements. This includes engagement with other organisations as part of licensing requirements (e.g. COMAH¹⁴ sites and airports).
- 6.5. The ambulance services are not always able to participate in all multi-agency exercises. Ambulance services operate across multiple Local Resilience Forums, police forces and fire and rescue services which presents strategic, logistical and resource challenges.
- 6.6. Local Resilience Forums have existing multi-agency exercise arrangements in place to test their preparations against risks identified in the National Risk Assessment and Community Risk Registers. The outcomes and benefits of multi-agency exercises for each respective service are not always made clear during the planning and design stage. This is considered to inhibit participation as services, in particular ambulance trusts, do not see the value in releasing staff unless there are clearly specified exercise aims and objectives that benefit them.
- 6.7. Any exercise programme should consider a wider range of issues and risks against which to test beyond Local Resilience Forum risk registers. Looking to the future, consideration should be given to issues identified through Joint Organisational Learning.
- 6.8. During the fieldwork we were unable to establish whether commanders were subject to a robust three year testing and exercising regime in accordance with the target set by the JESIP programme. The review team consider this target to be overly ambitious and suggest that there are other less resource intensive methods of testing capability.

¹⁴ COMAH – the Control of Major Accident Hazards.

Key findings from the survey

6.9. In the survey, 19 percent of respondents likely to be involved in or responsible for testing and exercising replied that they had undertaken testing and exercising in preparation for a major incident in the last 12 months. The involvement varied depending on the respondent's level of seniority: only 13 percent of those respondents at an operational level, compared with 38 percent at a middle management level and 66 percent at a senior management level (figure 9).

Figure 9: Of those respondents likely to be involved in or responsible for testing and exercising within the three services, the proportion who have taken part in testing and exercising of the response to a major incident in the last 12 months, by level of seniority.



6.10. Of those respondents who had taken part in testing and exercising in the past 12 months, 48 percent (439) had been trained to JESIP operational commander level and above (operational commanders' course, tactical commanders' course, and MAGIC). It was pleasing to find that the majority (89 percent) of the testing and exercising that the survey respondents took part in over the last 12 months was conducted with colleagues from the other services: 96 percent of instances for the fire service, 91 percent for the ambulance service, and 83 percent for the police service.

Airwave

6.11. The review team established that Airwave is regularly tested across the emergency services control rooms visited. Among staff interviewed there was a lack of understanding, and consequent lack of use, of the interoperability channels in training and at incidents. In addition, Airwave tactical advisers (TacAds) are not routinely being consulted or their specialism used effectively.

Recommendations

Recommendation 3

Multi-agency testing and exercising programmes need to be better co-ordinated and risk-based beyond Local Resilience Forum Community Risk Registers and National Risk Assessments. These should be supported by a discrete budget allocation. The benefits for each service and trust need to be made clear at the design stage. The exercising programme should include issues identified through the Joint Organisational Learning process.

Recommendation 4

There needs to be a greater knowledge and understanding of the capabilities of Airwave and the use of the interoperable channels.

7. Joint Organisational Learning

Summary

The overall assessment of Joint Organisational Learning against the JESIP maturity matrix is level 1. This is defined as:

“Consistent failures to respond to lessons which have been identified.”

Key points

- The review team acknowledges that the Joint Organisational Learning process has only been live since April 2015.
- The identification of issues through established single-service processes in those services reviewed is considered to be good. How those issues and lessons are then shared with staff, and how that learning is integrated and tested is largely missing.
- The knowledge and understanding of the Joint Organisational Learning process and application was poor across all three services. There is a requirement for greater clarity concerning the type and scale of incident which should be recorded.

Background

7.1. Following a review of major incident public inquiries and reviews by the Cabinet Office in 2013, a number of common failures which had an impact on multi-agency interoperability were identified and documented in the Pollock report.¹⁵

7.2. The report identified that the common causes of failure were:

- poor working practices and organisational planning;
- inadequate training;
- ineffective communication;
- no system to ensure that lessons were learned and taught;
- lack of leadership;

¹⁵: *Emergency Planning College Occasional Papers New Series Number 6 October 2013 Review of Persistent Lessons Identified Relating to Interoperability from Emergencies and Major Incidents since 1986*; Dr Kevin Pollock.

- absence of no blame culture;
 - failure to learn lessons;
 - no monitoring /audit mechanism; and
 - previous lessons/reports not acted upon.
- 7.3. To address the failures in learning lessons and ensuring that they were subsequently cascaded to all blue light services and Local Resilience Forums, the JESIP team developed the Joint Organisational Learning process.
- 7.4. The Joint Organisational Learning process aims to provide a consistent and accountable mechanism to ensure lessons from incidents, testing and exercising are identified and acted upon continually to improve interoperability.
- 7.5. Learning will be gathered from emergency services and local resilience forums, monitored and analysed by the JESIP team and, where required, recommendations for action may be made. For issues of national impact and importance, the JESIP team will propose actions and seek approval from the Interoperability Board and, if approved, will then cascade any actions to the services affected to implement locally.

Findings from fieldwork

- 7.6. We found that the identification of issues and lessons identified through established internal or Local Resilience Forums processes (including debriefs) was good. How the issues and lessons are then shared with staff, learned, and that learning integrated and tested is largely missing or achieved through ad hoc processes.
- 7.7. The fire and rescue service have some good processes in place through which lessons are identified, logged, managed and then made available for individuals to learn in their own time with records kept of these actions.
- 7.8. Across all three services the Joint Organisational Learning process and its future purpose is not clearly understood. Those staff who did have a limited knowledge of the Joint Organisational Learning process raised concerns about what should be included and how it should be used. Staff were unsure how ResilienceDirect¹⁶ would continue to operate alongside the Joint Organisational Learning process, which system had precedence and what the difference would be.

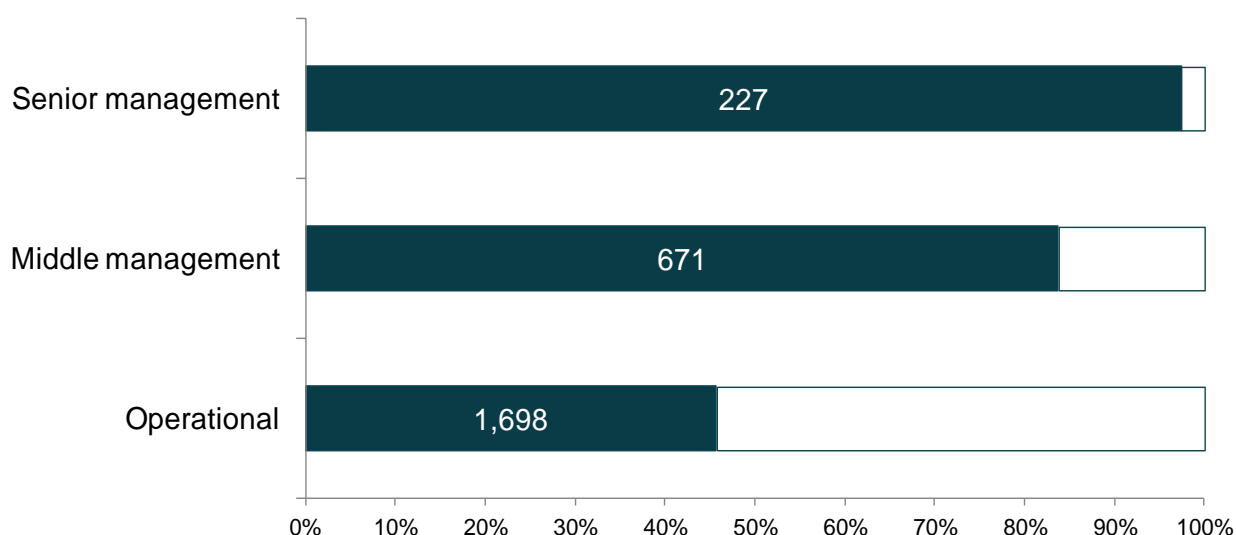
¹⁶ ResilienceDirect is a web-based system which enables UK emergency responders to share information.

- 7.9. This limited knowledge of the Joint Organisational Learning process is surprising given that the JESIP team has provided 11 workshops and trained nominated staff from across the respective services whose role it is to actively manage the Joint Organisational Learning process by inputting the lessons identified and sharing relevant information. That said, we acknowledge that the Joint Organisational Learning process has only been live since April 2015.
- 7.10. No clear link was established between the Joint Organisational Learning process and the Local Resilience Forums' testing and exercising programme.
- 7.11. In order not to flood the system, there needs to be clarity on the scale of incidents and the lessons identified used to populate Joint Organisational Learning. It was clear throughout the fieldwork that the knowledge of the Joint Organisational Learning process was poor; consequently the review team were unable to carry out any meaningful testing.

Key findings from the survey

- 7.12. Over half of respondents (53 percent, 2,720) were aware that their service had a process for identifying lessons following a major incident. This in itself is acceptable given that major incidents are infrequent. Those individuals that fell into the more junior ranks and were therefore likely to be first responders had the least knowledge of their service's lessons process (figure 10).

Figure 10: The proportion of respondents who were aware that their service has a process for identifying lessons following major incidents, by level of seniority.



- 7.13. Of those respondents who were aware of such a process, 47 percent (1,278) believed the process was conducted jointly with the other emergency services.

- 7.14. Around two thirds (66 percent, 1,792) of those respondents who were aware of the process for identifying lessons within their service characterised their service's ability to learn lessons it identified itself as 'good' or 'very good' (73 percent for fire, 62 percent for ambulance, and 64 percent for police). The picture was very similar among those who believed their lessons process is conducted jointly with the other services, with 65 percent (826) characterising their service's ability to learn lessons identified by other emergency services as 'good' or 'very good' (67 percent for fire, 57 percent for ambulance, and 64 percent for police).
- 7.15. While this would appear to be a positive response it did not reflect the views of staff who were interviewed during the fieldwork. The majority of staff interviewed clearly stated that they were not aware of their organisation's learning processes following operational incidents.

Recommendation

Recommendation 5

The blue light services need to have more effective processes in place for learning and embedding lessons locally and, for sharing the learning with staff. The knowledge and understanding of how the Joint Organisational Learning process is used to identify and record multi-agency lessons which are to be shared and escalated across services, needs to be greatly improved.

8. Culture

Summary

The overall assessment of culture against the JESIP maturity matrix is level 3. This is defined as:

“A national consistent commitment towards interoperable working, but not yet fully ingrained as part of the culture.”

Key points

- The tri-service approach in delivering the training is considered hugely beneficial.
- Working relationships across the three services visited are markedly improved (supported by survey results – Annex B). Each service now has a greater appreciation of each others’ roles, capabilities and operational demands.
- The formation of joint doctrine has provided the three services with an agreed structure and framework within which to work.

Background

- 8.1. Unlike joint doctrine, training, testing and exercising and Joint Organisational Learning, culture is not a specific area of work for the JESIP team. For this reason, no targets or milestones exist. It is however included on the JESIP maturity matrix.
- 8.2. The blue light services all possess their own organisational culture. What the JESIP maturity matrix seeks to judge is the extent to which each of the services is committed to interoperable working.
- 8.3. The review team understands that culture has now been removed from the maturity matrix as a specific theme. However, we consider that the findings from our fieldwork are notable.
- 8.4. During fieldwork, the review team found a strong commitment to working together and improving the service provided by each of the blue light services. It is clear that there are many motivating factors to improving interoperability, which are not all directly attributable to JESIP.
- 8.5. Many of the senior staff stated that interoperability between services already exists and JESIP had not been the primary driver for changing attitudes. There was an acknowledgement that JESIP has assisted greatly by providing

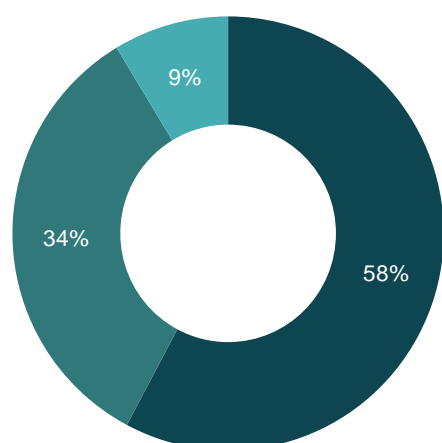
a focus. The formation of joint doctrine centrally enabled services to develop a consistent language and framework within which to work.

- 8.6. Joint training of operational and tactical commanders has also facilitated a change in culture. Staff who attended these courses spoke positively about the greater understanding of the roles, responsibilities and capabilities of their colleagues in the other services and how they could better assist each other. It was therefore unsurprising that lower ranking staff, who did not have the opportunity to attend the joint training, had less understanding of how they could work interoperably with the other services.
- 8.7. The review team also visited the devolved assemblies of Northern Ireland and Wales and found that they largely mirror what is happening across the United Kingdom with some minor differences.

Key findings from the survey

- 8.8. We were pleased to find from our survey that 58 percent (2,950) of all respondents felt that they had a fully ingrained culture of working with the other emergency services (figure 11). This was most pronounced in the fire service (76 percent, 585), followed by the ambulance service (62 percent, 241) and then the police service (54 percent, 2,124).

Figure 11: Responses to the statement: “My service has a fully ingrained culture of working with other emergency services at a major incident”.

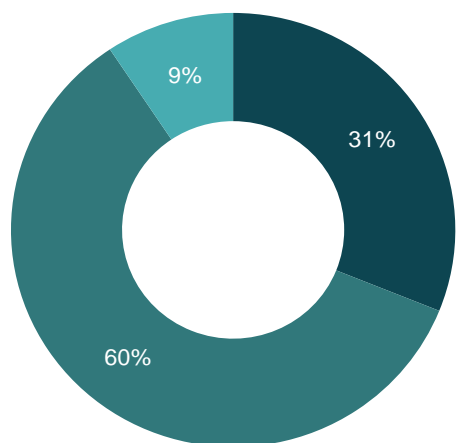


- Agree and strongly agree
- Neither agree nor disagree
- Disagree and strongly disagree

Please note, figures may not sum to 100 percent due to rounding.

8.9. Of the respondents, 31 percent (1,588) felt that their relationship with the other emergency services had got 'better' or 'considerably better' over the last 12 months, compared with only 9 percent (477) who felt it had got 'worse' or 'considerably worse' (figure 12).

Figure 12: The characterisation by survey respondents of the nature of their service's relationship with the other emergency services over the last 12 months.

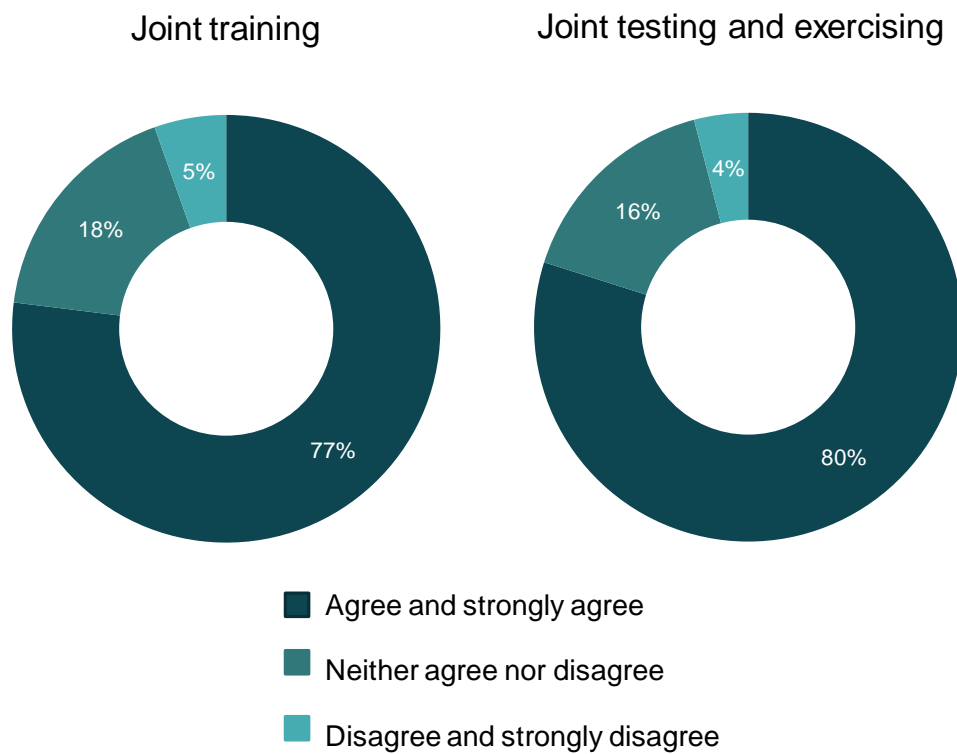


- Better and considerably better
- No change
- Worse and considerably worse

Please note, figures may not sum to 100 percent due to rounding.

8.10. These proportions change considerably when looking at the subset of respondents who have experienced joint training or joint training and exercising. The proportion of respondents who believe they have a fully engrained culture of working with the other services increases substantially (figure 13).

Figure 13: Responses to the statement “My service has a fully ingrained culture of working with other emergency services at a major incident” for respondents who had experienced joint training or joint testing and exercising.



Please note, figures may not sum to 100 percent due to rounding.

9. Governance

- 9.1. During the fieldwork it became quite clear that the organisations visited often considered that JESIP, as a programme, had delivered products and training by deadlines all supported from the centre. All the emergency services visited had welcomed this drive and support which provided a focus for all. It also became clear during the fieldwork that many organisations consider that they have reached the finishing line and the emphasis within those organisations has switched elsewhere with different organisational pressures.
- 9.2. Continued oversight is necessary at the highest level to ensure that all blue light services remain focused on improving interoperability and embeddedness of the principles. Without this scrutiny there is clear risk that progress achieved to date will be lost.

Recommendation

Recommendation 6

Ministerial oversight of JESIP must continue to ensure the focus remains firmly around improving interoperability across the three services beyond major and complex incidents and into business as usual especially given competing priorities. This should be underpinned by a programme of assurance to assess progress against the revised maturity matrix.

10. Additional observations

- 10.1. The JESIP Interoperability Board should be clear on the parameters for JESIP success in achieving level 4 on the maturity matrix, in accordance with the agreed strategy, by 2020. The maturity matrix will need to be revised so that progress can be accurately assessed. This will enable the JESIP team to plan and consider resources required to further embed JESIP.
- 10.2. For this to be achieved, central guidance and direction, with the ultimate aim of achieving full embeddedness of JESIP by 2020, is essential. There is a clear danger that without this, competing priorities and financial pressures will cause JESIP to lose momentum and drive, and that the good work achieved so far will be lost. In addition the senior leadership across the blue light services must continue to support the embedding of the principles, testing and exercising, including the use of Airwave.
- 10.3. It is imperative that all three services continue to fully adjust their doctrine, plans, policies and procedures to incorporate JESIP. This will continue to embed JESIP at all levels through the services and improve joint working in preparation and response to incidents.
- 10.4. There is a significant role for the JESIP team in maintaining momentum, refresher training and extending JESIP to the wider responder community. Consideration should be given to revised roles and responsibilities, including any funding requirements to deliver this.
- 10.5. The JESIP team still have to provide a quantity of Joint Organisational Learning training and establish this process across services. As the Joint Organisational Learning process develops it will require a significant infrastructure, which could become resource intensive both for the JESIP team and the JESIP Interoperability Board. This needs to be carefully managed in terms of resourcing, finances and expectations.
- 10.6. Further JESIP training should continue to be provided in a tri-service format. The benefits of this training have been widely recognised and are considered invaluable. Consideration should be given to extending the tri-service approach into all areas of training (including testing and exercising). This will provide clear benefits in efficiency and effectiveness as well as ongoing consistency in the training and improved working relationships.
- 10.7. JESIP is viewed as enabling greater collaboration and interoperability across the emergency services. Consideration should be given to developing the HMIC-led tri-service review process, which is recognised as an efficient, effective and innovative model for providing assurance. Undoubtedly,

ministers will require on-going assurance on the success of JESIP and emergency service collaboration.

- 10.8. The College of Policing, the Fire Service College and the Emergency Planning College have crucial roles in embedding JESIP. They all provide excellent opportunities for future collaborative arrangements in regard to tri-service training and the review team is aware that discussions are already taking place. The need for a coherent and cohesive approach to provide ongoing support to JESIP is vital.

Recommendations

Training

Recommendation 1

All operational staff across the blue light services likely to attend operational incidents need at the very least to have an awareness of JESIP regardless of rank or grade.

Recommendation 2

The blue light services need to develop a programme for delivering future JESIP tri-service training. This should incorporate refresher training, initial training for newly promoted commanders and awareness for new recruits. It should also be extended to Local Resilience Forums and other category 1 and 2 responders.

Testing and exercising (including Airwave)

Recommendation 3

Multi-agency testing and exercising programmes need to be better coordinated and risk-based beyond Local Resilience Forum Community Risk Registers/National Risk Assessments. These should be supported by a discrete budget allocation. The benefits for each service and trust need to be made clear at the design stage. The exercising programme should include Issues identified through the Joint Organisational Learning process.

Recommendation 4

There needs to be a greater knowledge and understanding of the capabilities of Airwave and the use of the interoperable channels at incidents.

Joint Organisational Learning

Recommendation 5

The blue light services need to have more effective processes in place for learning and embedding lessons locally and, for sharing the learning with staff. The knowledge and understanding of how the Joint Organisational Learning process is used to identify and record multi-agency lessons which are to be shared and escalated across services, needs to be greatly improved.

Governance

Recommendation 6

Ministerial oversight of JESIP must continue to ensure the focus remains firmly around improving interoperability across the three services beyond major and complex incidents and into business as usual especially given competing priorities. This should be underpinned by a programme of assurance.

Annex A – Organisations reviewed or consulted

Blue light services

Merseyside Police	Merseyside Fire and Rescue Service	North West Ambulance Service
Northumbria Police	Tyne and Wear Fire and Rescue Service	North East Ambulance Service
South Yorkshire Police	South Yorkshire Fire and Rescue Service	Yorkshire Ambulance Service
Lincolnshire Police	Lincolnshire Fire and Rescue Service	East Midlands Ambulance Service
Norfolk Police	Norfolk Fire and Rescue Service	East of England Ambulance Service
Kent Police	Kent Fire and Rescue Service	South East Coast Ambulance Trust
Hampshire Constabulary	Hampshire Fire and Rescue Service	South Central Ambulance Service
Staffordshire Police	Staffordshire Fire and Rescue Service	West Midlands Ambulance Service
Devon and Cornwall Police	Devon and Somerset Fire and Rescue Service	South West Ambulance Service
Metropolitan Police Service	London Fire Brigade	London Ambulance Service

Other agencies

Health and Safety Executive Wales	Northern Ireland
College of Policing	Emergency Planning College
Local Resilience Forum Representatives	British Transport Police

Annex B – HMIC survey

Joint Emergency Services Interoperability Principles (JESIP): HMIC survey

Methodology

HMIC designed a survey to gather the views of personnel across the three blue-light services, based around review criteria to assess how well embedded the principles of JESIP were across the emergency services, and ran it online between 22 June 2015 and 24 July 2015.

HMIC sent the survey to all police forces, fire and rescue services and ambulance services/trusts across England and Wales, with a request that they circulate it to all personnel within their organisation.

HMIC received over 5,000 responses, comprising 3,947 members of the police force, 770 members of the fire and rescue service, and 390 members of the ambulance service.

Because the survey was not designed to be statistically representative, the results need to be considered with the following points in mind:

- completing the survey was voluntary, so there is a risk that those with biased opinions feature disproportionately;
- HMIC does not know how the survey was promoted by forces or to whom it was sent, so there is a risk that those with particular opinions feature disproportionately;
- response rates varied considerably between the 105 services; and
- as with all surveys, we cannot guarantee the integrity of each response. In particular, it is possible some respondents completed it several times or answered untruthfully. As such, the results should be taken as indicative of what is felt by personnel in the blue-light services, but are not statistically representative.

Definitions

Operational cohort definition: up to the rank of Sergeant (police), Watch Manager (fire) or Paramedic (ambulance), and including call-handlers and dispatchers in the control rooms.

Middle management cohort definition: from the rank of Inspector (police), Station Manager A (fire) or Advanced Paramedic (ambulance), up to the rank of Chief

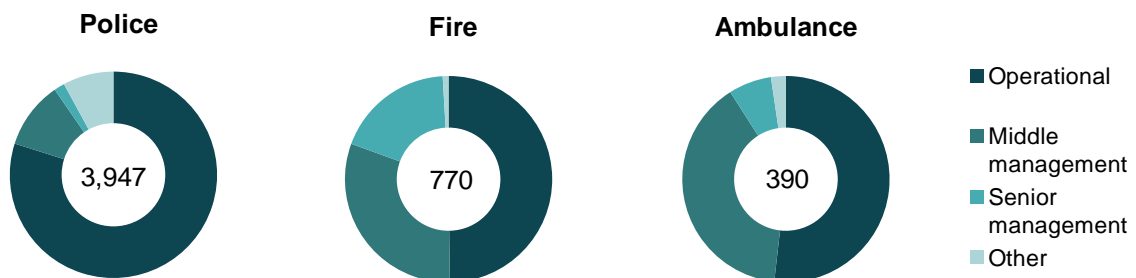
Inspector (police), Station Manager B (fire) or Operational Manager (ambulance), and including control room managers and supervisors.

Senior and strategic management cohort definition: the rank of Superintendent (police), Group manager (fire), or Divisional Manager (ambulance) and above, and including Divisional Manager for Controls.

Other cohort definition: predominantly comprising staff, including those in administrative, human resources, clerical, financial, estates management and technical roles.

Some discretion has been used to assign respondents to the different cohorts above; as such, the associated results should be taken as indicative of what is felt by blue light personnel at different levels of seniority, but not statistically representative.

Figure A: Profile of respondents from each of the three blue-light services, broken down by level of seniority.

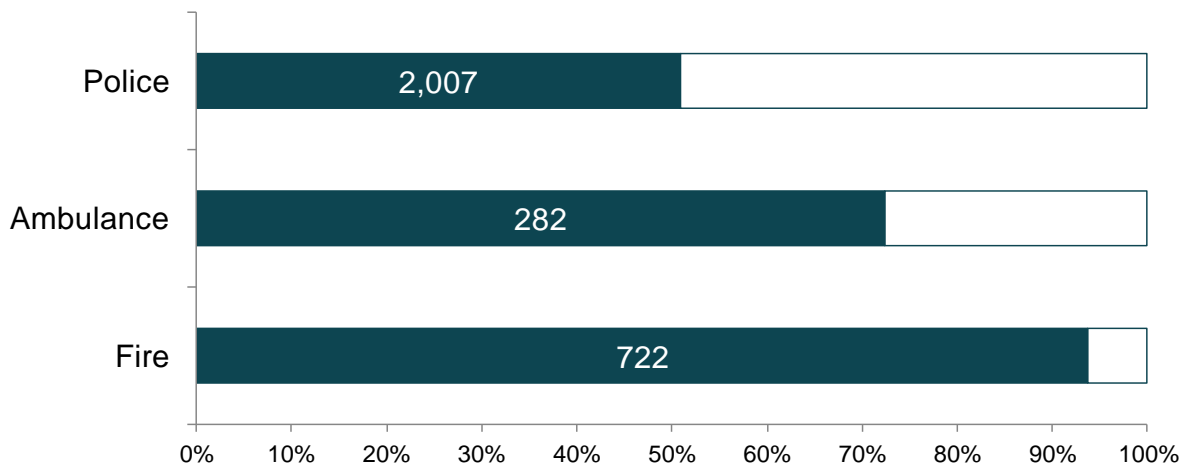


In the training, and testing and exercising sections, we looked at a large subset of the total respondents to the survey, excluding the 'other' cohort as those less likely to use JESIP principles in their day-to-day work. This subset amounts to around 93 percent of the total respondents (4,752).

Doctrine: findings from survey

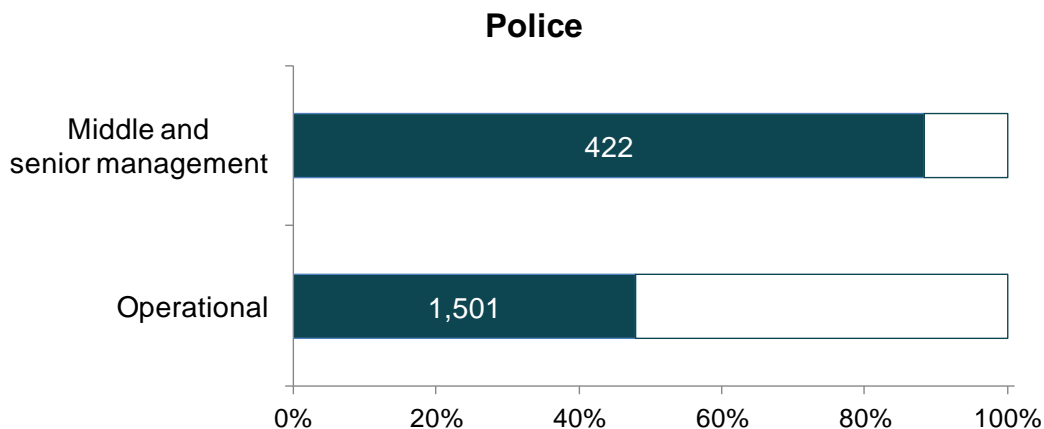
Of the 5,107 respondents across the services only 59 percent (3,011) reported that they positively knew that their service had adopted JESIP joint doctrine. The picture was not consistent across services, however, with 51 percent (2,007) of respondents from the police aware that their service had adopted the joint doctrine, compared with 72 percent (282) and 94 percent (722) of ambulance and fire respondents, respectively.

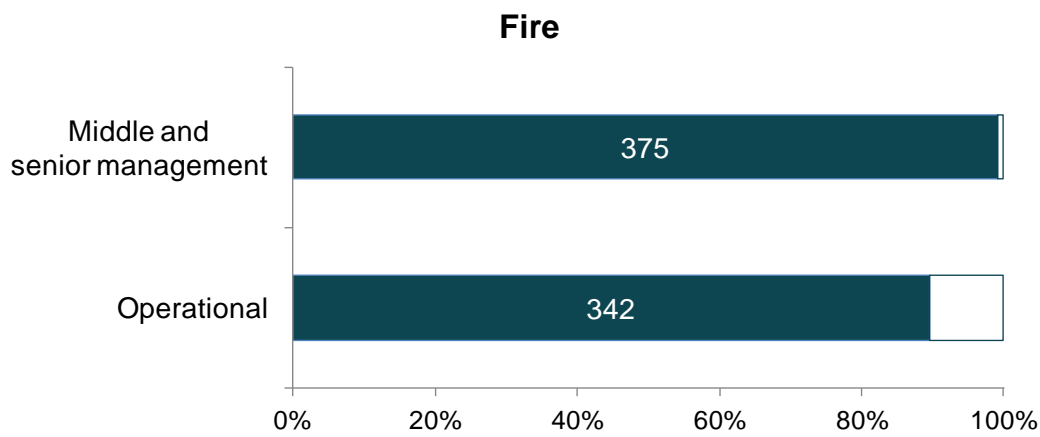
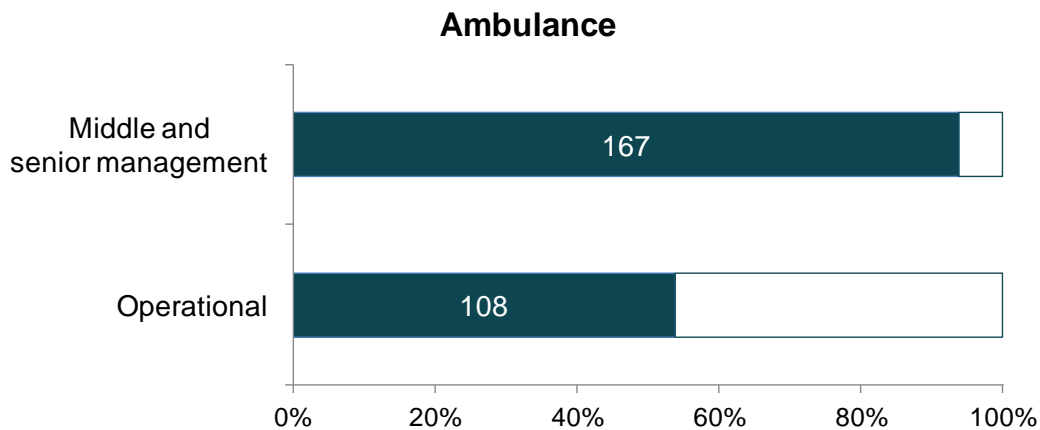
Figure B: The proportion of respondents from each of the blue light services who were aware that their service had adopted JESIP joint doctrine.



This has to be viewed, however, in light of the fact that the profile of respondents at different levels of seniority for each service varied (see methodology), and the proportion of respondents aware their service had adopted JESIP doctrine was not consistent across those levels of seniority. Unsurprisingly, a higher proportion of respondents at more senior ranks were aware of their service’s adoption of JESIP joint doctrine. This disparity is particularly marked for police and ambulance.

Figure C: The proportion of respondents within the three services who were aware that their service had adopted JESIP joint doctrine, by level of seniority (middle and senior management aggregated due to small volumes of respondents at a service level).





There were a number of respondents across the three services who did not know that their service had adopted joint doctrine, but were aware that their service uses the mnemonic METHANE (12 percent of all respondents) or were aware of the Joint Decision Model (8 percent of all respondents), suggesting that services may have embedded the principles into their core policies as opposed to having separate JESIP documents.

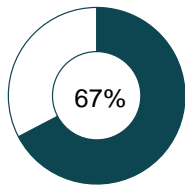
Of all respondents, 61 percent (3,121) were aware that their service uses METHANE to pass information about a major incident, and 55 percent (2,801) were aware of the Joint Decision Model. It was of some concern that of those who responded that they knew their service used the METHANE model or the Joint Decision Model, a number reported that they did not feel confident in using these methods at the scene of an incident; this amounted to a considerable proportion of respondents at lower ranks.

Figure D: Proportion of those respondents who were both aware that their service uses METHANE and confident using it to establish shared situational awareness at the scene of a major incident. Responses are split by service and level of seniority. ¹⁷¹⁸

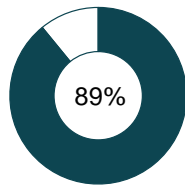
* Since the volumes of survey respondents at a breakdown by service and seniority can be small, where they number less than 100 we ask readers to be aware that small changes to the number may have a large effect on proportions.

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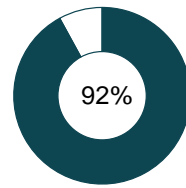
Fire - operational



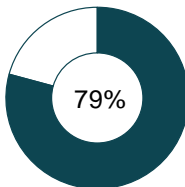
Fire - middle mgt



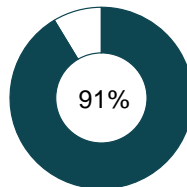
Fire - senior mgt



Ambulance - operational

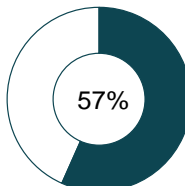


Ambulance - middle mgt

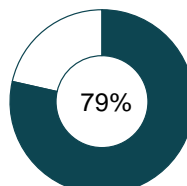


Ambulance - senior mgt**

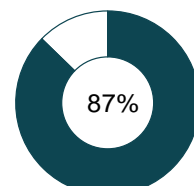
Police - operational



Police - middle mgt

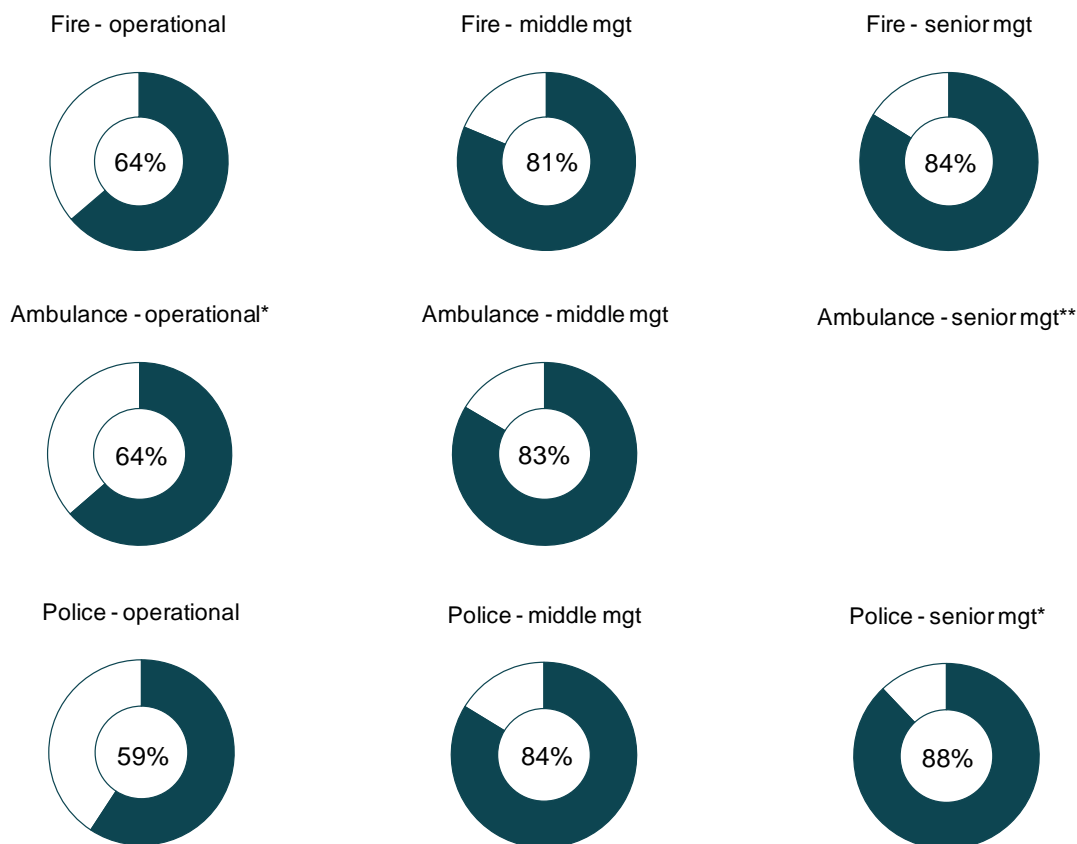


Police - senior mgt*



** Since the volumes of survey respondents at a breakdown by service and seniority can be small, where they number less than 50 we have excluded proportions from any figure, as they may be misleading.

Figure E: Proportion of those respondents who were both aware of the Joint Decision Model and confident in using it at the scene of a major incident. Responses are split by service and level of seniority.¹⁹²⁰



Training: findings from survey

In the training section, we look at a large subset (93 percent, 4,752) of the total respondents to the survey, excluding those less likely to use JESIP principles in their day-to-day work, for example, HR staff.

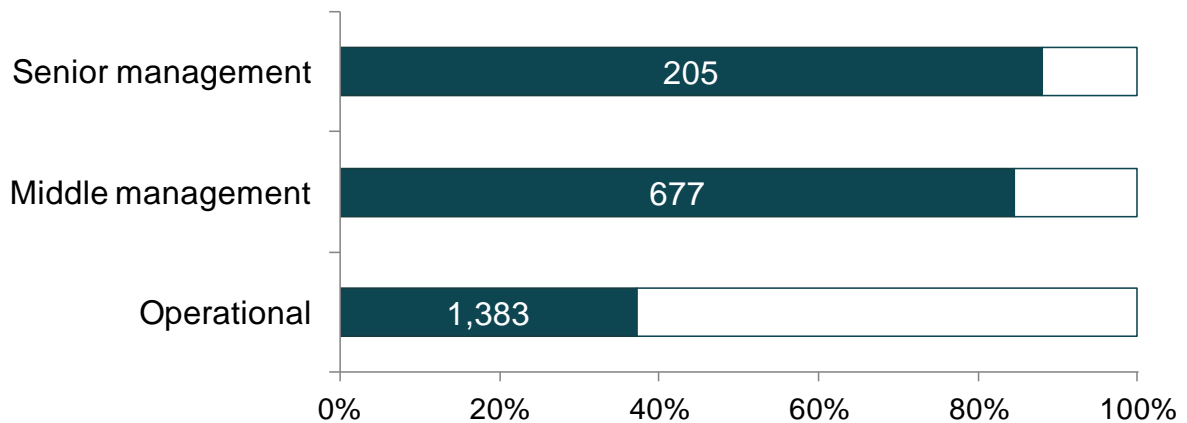
Of this subset of the survey, 48 percent (2,265) stated that they had received some form of JESIP training or awareness, highlighting the fact that more needs to be done to make sure that everyone who is likely to attend a major incident, or to interact directly with those attending, has a basic awareness at the very least.

* Since the volumes of survey respondents at a breakdown by service and seniority can be small, where they number less than 100 we ask readers to be aware that small changes to the number may have a large effect on proportions.

** Since the volumes of survey respondents at a breakdown by service and seniority can be small, where they number less than 50 we have excluded proportions from any figure, as they may be misleading.

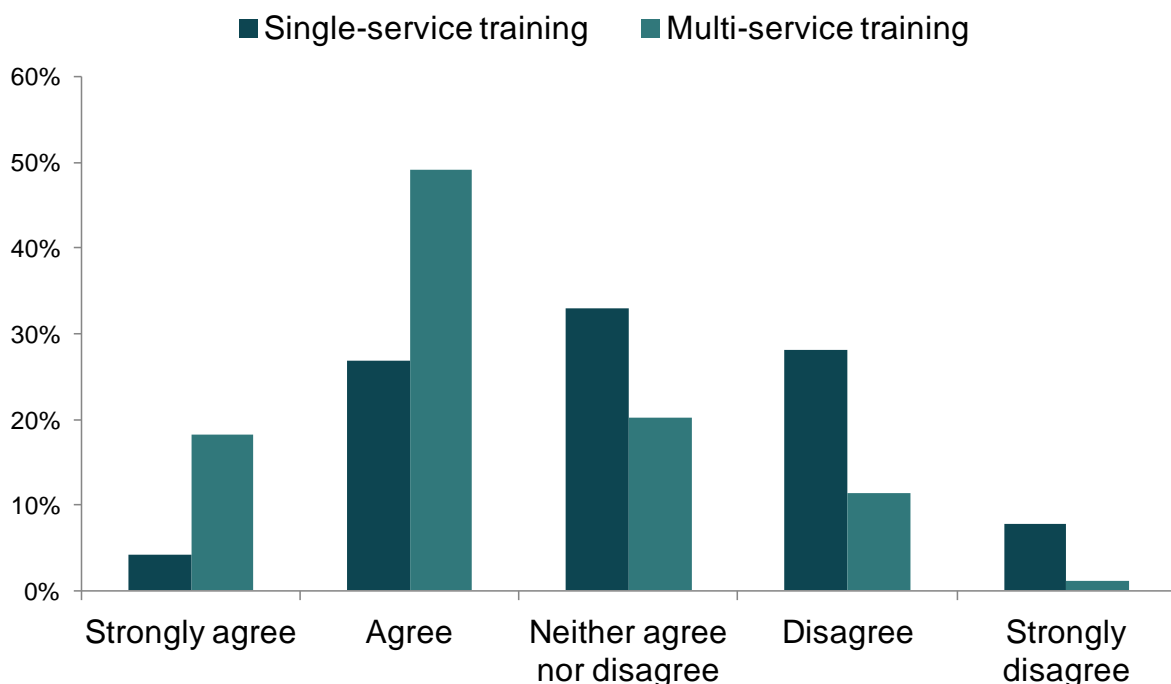
However, we found the take up of training across levels of seniority varied considerably, with only 37 percent (1,383) of respondents at an operational level having received some form of JESIP training, compared with 85 percent (677) and 88 percent (205) at a middle management and senior management level, respectively.

Figure F: The proportion of survey respondents from the three blue-light services who have received some form of JESIP training, by level of seniority.



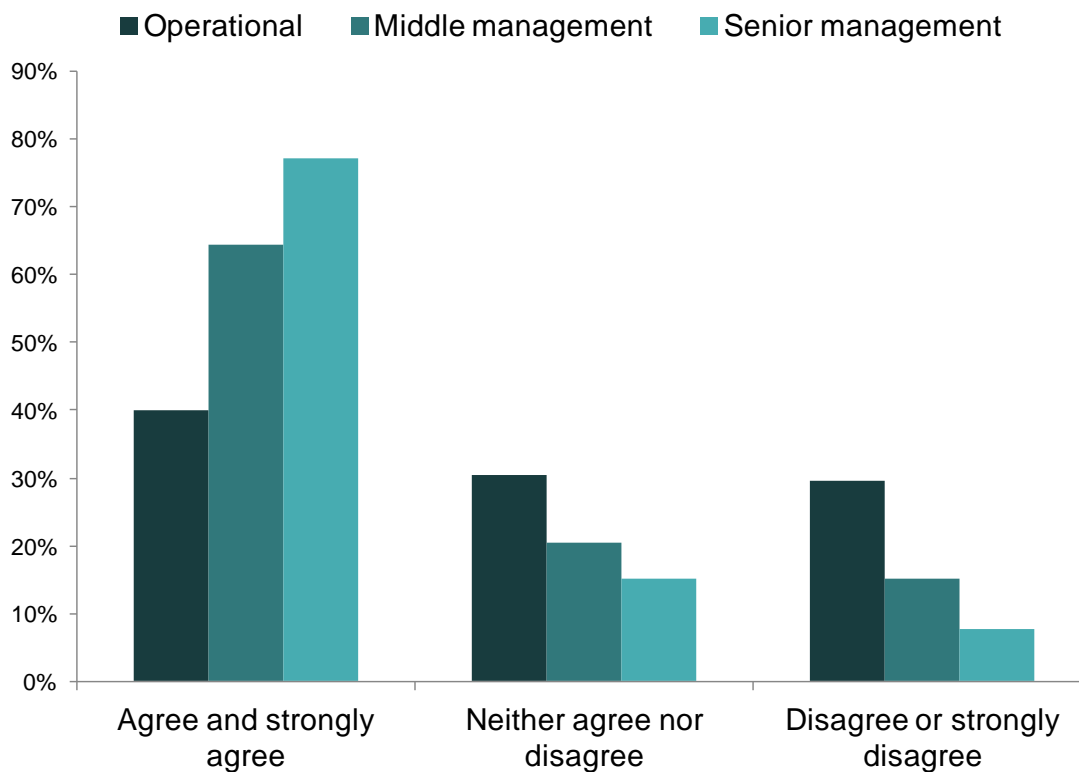
When asked if those who had attended training believed that their training needs had been met, we found a number of respondents (526) who either disagreed or strongly disagreed. This was less pronounced in those that had undertaken joint training.

Figure G: Responses from all three blue-light services on whether or not they felt all their training needs had been met to prepare them to work effectively across services at the scene of a major incident. The data is split by those who received their training joint with other services (1,225), and those who did not (1,040).



Of the survey respondents, a higher proportion of those at a higher level of seniority within the services believed that their training needs had been met.

Figure H: Responses from all three blue-light services on whether or not they felt all their training needs had been met to prepare them to work effectively across services at the scene of a major incident, by level of seniority.

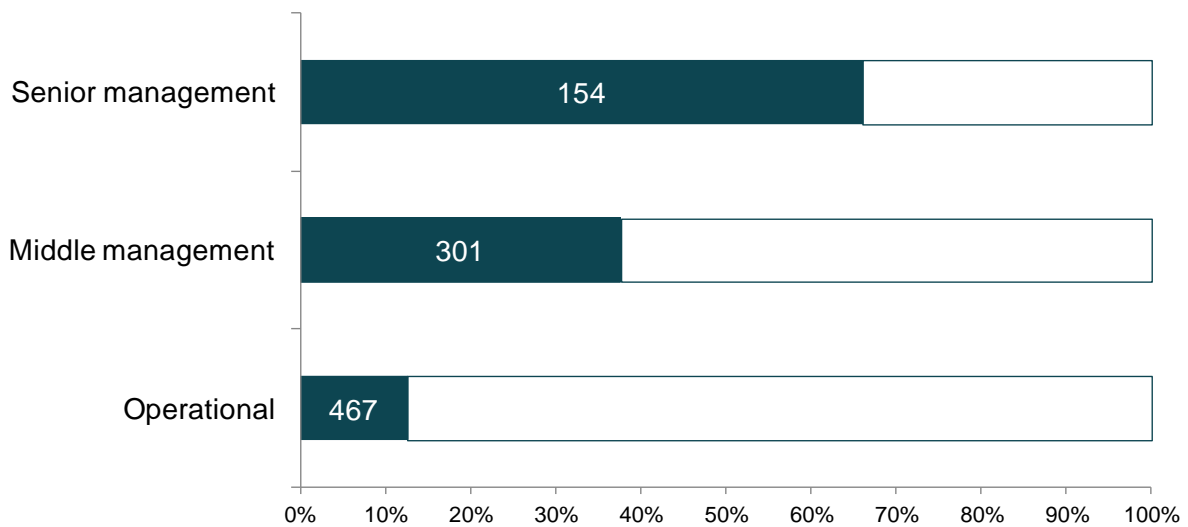


Testing and exercising: findings from survey

In the testing and exercising section, we look at a large subset (93 percent, 4,752) of the total respondents to the survey, excluding those less likely to use JESIP principles in their day-to-day work, for example, HR staff.

In this subset of the survey, 19 percent (922) of all those respondents likely to be involved in or responsible for testing and exercising replied that they had undertaken testing and exercising of the response to a major incident in the last 12 months. Only 13 percent (467) of those respondents at an operational level had completed testing and exercising, compared with 38 percent (301) at a middle management level and 66 percent (154) at a senior management level.

Figure I: The proportion of respondents likely to be involved in or responsible for testing and exercising within the three services who have taken part in testing and exercising of the response to a major incident in the last 12 months, by level of seniority.



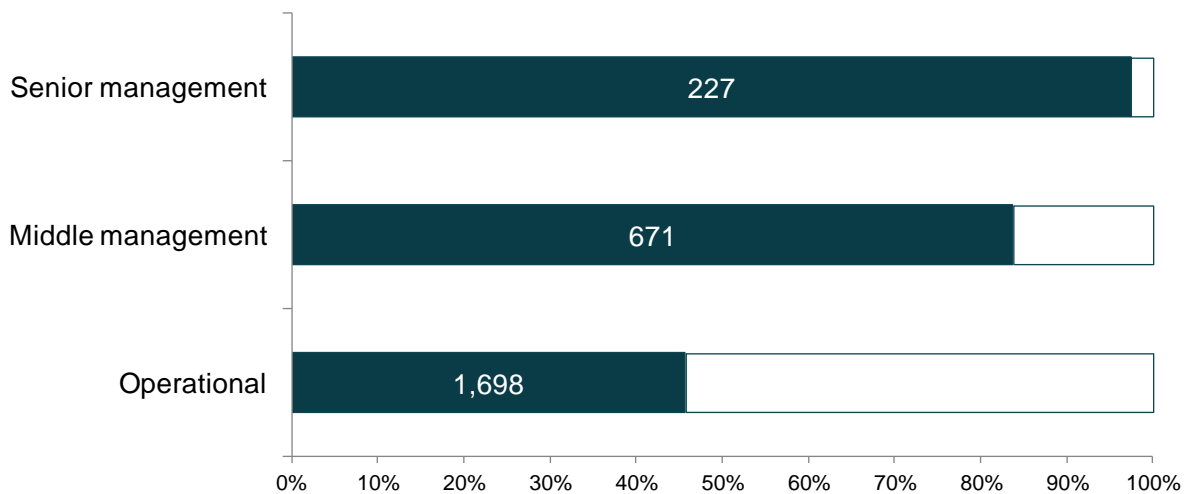
Of those respondents who had taken part in testing and exercising in the past 12 months, 48 percent (439) had been trained to JESIP operational commander level and above (operational commanders course, tactical commanders course, and multi-agency gold incident commander (MAGIC) training); this corresponds to 51 percent of all respondents trained to that level having been involved in testing and exercising within the last 12 months.

It was pleasing to find that the majority (89 percent) of the testing and exercising that the survey respondents took part in over the last 12 months was conducted with colleagues from the other services: in 96 percent of instances for the fire service, 91 percent for the ambulance service, and 83 percent for the police service.

Joint Organisational Learning: findings from survey

Over half of respondents (53 percent, 2,720) were aware that their service had a process for identifying lessons following a major incident. Unsurprisingly, those individuals that fell into the more junior ranks and were therefore likely to be first responders had the least knowledge of their service's lessons process.

Figure J: The proportion of respondents who were aware that their service has a process for identifying lessons following major incidents, by level of seniority.



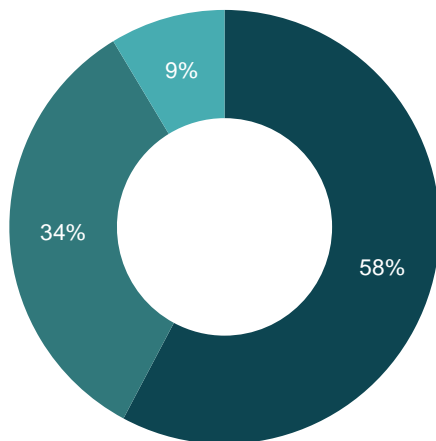
Of those respondents who were aware of such a process, 47 percent (1,278) believed the process was conducted jointly with the other emergency services.

Around two thirds (66 percent, 1,792) of those respondents who were aware of the process for identifying lessons within their service characterised their service's ability to learn lessons it identified itself as 'good' or 'very good' (73 percent for fire, 62 percent for ambulance, and 64 percent for police). The picture was very similar among those who believed their lessons process is conducted jointly with the other services, with 65 percent (826) characterising their service's ability to learn lessons identified by other emergency services as 'good' or 'very good' (67 percent for fire, 57 percent for ambulance, and 64 percent for police).

Culture: findings from survey

We found that 58 percent (2,950) of all respondents felt that they had a fully ingrained culture of working with the other emergency services ('agree' or 'strongly agree'). This was most pronounced in the fire service (76 percent, 585), followed by the ambulance service (62 percent, 241) and then the police service (54 percent, 2,124).

Figure K: Responses to the statement: “My service has a fully ingrained culture of working with other emergency services at a major incident”

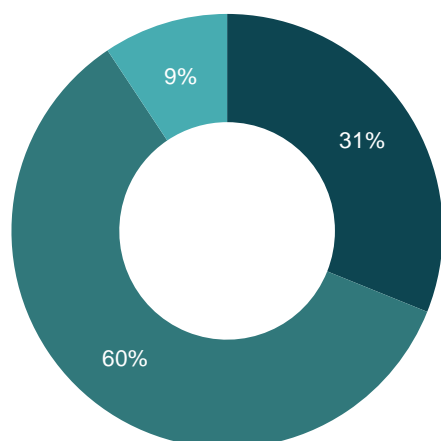


- Agree and strongly agree
- Neither agree nor disagree
- Disagree and strongly disagree

Please note, figures may not sum to 100 percent due to rounding.

Of the respondents, 31 percent (1,588) felt that their relationship with the other emergency services had got 'better' or 'considerably better' over the last 12 months, compared with only 9 percent (477) who felt it had got 'worse' or 'considerably worse'.

Figure L: The characterisation by survey respondents of the nature of their service's relationship with the other emergency services over the last 12 months.

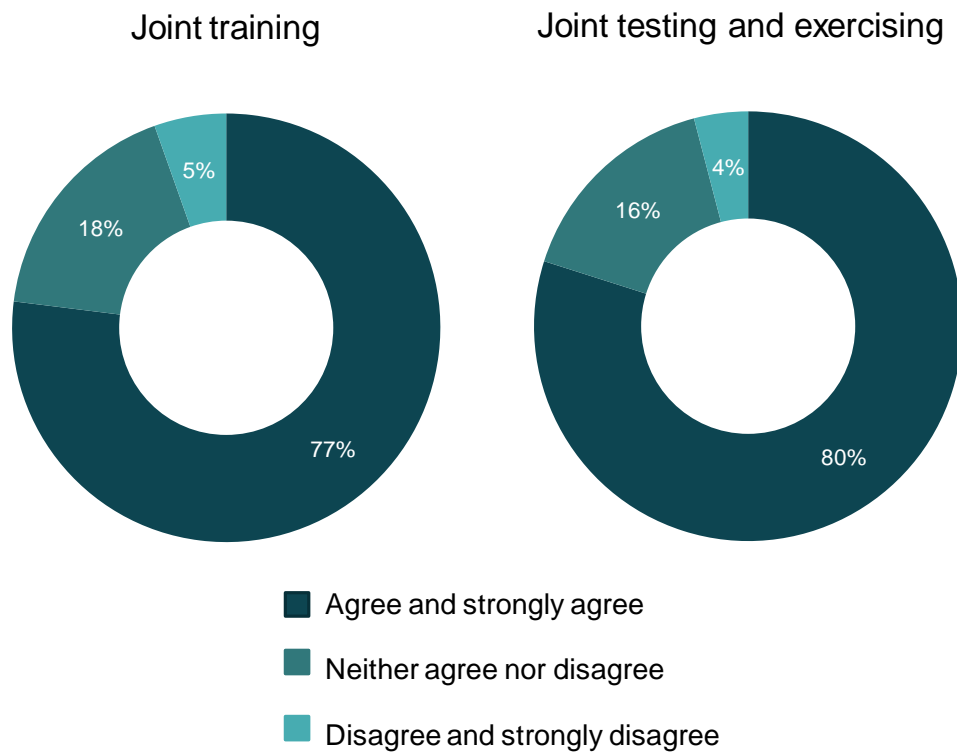


- Better and considerably better
- No change
- Worse and considerably worse

Please note, figures may not sum to 100 percent due to rounding.

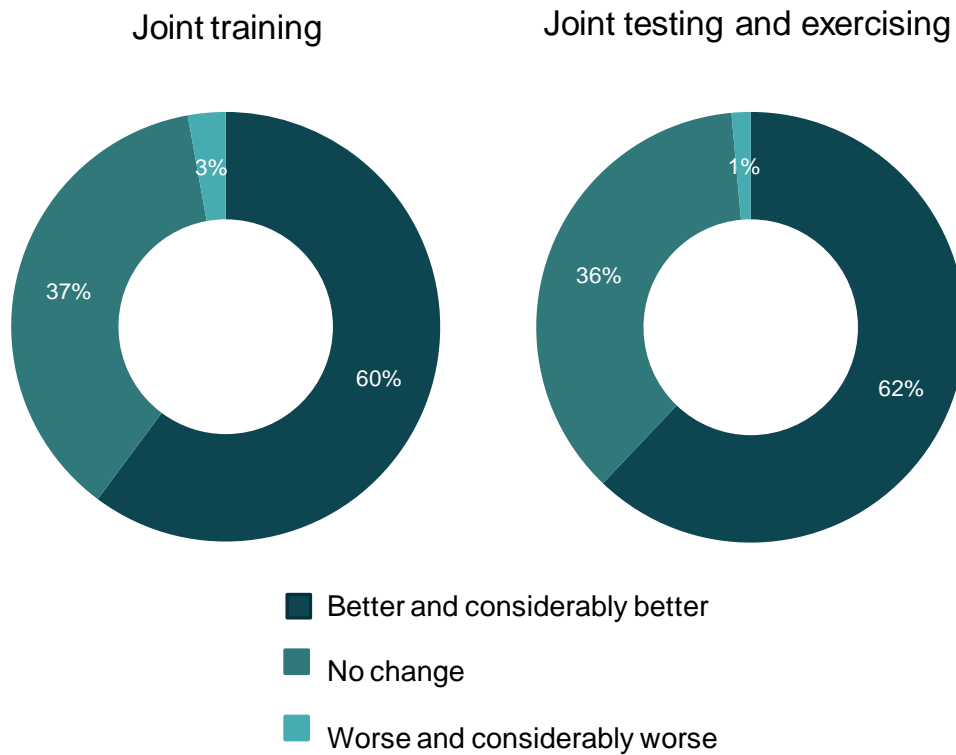
These proportions change considerably, however, when looking at those subsets of the survey respondents who had either experienced joint training with other emergency services or joint testing and exercising with the other emergency services in the last 12 months.

Figure M: Responses to the statement: “My service has a fully ingrained culture of working with other emergency services at a major incident” for respondents who had experienced joint training or joint testing and exercising.



Please note, figures may not sum to 100 percent due to rounding.

Figure N: The characterisation by survey respondents of the nature of their service's relationship with the other emergency services over the last 12 months for respondents who had experienced joint training or joint testing and exercising.



Please note, figures may not sum to 100 percent due to rounding.

It was surprising to find that only 22 percent of all respondents (1,103) knew who their JESIP champion was, suggesting that any increases in positive sentiment about the other emergency services, as seen above, may not be as a result of overt action by the JESIP champion.

Annex C – Category 1 and 2 responders

(According to the Civil Contingencies Act 2004)

Category 1 responders

- Local authorities
- Police forces, including the British Transport Police
- Fire services
- Ambulance services
- HM Coastguard
- NHS hospital trusts, NHS foundation trusts (and Welsh equivalents), NHS England and Public Health England
- Port health authorities
- The Environment Agency, the Scottish Environment Protection Agency and Natural Resources Wales

Category 2 responders

Utilities

- Electricity distributors and transmitters
- Gas distributors
- Water and sewerage undertakers
- Telephone service providers (fixed and mobile)

Transport

- Network Rail
- Train operating companies (passenger and freight)
- London Underground
- Transport for London
- Highways England
- Airport operators

- Harbour authorities

Other

- NHS Clinical commissioning group
- Health and Safety Executive
- Voluntary agencies
- NHS National Services Scotland