



HUMBERSIDE FIRE AND RESCUE SERVICE

Emergency Response

Training, Competence and Proficiency Policy

Owner	Area Manager Emergency Response
Responsible Person	Head of Operational Training
Date Written	August 2026
Date of Last Review	
Date of next review	August 2028
EIA Completed	August 2026

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1. INTRODUCTION

Humberside Fire and Rescue Service (HFRS) values and supports its staff and is committed to developing and maintaining a highly trained, confident and occupationally competent workforce. This policy sets the governance requirements by which the Operational Training Section plans, commissions, designs, delivers, records, assesses, assures and reports training, competence and proficiency across the Service.

Occupational competence is the consistent application of the knowledge, skills, behaviours and attributes required to perform workplace tasks safely, effectively and to the relevant standard. Proficiency reflects the currency and practiced ability needed to apply that competence reliably, including in risk-critical and time-pressured situations.

Where national guidance is adopted or materially revised, the Operational Training Section will assess the impact and update controlled frameworks, programmes and this policy as necessary.

This policy applies to all HFRS staff and roles for which the Service provides, commissions, records or assures training, including:

- Full-time operational staff
- On-call operational staff
- Fire Control staff
- Contingency staff
- Non-operational and support staff
- Managers, instructors, assessors, advisers, quality assurers and learning-system administrators
- External providers delivering training or assessment on behalf of HFRS. With acknowledgement that some variations may apply based on their own internal policy requirements and/or awarding and/or governing body requirements.

It covers initial acquisition, development, validation, maintenance of competence, continuing professional development, revalidation and return-to-role training. Role-specific technical requirements remain within approved training frameworks, role-specific training outlines, syllabi, course specifications and procedures.

Core Code of Ethics

HFRS has adopted the Core Code of Ethics for Fire and Rescue Services. The Service is committed to the ethical principles of the Code and strives to apply them in all we do; therefore, those principles are reflected in this Policy.

National Guidance

Any National Guidance which has been adopted by HFRS, will be reflected in this Policy.

2. EQUALITY, DIVERSITY AND INCLUSION

HFRS has a legal responsibility under the Equality Act 2010, and a commitment, to ensure it does not discriminate either directly or indirectly in any of its functions and services or in its treatment of staff, in relation to race, sex, disability, sexual orientation, age, pregnancy and maternity, religion and belief, gender reassignment or marriage and civil partnership. It also has a duty to make reasonable adjustments for disabled applicants, employees and service users.

3. AIM AND OBJECTIVES

Aim

To ensure that HFRS staff have access to safe, inclusive and effective training and can acquire, maintain and demonstrate the competence and proficiency required for their roles, supporting the Community Risk Management Plan.

Objectives

- Identify training and competence requirements systematically
- Publish and maintain an annual Training Plan and delivery programme
- Align learning and assessment to relevant legislation, standards and adopted national guidance
- Provide suitably competent trainers, instructors, assessors and quality assurers
- Record training and competence accurately in approved systems
- Monitor currency, identify gaps and support timely corrective action
- Evaluate and quality assure learning, assessment and evidence
- Provide governance for incident command training at all command levels
- Support staff who do not initially attain or who cease to maintain the required standard
- Provide clear accountability, reporting and change-control arrangements

4. ASSOCIATED DOCUMENTS

- [Fire and Rescue Services Act 2004](#)
- [Fire and Rescue National Framework for England](#)
- [Equality Act 2010](#)
- [Health and Safety at Work Act 1974](#)
- [Management of Health and Safety at Work Regulations 1999](#)
- Post Fire Exposure Cleaning Policy Delivery Guidance
- Physical Fitness of Operational Personnel Policy
- Safe to Ride Policy
- Subject Training Frameworks
- Heat, Illness, Preparation and Awareness (HIPA) Guidance
- NFCC Training Specification for Breathing Apparatus
- Reducing the Risk to Personnel Engaged in Breathing Apparatus Training
- NFCC Staff Training and Development Guidance
- JESIP Guidance

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- Information Security Policy
- Assessment Policy (currently being drafted)
- Quality Assurance Policy (currently being drafted)
- Malpractice and Maladministration Policy (currently being drafted)
- Appeals Policy (currently being drafted)
- Reasonable Adjustments Guidance
- Organisational Learning Policy
- Breathing Apparatus Training and Welfare Policy Delivery Guidance
- Incident Command Level One to Three Framework Policy Delivery Guidance
- Training, Competence and Proficiency Policy EIA

5. DEFINITIONS

Term	Definition
Acquisition	The structured gaining of knowledge, skills and behaviours required for a role or function.
Assessment	A process used to judge evidence against defined criteria.
Competence	The consistent application of required knowledge, skills, behaviours and attributes to the relevant workplace standard.
Core activity	A risk-critical or essential activity that must be completed at the defined frequency.
Currency	The status of a requirement being completed and within its approved validity period.
Development	Supervised practice and evidence gathering following acquisition.
Maintenance of competence	Recurring learning and practice designed to preserve knowledge, skill and proficiency.
Proficiency	Practiced, current ability to perform a function safely, effectively and reliably.
Revalidation	Periodic reconfirmation of competence against an approved standard.
Role Specific Training Outline	A controlled description of the knowledge, skills and learning requirements for a role.
Training Framework	A controlled document defining acquisition, development, maintenance, assessment and revalidation arrangements for a subject or function.
Validation	Formal confirmation that the required competence has been demonstrated.

6. POLICY PRINCIPLES

Risk-led and role-relevant:

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Training requirements will be derived from organisational risk, community risk, role analysis, legislation, guidance, operational learning and service need.

Safe and inclusive:

Learning will be planned and delivered in a controlled, respectful and accessible environment.

Evidence-based:

Competence decisions and training records will be supported by valid, authentic, current, sufficient and reliable evidence.

Proportionate assurance:

The level of assessment, frequency and quality assurance will reflect the complexity, exposure and performance.

Individual and organisational responsibility:

HFRS will provide suitable opportunities and support; staff must engage with learning and maintain their competence and records.

Continuous improvement:

Evaluation, assurance findings, incident learning, exercises and feedback will inform improvements, supported by the Organisational Learning Team.

Controlled change:

Changes to competence requirements, activities or frequencies will be justified, impact assessed, approved and recorded.

7. GOVERNANCE AND PLANNING

Training Needs Analysis

The Training Section will coordinate an annual Operational Training Needs Analysis (TNA) with Service Delivery. Organisational Development will coordinate the service-wide TNA, through the annual Performance Development Review (PDR) process. Organisational Learning elements will also be used to inform the TNA, Training Plan, role-specific requirements, learning priorities and resource decisions.

Annual Training Plan

The Training Section will produce and maintain an annual Training Plan. The plan will reflect, as applicable, the CRMP, Strategic Plan, Reasonable Worst-Case Scenarios, operational and service-wide training needs analyses, workforce and establishment needs, service improvement activity, operational and organisational learning, equality impact assessment, evaluation data and available resources.

A delivery programme for the following planning year will be issued early enough to support workforce and minimum staffing arrangements. Material in-year changes will be controlled and communicated as required and/or applicable.

The annual Training Plan will reflect the performance/financial year.

Training Section Responsibilities

- Plan and coordinate operational training
- Support acquisition, development, maintenance and confirmation of competence of operational staff
- Manage or oversee approved training and competence recording systems
- Develop and maintain e-learning and other learning materials
- Commission or approve external provision where required
- Assess and quality assure delivery and assessment
- Provide professional advice, data and reports
- Maintain appropriate regional and national relationships
- Consult relevant stakeholders when frameworks or requirements change

8. COMPETENCE LIFECYCLE

Stage	Policy requirement
Acquisition	The individual gains the knowledge, skills and behaviours required for a function through approved learning.
Development	The individual undertakes supervised practice and gathers the evidence required by the relevant pathway.
Validation	Competence is confirmed through an approved portfolio, workplace evidence, examination, practical assessment, simulation or other objective method.
Maintenance	The individual completes prescribed knowledge and skills activities at the required frequency to manage skill fade and remain current.
Revalidation	Where required, competence is periodically reconfirmed against the approved standard.
Role change	New or changed requirements are identified and the lifecycle restarts at the appropriate stage.

9. TRAINING NEEDS AND FREQUENCY ANALYSIS

Each role, core skill or specialist function included within a training syllabus will be supported by a documented analysis. The analysis will consider role and job requirements, National Occupational Standards where available, adopted National Operational Guidance, training operational guidance, legislation, regulation, approved codes of practice, local risk and HFRS competence requirements.

Training Frequency Analysis (Appendix One) will determine a proportionate recurring timescale of how often the training should be completed. It will consider:

- Practical complexity
- Theoretical complexity
- The rate and significance of change
- Relevance and exposure within the role
- Risk arising from poor performance
- Likelihood and potential consequence of harm
- Mandatory frequencies contained in legislation, guidance or approved codes of practice
- Evidence of skill fade, performance and operational learning

Where an external requirement prescribes a minimum frequency, HFRS will meet that minimum and may adopt a higher frequency where justified by local risk or service need. The rationale and approval must be recorded.

10. TRAINING DESIGN AND DELIVERY

Training and education will be designed and delivered by suitably competent HFRS staff or an external provider with appropriate credentials. Learning outcomes, prerequisites, resources, safety controls, assessment method, evidence requirements, reasonable-adjustment considerations and evaluation arrangements will be defined before delivery.

Instructors, Trainers and Advisers

The competence required of a trainer or instructor will be proportionate to the complexity and risk of the subject. A competent person must have sufficient training, knowledge, practical experience and instructional ability. Formal assessment and revalidation will be conducted only by staff authorised for that purpose.

An HFRS adviser may deliver recurrent activity-based instruction only within their authorised scope. Advisers must not deliver initial qualification training or conduct formal assessment unless this is expressly authorised, within the respective subject framework, and subject to oversight by a qualified instructor or assessor.

External Providers

Before appointment, the Training Section will verify the provider's competence, credentials, learning and assessment arrangements, health and safety controls, equality arrangements, quality assurance and record-transfer requirements. Contract or commissioning documentation will define these expectations.

11. ASSESSMENT, VALIDATION AND REVALIDATION

Assessment will be fair, objective, appropriately standardised and conducted against defined criteria. The chosen method must be capable of confirming the required knowledge, skills, behaviours and application.

Workplace Assessment

Workplace assessment may be conducted during operational activity or other authentic work by an authorised manager or assessor. Evidence must identify the activity, standard, outcome and assessor and must be recorded in the approved system.

Simulation Assessment

Simulation may be used where workplace opportunity is insufficient, unsafe, unpredictable or unsuitable for consistent assessment. The scenario, conditions and assessment criteria must be appropriate to the role and required level of competence.

Assessment Evidence

All assessments will be mapped against assessment criterion, with the outcome of achievement recorded against the respective criteria. This evidence will be aligned to the following principles:

Valid: relevant to the activity and standard

Authentic: attributable to the learner

Current: sufficiently recent and within required frequency

Sufficient: covers the required outcomes and performance criteria

Reliable: capable of supporting a consistent competence decision

Any concern regarding the authenticity, accuracy, provenance or integrity of assessment evidence or training records must be managed in accordance with the Malpractice and Maladministration Policy (currently being drafted).

12. RECORDING AND LEARNING SYSTEMS

All training, assessment, validation, revalidation and maintenance activity must be recorded in the approved Service Training Recording System. PdrPro is used for competence activity and course records and LearnPro is used for online learning packages and knowledge assessments.

Records must identify, as applicable, the learner, activity, date, learning or assessment outcome, evidence claimed, assessor or validator and any restriction, support action or expiry. Evidence must not be claimed where the required standard was not demonstrated as outlined by the assessment criteria.

Where an individual creates their own training record, they must notify the appropriate manager where a validation signature is required (either physically or electronically). A manager completing a group record remains accountable for ensuring that the correct evidence is attributed to each individual.

Access to learning systems will follow role-based permissions. Substantial system changes or changes affecting competence requirements must follow the change-control requirements in section 19.

13. MAINTENANCE OF COMPETENCE AND PROFICIENCY

Maintenance of competence will comprise maintenance of knowledge and maintenance of skills. Approved theoretical activities may include online modules, facilitated learning and study of current guidance. Practical activities will provide appropriate opportunities to practise and evidence role-relevant performance.

The approved syllabus (pdrPro training planner and central training planner) will identify core skills, core modules and continuing development activities, together with objectives and frequencies. Individuals and managers must use the approved training planner and system notifications to complete activity before expiry wherever reasonably practicable.

In respect of maintenance of proficiency, the recording of the respective activity, identifies that the activity has been undertaken. Unless stated otherwise, instructor or adviser qualifications or skills are not required when completing these associated training sessions.

14. PERFORMANCE MONITORING AND QUALITY ASSURANCE

Monitoring

Competence and training performance will be monitored at individual, local, district and organisational levels against the competence framework. Reports will support timely identification of expired or incomplete requirements, failed knowledge assessments, non-attendance, recording quality and emerging organisational risk.

Line managers are responsible for the monitoring of their staff's training requirements and must ensure appropriate arrangements are in place for doing so. Service level dashboards will reflect the current status of training competencies.

Quality Assurance

Quality assurance (QA) will be risk-based and continuous. Line managers will review relevant accounts and evidence at a frequency set by the assurance framework. The Training Section or authorised internal quality assurer will sample records, delivery and assessment and report findings and actions.

Training events, courses and learning materials will be sampled and evaluated. Findings will be reviewed regularly and used to identify improvement action. Organisational Learning and Organisational Development may provide additional independent assurance. Refer to QA framework and policy (currently being drafted) which will determine time frames, strategy percentages to be sampled and trend analysis/outcomes (needs writing).

External quality assurance via commissioned organisations who independently assure HFRS will also be taken into account as part of the quality assurance practices and processes.

Escalation

Material or repeated competence gaps, adverse trends, unsafe practice, system-control failures or overdue corrective actions will be escalated through the relevant management and governance route. Reporting will distinguish completion data from confirmed competence and will not treat a percentage alone as proof of operational readiness.

15. FAILURE TO ATTAIN OR MAINTAIN COMPETENCE

Where an individual does not attain or maintain the required standard, evidence must not be claimed, and the manager must assess the immediate risk. The individual may be restricted or removed from the relevant competence-related activity until the required knowledge and skills have been satisfactorily demonstrated.

The response will be fair, proportionate and documented and may include feedback, supervised practice, refresher training, coaching, mentoring, reassessment and an Individual Development Plan (IDP). Persistent or wider capability concerns will be managed under the relevant People policy.

Recruit Firefighters will be conditioned to the outlined requirements in accordance with their contract of employment terms and conditions, along with the outlined processes in accordance with the relevant People policies.

HFRS will seek Human Resources guidance and Occupational Health advice where disability or health may be relevant and will consider reasonable adjustments without reducing an essential competence standard.

16. RETURN TO OPERATIONAL DUTIES

Following a period of absence or reduced exposure, the line manager will review the individual's role, approved system record, expired or at-risk activities and any role-specific return requirements. Where required, a documented return-to-role/IDP will identify learning, supervised practice, assessment and authorisation needed before unrestricted duties resume. The relevant absence-management arrangements will be consulted. This process may be staged in accordance with the Safe to Ride Policy.

17. TRAINING RESOURCES, SAFETY AND WELFARE

All practical training will be planned, risk assessed and delivered in a controlled environment with suitable facilities, equipment, welfare and competent staff. A pre-use check of facilities and equipment will be completed where required by the risk assessment or local procedure.

A nominated person will be responsible for training-event safety (usually the officer in charge). Additional safety staff will be appointed where required by the risk assessment. Safety staff must understand the relevant procedures, facilities or simulators, emergency arrangements, first-aid provision and words of command.

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Operational equipment may be used when authorised and suitable. Training equipment, external locations and realistic training environments must be approved, maintained and risk controlled. Hygiene, decontamination, changing, hydration, rest, first aid and other welfare needs must be considered, particularly after exposure to heat, smoke, contaminants or physically demanding activity.

18. ROLES AND RESPONSIBILITIES

Role	Key responsibilities
All staff	Engage with required learning; maintain approved accounts; complete activities within frequency; understand notifications; provide honest evidence; report system, access or competence concerns. Maintain health and safety of self and others.
Crew Manager or equivalent level grade	In addition to individual duties, support and record team learning within authority; maintain oversight of direct reports; validate records where required.
Watch Manager or equivalent level grade	Plan local training; monitor staff competence and records; address gaps and failed evidence; manage attendance; support reasonable adjustments and development action.
Station Manager or equivalent level grade	Assure location performance; review trends and risks; ensure corrective action; escalate unresolved gaps; support cross-location resources.
Group Manager or equivalent level grade	Oversee locality or functional competence risk; review district performance and systemic gaps; ensure proportionate action and escalation.
Training Section	Own training governance; coordinate analyses and plans; deliver or commission learning; maintain frameworks and systems; assure quality; report performance and risk.
Organisational Development	Lead the service-wide TNA and align wider development requirements with role frameworks and organisational priorities.
Human Resources / Occupational Health	Provide advice on People policy, health, disability and reasonable adjustments within respective professional remits.
Senior Leadership Team	Provide strategic oversight, organisational accountability, prioritisation and resourcing; consider material competence risks and assurance findings.

19. CHANGE CONTROL/MANAGEMENT AND RECORDS MANAGEMENT

Change control/management

A material change to a training activity, competence standard, frequency, assessment method, role requirement or system control must be supported by a documented rationale and impact assessment. The assessment will consider safety,

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legal and national requirements, equality, workforce, resources, systems, records, communications, transition and assurance.

The Training Change Control / Management Progress (Appendix two) should be followed.

Routine administrative and minimal impact changes to system and/or processes/procedures that do not alter the policy or competence requirement may not require the full change management process to be followed. Furthermore, Emergency or mandatory changes may be implemented through an expedited route, but the rationale, approval and subsequent review must still be recorded.

Records Management

Training and competence records will be retained, secured, archived and disposed of in accordance with HFRS records-management, data-protection and information-security requirements. On leaving HFRS, an individual's learning accounts will be archived in accordance with the approved procedure, while preserving retrievability for the applicable retention period.

APPENDIX 1 – TRAINING FREQUENCY ANALYSIS

Role(s):		Analysis date:	
Subject:		Conducted by:	
Risk critical:		Approved by:	
Subject type:		TFA Number:	

Areas of practical application		Areas of theoretical application
•		•

Scoring outcome				Frequency
Role	To be added as applicable in final version			Monthly
Practical complexity				26 - 30
Theoretical complexity				Quarterly
Changes with time				23 - 25
Relevance to role				Six monthly
Risk posed by subject				19 - 22
Likelihood of harm occurring				Annual
Total				18 and below

Comments

Other information		
Is the core skill subject to a revalidation assessment?	Yes ☐	No ☐
Frequency of revalidation assessment:		

Guidance documentation supporting the maintenance of competence

Skill for justice national occupational standards
The primary NOS for the activities associated to maintenance of competency training include

Scoring Guidance	
Practical Complexity	
1	Basic subject needing very little refreshment
2	Routine subject needing infrequent refreshment
3	Routine subject needing frequent refreshment
4	Complex subject needing frequent refreshment
5	Very complex subject needing frequent refreshment
Theoretical Complexity	
1	Limited knowledge of subject required
2	Basic knowledge of subject required
3	Knowledge of main subject points required

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4	High degree of subject knowledge required
5	Very high degree of subject knowledge required
Changes with time	
1	Procedures very rarely change (more than 5 years)
2	Very infrequent changes to procedures (3 – 4 years)
3	Occasional changes to procedures (6 month – 2 years)
4	Regular changes to procedures (3 month - 5 months)
5	Frequent changes to procedures (less than 3 months)
Relevance to role	
1	Not applicable to role
2	Awareness required
3	May be required in specific circumstances
4	Development into next role
5	Role related
Risk posed by subject	
1	Negligible - Unlikely to be affected by poor performance
2	Poor Performance may cause minor injury
3	Poor performance may cause serious injury
4	Poor performance may cause major injury
5	Poor performance may cause fatalities
Likelihood of harm occurring	
1	Very Unlikely - Very unlikely to occur with no training
2	Unlikely - Unlikely to occur with no training
3	Moderate - May Occur with no training
4	Likely - Probably will occur with no training
5	Certain - Expected to occur with no training

APPENDIX 2 – CHANGE CONTROL/MANAGEMENT

Change record	Details
Change title / reference	
Change owner / section	
Raised by / date	
Proposed implementation date	
Change type	☐ Planned ☐ Urgent / mandatory ☐ Temporary ☐ Permanent
Affected area	☐ Training activity ☐ Competence standard ☐ Frequency ☐ Assessment ☐ Framework ☐ System ☐ Other:

1. Define and Triage

Check	Required evidence / outcome	Complete / N/A
Scope and rationale	State the problem, evidence, intended outcome, affected roles / sites / systems and what is outside scope.	
Materiality and urgency	Confirm material / non-material status, priority and whether expedited control is justified.	
Change owner and governance	Identify accountable owner, working lead, approval level and reporting route.	
Dependencies	Identify linked policies, procedures, equipment, systems, contracts, staffing and concurrent changes.	

2. Assess Impact and Plan

Check	Required evidence / outcome	Complete / N/A
Risk assessment	Create / review suitable and sufficient risk assessment, including training-event safety, welfare, equipment, facilities and controls. Record reference.	
Legal / guidance compliance	Check legislation, regulation, adopted National Operational Guidance, NOS, awarding-body and local requirements.	
Equality impact	Complete / review EIA and reasonable-adjustment implications. Complete DPIA where personal-data processing changes.	
Training needs / frequency	Review TNA and Training Frequency Analysis; confirm impact on competence, skill fade, revalidation and transition.	

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Resources and readiness	Confirm competent instructors / assessors, staffing, finance, venues, equipment, IT, procurement and implementation capacity.	
Implementation plan	Define actions, owners, dates, dependencies, communications, transition, contingency / rollback and post-change review.	

3. Consult, Test, Assure

Stakeholder / assurance	Consulted / outcome recorded (Y/N/NA)	Name / date / reference
Health and Safety		
Fleet / Estates		
Finance / Procurement		
Recognised trade unions		
Affected staff, managers and subject leads		
Training Section / Operational Training		
Service Delivery / Fire Control, where affected		
EDI / HR / Occupational Health / Organisational Development, where affected		
Information Governance / IT / system owner		
External provider / awarding or governing body		
Pilot / test / validation completed		
Quality assurance and lessons identified		

4. Update

Document / control	Change completed or confirmed unaffected (Y/N/NA)	Comments
Risk assessment / safe system of work		
Lesson plan / session plan		
Training framework / role-specific outline		
Learning outcomes, syllabus and materials		
Assessment criteria, method and evidence		

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Instructor / assessor guidance and competence		
Training plan, planner and frequency records		
pdrPro / LearnPro / recording system		
Policy, procedure, form or communications		

5. Decision and Rationale

Decision	Outcome
Rationale for change	
Decision	
Further comments	

6. Release and Close

Final control	Complete / N/A
All actions closed or formally accepted with owner and target date	
Documents version-controlled, approved and published; superseded versions withdrawn	
Affected staff briefed / trained and competence transition confirmed	
Implementation date, monitoring measures and post-change review date confirmed	

7. Final Sign-off

Name of person signing off	Role	Signature	Date