

# Policies and procedures guidance

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## Contents

- 1 Introduction ..... 2
- 2 The purpose of policies and procedures ..... 2
- 3 Accessibility ..... 2
- 4 Ownership ..... 3
- 5 Distribution of policies and procedures ..... 3
- 6 Review process ..... 3
- 7 Performance measures ..... 4
- Appendix 1 (A) - Creating and editing policies ..... 6
- Appendix 1 (B) - National Operational Guidance (NOG) Operational information notes (OINs) and control information notes (CINs) ..... 12
- Appendix 1 (C) – National Operational Guidance (NOG) foundation policies and Standard Operating Procedures (SOPS) ..... 17
- Appendix 2 - Policies and procedures workflow ..... 18
- Appendix 3 – 'Plain English' writing style ..... 19
- Appendix 4 – Publishing documents Brigade wide ..... 21
- Appendix 5 – Governance process flowchart ..... 23
- Document history ..... 24

# 1 Introduction

- 1.1 The London Fire Commissioner maintains a series of policies and procedures as a means of guiding staff to the Brigade's agreed outcomes. Policies set the direction and goals of the LFC's work and procedures are the written set of instructions that describe the approved and recommended steps to achieve those aims. This policy explains the role and structure of policies and procedures within the Brigade and how a common style has been developed for all policies and procedures. It provides guidance on drafting, editing, publishing and how to access policies. This is detailed in Appendix 1 - Creating and editing policies and Appendix 2 - 'Plain English' writing style.

## 2 The purpose of policies and procedures

- 2.1 Policies and procedures are written statements which tell you how to do things, what you do in certain circumstances and things you should know and as such are deemed to be the official policy on a particular topic. They ensure staff have the necessary reference tools required to do their job with the information presented and communicated in a way which is simple and easy for staff to use which form a safe system of work.
- 2.2 They are a formal and systematic method for capturing and documenting relevant information and procedures. It is important that any member of staff who needs to know something is able to locate the required information quickly and with the confidence that what they find is definitive, complete and up to date. They are to be used for reference purposes and, as such, are not ideally suited as the sole means of communicating information.
- 2.3 Policies and procedures make sure everyone deals with situations and people in a similar way ensuring consistency and supporting fairness and equality. They are a key mechanism in enabling a systematic approach to be taken to equality impact assessments (EIAs), sustainable development impact assessments (SDIAs), health, safety and welfare impact assessments (HWSIA) and risk assessments (RAs).
- 2.4 In some instances, policies and procedures reflect a legal obligation.

## 3 Accessibility

- 3.1 It is important that any member of staff who needs to know something can locate the information quickly, the policies and procedures pages on hotwire have specifically designed search options to enable this.

### Hotwire search

- 3.2 The policies and procedures page on hotwire has an independent search facility that allows users to carry out a search on all policies and procedures by inputting key words or phrases.

### Other options

- 3.3 In addition, most recently updated policies and procedures are listed by date on the right-hand side of the hotwire policy page, or you can view them by department from the top of the centre column.
- 3.4 Policies and procedures are also available in Brigade Wide Documents | Governance | Policies and Procedures, these can be viewed numerically or by classification which lists them by department.

## 4 Ownership

- 4.1 Policies and procedures are owned by the relevant head of service and have been allocated to an appropriate work team, enabling users to contact the correct person if any queries arise.

### Freedom of Information Act (FOIA)

- 4.2 Exemptions may apply to policies and procedures previously released under FOIA and some sections from these documents may have been redacted. Policies that need to be protectively marked should follow guidance set out in Policy number 619 - LFB security classifications system and will be marked accordingly on the cover sheet of the policy. The document history page contains full information regarding this, FOIA exemptions and any relevant comments.

## 5 Distribution of policies and procedures

- 5.1 Policies and procedures are published on hotwire and in Brigade Wide Document libraries by the Knowledge Management Team within Information Management (IM) in the Information and Communications Technology department on behalf of the department that 'owns' them. This information can be found on the contents page of each policy.

## 6 Review process

- 6.1 All policies and procedures must be reviewed at least every three years, although this can be reduced depending on the subject matter or if there is a change in legislation or a training need. The date a review is due by, can either be found in the bottom left-hand corner of page 1 (marked as 'review date') or on the 'document information page' at the end of the policy (marked as 'next review date').

- 6.2 When a policy is due for review, if possible, consider splitting policy content from procedure content, by creating a clear distinction within the document about what is the policy, and what is the procedure associated with it. This should be done using Part headings – such as '**Part one – Policy**' and '**Part two – Procedure**' (Pt heading can be found in LFB controls tool bar).

If you have a procedure published on Hotwire, please review and update in line with any changes made to the relevant policy."

- 6.3 Following consultation with the lead department where it is established that the review date is different from the three years this will be indicated as the review date e.g., policies that need to be reviewed annually. Despite these set review periods, it is the responsibility of head of service who owns the policy to ensure that the policy is always 'fit for purpose' and current, and that it is being complied with.
- 6.4 Quarterly reports will be sent to nominated departmental administrators listing all policies and procedures that have missed the set review dates and those due in the next quarter, all policies, and procedures due in the next 12 months will also be listed allowing departments to plan. IM will prompt the review process on each policy and procedure, send it to the relevant department, and monitor progress on the review. However, it is the responsibility of each head of department and their departmental liaison officer to ensure that all policies are reviewed (and updated where necessary) by the specified review date. Where a policy is reviewed and no changes are necessary, a new review date will be allocated and a 'reviewed as current' date added to the electronic copy of the policy published on hotwire.

## **Consultation of new or revised policies**

- 6.5 When creating a new policy or undertaking a review of an existing policy the consultation process must be followed and an audit trail of authorisation emails kept for compliance purposes, the [policiesandprocedures@london-fire.gov.uk](mailto:policiesandprocedures@london-fire.gov.uk) mailbox must be copied into all correspondence authorising the publication of a new or reviewed policy. The lead head of service is responsible for ensuring that all relevant departments are consulted on a new or revised policy.

## **Approval of new or revised policies**

- 6.6 The Scheme of Delegation states that Heads of Service are responsible for minor amendments to policies for which they are the custodians or for the introduction of new policies, this process varies from department to department and could include consultation with other Heads of Service, General Counsel, Finance, Health and Safety and the unions (BJCHSW). Approval of the London Fire Commissioner (corporate sole) is needed where new policies or amendments to existing have significant implications (eg results in expenditure above £150k, impact on significant numbers of staff or customers, or would likely be novel, contentious or repercussive in nature) and therefore require prior consultation with the Deputy Mayor before the decision can be taken, this process goes through a clearly established governance process (see the governance process flowchart at appendix 4). It is the responsibility of the head of service who owns the policy to ensure that correct governance approvals are obtained, and sufficient time is allowed where a policy needs to be approved via the formal governance process. Advice on this can be provided by the Head of Governance or the Policy Team.

## **7 Performance measures**

- 7.1 The following impact assessments must be carried out on all policies and procedures. These should be considered at an early stage in the development of a policy and be applied to existing policies and procedures when they undergo review. Contact the relevant departments by telephone or email and they will let you know if screening assessment forms need to be completed. Please ensure the policies and procedures mailbox is copied into any correspondence so that when signed off the dates can be added to the document history page of the policy. The templates can be accessed under the heading Project Definition on hotwire (hotwire > Guides and policies > project management).
- 7.2 It is the responsibility of the relevant departments to upload all relevant impact assessments for each policy or procedure to Brigade wide document libraries.

### **Equality impact assessments**

- 7.3 An EIA is required for all policies, further information on how the Brigade conducts an Equality Impact Assessment and full guidance can be found on hotwire. Once completed, the EIA should be sent to [equalityimpactassessment@london-fire.gov.uk](mailto:equalityimpactassessment@london-fire.gov.uk) for review.

### **Sustainable development impact assessments**

- 7.4 A SDIA is required for all policies, see Policy number 830 – Sustainable development impact assessments. Once completed, the SDIA should be sent to the Environment team mailbox for review.

## **Health, safety and welfare impact assessments**

- 7.5 A HSWIA is required for all policies and is available in New Office Documents > Forms (Departments) > Health and Safety. Once completed, the HSWIA should be sent to the Health and Safety Services mailbox for review.

## **Risk assessments**

- 7.6 A recorded risk assessment is only needed if significant risks were identified during the health, safety, and welfare impact assessment. Risk assessments (RAs) must be completed in line with the guidance set out in Policy number 673 – Risk assessment procedure.

## **Performance monitoring**

- 7.7 Performance data will be collected relating to:
- The number of policies and procedures owned by departments.
  - The number of policies and procedures issued or cancelled in the last quarter.
  - The total number of policies and procedures reviewed or amended in the last quarter.
  - The number of policies and procedures which missed their review date listed by department.
  - The number of policies that have had EIAs, SDIASs, RAs and/or HSWIAs signed off.

## Appendix 1 (A) - Creating and editing policies

### Workflow process

#### Current responsibilities

- 1 The responsibility for updating and issuing of new and revised policies or procedures is currently shared between:
  - **The lead department:** responsible for preparing, revising and/or reviewing policies and procedures, producing text and consulting other parts of the Brigade before they are issued. Special care should be taken when drafting and/or reviewing policies to consider whether they could impact on the operation of any of the Brigade's contractual arrangements as this could potentially lead to a breach on the part of the Brigade with possible cost implications. Further, if they lead to a contract change becoming necessary, this could have a serious cost implication for the Brigade. Advice on any contracts which might be affected can be obtained from Procurement/ Contracts Management Team (contractssection@london-fire.gov.uk) or from the PFI Team in Technical and Service Support Department. Each head of department has appointed a liaison officer to be the main contact point on policy and procedure matters and to work with IM.
  - **Departmental liaison officers:** responsible for ensuring that updating work on their departmental policies and procedures is done in a timely and effective manner (either undertaking it themselves or ensuring that it is done by others in their department). They should be familiar with the list of policies and procedures owned by their department, ensure EIAs, SDIAs, HSWIAs and RAs (see paragraph 7.1 above) are undertaken and take a proactive approach in the regular review of all their department's policies and procedures.
  - **People Services Department (Employment Relations):** undertaking formal staff side consultation and managing any subsequent discussion with the staff side.
  - **Health and Safety Services (BJCHSW):** undertaking formal staff side consultation from a health and safety perspective and managing any subsequent discussion with representative bodies.
  - **Communications Department:** communicating key messages in new, updated, or interim policies and procedures.
  - **Knowledge Management Team, Information Management Division:**
    - Manage policies and procedures, making them accessible to all colleagues.
    - Provide an editorial role to ensure consistency with this policy.
    - Assist authors with researching information.
    - Ensure an audit trail of all changes (where possible) made to a policy and procedure is documented on the document history page.
    - Prepare and publish the final document in an electronic format.
    - Prompt the review (e.g. updating, deletion) of policies by liaising with lead departments.
    - Consult and liaise with heads of service and other managers on matters relating to the issue of policies/procedures.

#### Layout

- 2 Staff drafting new policies and procedures, or revising existing policies and procedures, should be working to prepare only one document covering the subject matter concerned. It is essential

that this document is kept as short and concise as possible containing only relevant information. Consider any current policy or procedure and, if necessary, incorporate relevant material.

- 3 The policies and procedures template can be found by going to: Start>new office documents>forms (departments)>Information Management. If you require any assistance when using this please email the policy and procedure mailbox (policiesandprocedures@london-fire.gov.uk) and someone will get back to you as soon as possible.
- 4 If you are reviewing an existing policy or procedure you can obtain an editable Word version from the Knowledge Management Team by using the policy and procedure mailbox (policiesandprocedures@london-fire.gov.uk).

### **Uniformity of layout**

- 5 All general policies or procedures will have the same general layout so they can be quickly recognised by staff. This also ensures they can be easily distinguished from other material; structure and consistency are key elements in this. Differences in content may require variations in layout but the overall format should be the same. Some policies are written to incorporate all staff groups; however, it may be necessary to include separate appendices relating to individual staff groups such as operational, control or FRS staff. Operational Policies have their own policy template and one of the appendices must include a generic key point summary table.
- 6 National Operational Guidance (NOG) foundation policies and standard operating procedures (SOPs) use their own templates (see paragraph 33 below). SOPs are short documents attached to the main foundation policy allowing staff to find and read relevant information (see section on National Operational Guidance foundation policies and Standard Operating Procedures (SOPs) below).
- 7 Policies and procedures should not be over long and should only cover the pertinent issues. Supporting appendices should be used to convey additional information to support a policy or procedure.

### **LFB or LFC**

- 8 London Fire Commissioner (LFC) is the legal body responsible for the London Fire Brigade (LFB). LFB is the term used for internal policies and procedures, however when referring to contracts that are entered between the Brigade and an outside party or a document with legal implications, the term LFC must be used. For further advice contact General Counsel.

### **Consultation**

- 9 New policies must go through a consultation process before they are published. The content of the policy or procedure determines who should be consulted; each department will have its own consultation process relevant to the types of policies produced. Examples of who may need to be consulted on are senior managers, heads of department, General Counsel, Health and Safety and/or Staff Side.

### **Operational policies**

- 10 When drafting new operational policies each responsible policy writer will be required to develop a set of questions relating to their policies in line with the incident command knowledge profiles.
- 11 When a relevant operational policy is reviewed the responsible department will be required to develop a set of questions relevant to the change/new policy. If question sets have already been developed, then the reviewer should ensure that the question sets are updated in line with policy amendments.

**'Plain English' writing style**

- 12 To help achieve consistency and 'user friendliness', policies must use plain English wherever possible. Some plain English guidelines are set out in Appendix 2.

**Use of appropriate language**

- 13 You must always use appropriate language, especially if failure to comply with a policy or any part of it could mean possible disciplinary action. The reader must know when they are required to behave in a certain manner using the words such as – 'must', 'shall' and 'will'.
- 14 When the use of discretion is allowed, then the language can reflect that and words such as 'may' or 'can', should be used (e.g., a policy or procedure may require an individual to take account of certain factors before taking a course of action, but give discretion as to how the action is to be carried out. The part of the policy outlining the factors to be taken into account would include the words must and shall, etc. whereas the part allowing discretion can be worded accordingly.)
- 15 It is important to remember, when drafting policies, to use appropriate language and terminology. Equality, Diversity and Inclusion Resources provides advice on the appropriate language and terms to use. Remember the following:
- You should use **inclusive language** in all policies. Be consistent in the words you use to describe things so as not to exclude any members of a group. Inclusive language is to be used for general things and should not single out a person's gender, race, ethnicity, or other personal traits or characteristics (such as sexual orientation, age, or a disability/barriers) when it has no direct bearing on the policies subject matter.
  - You must always use **gender neutral language** in all policies. Do not use gender biased terms, such as 'fireman' or 'firewomen'; the correct term is 'firefighter'. Be careful to avoid post titles such as craftsman - use craftsperson instead, and personal pronouns such as 'he' should be avoided, use either they or a collective noun, e.g., 'staff' or 'uniformed staff' or 'fire and rescue staff'.
  - Use **'gay'** as an adjective not 'homosexual' and refer to **gay men** (not gays). It is acceptable to refer to **gay women** or **lesbians**. It is important to only use these terms if you know a person's gender. Someone who is gender neutral (doesn't associate with being either male or female) may also refer to themselves as being 'gay'. If the policy has implications for **trans people** in the workplace, you should consult Policy number 323 – Trans inclusion policy.
  - As a collective of ethnicities, refer to the group as **'Black, Asian and Other Underrepresented Ethnic Group'**, avoid the acronym BAME even in full as Black, Asian and Minority Ethnic. Avoid abbreviating this definition as BAOUEG, use full words. Apply lower case 'e' and 'r' when referring to the words: 'ethnicity' and 'race' in the written form, but capital B and capital W and capital A for Black, White, Asian, African respectively in reference to ethnicity.
  - Avoid the word 'other' standing on its own, for example: White people and others, as it highlights the difference between people, instead, say: **White people and other diverse ethnic groups**.
  - The term 'person with disabilities' is the correct expression to use whenever referring to people who have a disability; terms such 'handicap', 'invalid' or 'cripple' must never be used. The term 'mental handicap' is not to be used; the correct term is 'people with learning disabilities'. It is important to keep language people centred.
  - Use terms such as mature/experienced individual, young adult/person, our colleagues and avoid general terms, as these imply that people of certain age groups or generations are

grouped, failing to recognise people's individuality: the young, the old, elderly, middle-aged, looking young/old for your age, boys/girls in office, 'old people', OAPs, 'senior citizens', etc.

## Guidance on format and layout

### The policies and procedures toolbar

- 16 Upon opening a word copy of a policy or opening the blank template the officer will be able to access a toolbar specifically designed to format policies and procedures. Any queries regarding the formatting of policies should be directed to the Policies and Procedures team.

Please, see Inclusive and Accessible Documents for Neurodivergent Individuals - Tips and Resources 2024.pdf available on HotWire.

### Title page

- 17 A standard front page has been adopted and this has been designed to avoid the possibility of confusion with memos and letters. This page is updated by the Policies and Procedures team so apart from the title no other information is needed from the officer writing the policy. The following content is for reference only:

- **The title:** Careful attention should be given to the title of the policy or procedure. Too long a title may be difficult to remember and retrieve through the index: one which is too short may be confused with others on similar topics.
- **New policy number:** This is a new policy number issued by the Knowledge Management Team for each policy and procedure in ascending order.
- **Old instruction number:** This is the original instruction number prior to the Policy Review of September 2008, and has been left on old policies and procedures for reference purposes.  
**Note:** new policies will not have this number and this space will be left blank.
- **Issue date:** This is the date which the policy was first issued by the Brigade. The issue date (together with the policy number) is repeated at the foot of each page. The issue date will be allocated by the Policies and Procedures Team when the policy or procedure is published.
- **Reviewed as current date:** This is the most recent date that the policy or procedure has been reviewed throughout even if no changes were necessary.
- **Owner:** This shows who is responsible for the content of the policy and has agreed to publication. It will normally be a head of department, e.g., Assistant Director, People Services.
- **Responsible work team:** This will show which team within the department was responsible for drafting the policy and can answer queries on it.
- **Contents:** A list of headings, paragraph numbers and page numbers. This is updated automatically by the policies and procedures team and should not be accessed manually.
- **Review date:** This is the date when the policy or procedure will next be reviewed. All policies or procedures must be reviewed every three years unless an earlier review date is required (i.e., annually).
- **Last amended date:** This date will be added if minor amendments are made to policies and procedures, making users aware that a change has occurred in the policy since the reviewed as current date.

### Paragraphs and paragraph numbering

- 18 Every paragraph should be numbered in numerical sequence using a 'decimal' numbering scheme like that used in this policy. Avoid more than one level of decimal numbering, each section should be set out as follows:

- Pt – for the main part of the policy (e.g., Part one – Policy and Part two – Procedure).
- H1 – for the main title of the section.
- H2 – for a sub-heading.
- H3 – for a further sub heading (if necessary).
- 1.1 – for the main body of text.
- Use (a), (i) and bullet points to further divide the text or to make a list of points.

19 Long paragraphs should be divided into sub-paragraphs. Using lists can also be helpful. Remember that even the most avid reader will be deterred when faced by a page of unbroken, closely spaced text.

### Headings and capital letters

- 20 Headings should be used wherever possible throughout the text. These will help to guide the eye to key things and will break up the text. As a rule, headings will always be in sentence case. You should number only the main headings using the toolbar H1 tab provided in the template.
- 21 Use capitals sparingly in written text. The LFB style guide will show you where to use them and when not to.

### Footers

- 22 All pages will be numbered in the 'footer' showing the document number and issue date. The cover page of the policy will also show the review date and the last amended date.

### Illustrations, charts, and tables

- 23 Illustrations, charts, maps, and tables should be placed within the text as close as possible to the paragraphs to which they relate. All such 'figures' should be captioned and numbered consecutively. The identification of specific areas or parts of a plan should be achieved, if possible, by hatching or shading as colour is not used for printed documents (see below).
- 24 Be sure that illustrations, maps, or charts are used in accordance with relevant copyright legislation; contact the GIS manager on extension 30373 if you have any questions.

### Adding images to policies

- 25 If a new policy contains images, the images must be added to the Brigade Image Library and an ID reference number provided before they can be inserted into the policy. Refer to Policy number 301 - Capturing and managing images on behalf of the brigade or contact the Visual Collections Manager on extension 30370 for further information.

### Introductory sections

- 26 The introductory sections of the policy or procedure will include some or all the following distinct sections:
- **Introduction and background:** This should give information (if relevant) on what has led to the policy being issued, e.g., changes in the law, new requirements by other emergency services, new codes of practice, technical developments, new Brigade policy, etc.
  - **Policy/objectives:** A brief statement of what the policy is intended to achieve, e.g., 'to make sure that all personnel are fully aware of the revised procedures in respect of firefighting on Royal Navy ships'.
  - **Abbreviations/definitions:** In a particularly long or complex policy it would be helpful to give an explanatory list of abbreviations used in the policy, particularly those not generally

current in the Brigade. It is helpful to include definitions of terms or words used frequently in the policy.

### **Body of the policy**

- 27 The body of the policy will include the material which the policy is intended to convey. The structure may need to vary according to the subject matter.
- 28 It is better to keep the main body of the policy as short as possible. If necessary, put supporting material in appendices or listing an internal path that will lead the reader to a secondary document.

### **Concluding section**

- 29 Concluding sections of the policy will include some or all the following:
- **Forms to be used:** If the policy describes a procedure which requires forms to be used, it may be helpful to list them here.
  - **Cancellation of policies:** Superseded and cancelled policies should be listed at this point.
  - **Cross references:** Inevitably, cross references to other policies will sometimes be necessary and should be listed here.
  - **References to source material:** It will be helpful, on some occasions, to list related reference or source material, e.g., Fire Service Manual, a government report, legislation, etc.

### **Appendices**

- 30 Appendices can be used but must be clearly marked as such and will also carry a 'footer' to link them to the main body of the policy.
- 31 The appendix toolbar can be accessed through the red "App" icon in the LFB toolbar. The text can be divided in the same way as the main body of text.

### **Document history**

- 32 This page includes:
- Assessments - dates the EIA, SDIA, HSWIA and RA were completed.
  - Audit trail - a summary of all amendments made to the policy and the date updated. Users must read the audit trail section of the policy to familiarise themselves with any changes.
  - Subject list - useful search terms to help users locate the policy.
  - Freedom of Information Act exemptions - a table showing the reasons a policy is protectively marked and the FOIA exemptions that apply.

## Appendix 1 (B) - National Operational Guidance (NOG) Operational information notes (OINs) and control information notes (CINs)

Documents produced following the National Operational Guidance integration process will have their own dedicated templates separate from the standard LFB policy template that must be used.

Dedicated templates will ensure uniformity across documents, which is crucial for clarity and coherence. By using these templates, we will ensure that the document aligns with the required NOG standards and meets the specified criteria.

These can be found by contacting the NOG team who will own and store these:

- For operational information note templates use: 'LFB OIN template'.
- For control information note templates use: 'LFB CIN template'.
- For LFB roles template use: 'LFB roles template'.
- For LFB appliances template use: 'LFB appliances template'.
- For risk assessments template use: 'NOG RA template'.

### **New control/operational note numbers for NOG information notes (CINs/OINs)**

NOG operational information notes (OINs)/control information notes (CINs) will be given a 'control/operational note' number along with its title, this will be issued on publication by the Knowledge Management Team in ascending order (e.g. CN0001/ON0001).

### **NOG documents title page and document information page**

NOG documents have a title page that differs from the existing LFB policy template in terms of look, a summary can be found at the beginning of each document and the relevant dates (e.g. issue date, last amended etc) are on the 'document information' page at the end of the note.

As with existing policies and procedures, the title page is updated by the Policies and Procedures team. The product pack image, NFCC icon and titles can all be inputted via 'Slide Master', (use of existing documents for formatting will assist in creation).

NOG documents have a 'document information' page, which includes the document dates section showing when the note was issued, reviewed as current or last amended, and the next review due date, along with a table listing related policies and notes that should be read in conjunction with the current document.

### **What is a product pack?**

A complete suite of materials that supports the development and implementation of a policy which includes:

- The policy document (OIN, CIN, etc...).
- Risk assessments.
- EIA/SDIA/HSWIA.
- Related training or communications material.
- NOG foundation materials.
- Supporting information.
- Training specifications.

## What goes in 'supporting information' within the product pack

Reference materials that provide context or detail, such as:

- Memorandums of understanding.
- External reference documents.
- Any literature that supports the product pack.

Supporting information will need to be included in the reviewing cycle of all product packs to ensure all information is current.

### 1. **Operational or Fire Control policy owner requesting an update to an existing policy (not yet converted to NOG format)**

Where a framework area has not yet begun alignment with National Operational Guidance (NOG), the policy owner must:

- Contact the IM Policies Team to request a draft version of the existing document.
- Research relevant information and make any changes to the document.
- Review the content, format the layout, and ensure the document is written clearly in plain English.
- Conduct a final check of the document.
- Submit the document to the NOG Implementation Team, who will advise which framework area the document falls under. They will also contact all relevant teams, so they are aware of the upcoming potential changes.
- Return the document to the IM Policies Team for publication.
- Once approved, the document will be uploaded to The Hub.

### 2. **Conversion of existing SOPs to control/operational information notes (CINs/OINs)**

When converting SOPs to OINs or CINs:

- NOG implementation team performs a gap analysis against NOG.
- NOG implementation team will provide the appropriate template to the policy holder.
- NOG implementation team will provide guidance and support on how an existing SOP is turned into an OIN using hazard knowledge, control measures and tactical actions format.
- Once the document is approved by the document owner and the NOG implementation team the note is given to the IM Policies Team for publication on The Hub.

### 3. **Creation of new OINs or CINs (following a gap analysis)**

Where new content is needed:

- NOG implementation team performs a gap analysis against NOG.
- NOG implementation team will identify who the new policy owner will be.
- NOG implementation team will provide the appropriate template to the policy holder.
- NOG implementation team will provide guidance and support on how to create a new OIN using hazard knowledge, control measures and tactical actions format.
- Once the document is approved by the document owner and the NOG implementation team the note is given IM Policies Team for publication on The Hub.

### 4. **Creation of an operational safety note, LFB role, LFB appliance**

Where new content is needed:

- NOG implementation team identifies gap in knowledge.
- NOG implementation team will identify who the new document owner will be.
- NOG implementation team will provide the appropriate template to the document holder.

- NOG implementation team will provide guidance and support on how to create a new note using the appropriate format.
- Once the document is approved by the document owner and the NOG implementation team the note is given IM Policies Team for publication on The Hub.

## 5. **Creation of risk assessments**

- Mandatory for all new and updated operational information notes.
- Created by the NOG implementation team, document owner with support from Health and Safety using approved LFB format.
- Reviewed by the Health and Safety Board or designated reviewer.
- Displayed within the appropriate product pack and linked in policy document.

## 6. **Creation of EIAs, SDIAs, HSWIAs**

Each product pack will have an over-arching suite of documents.

The NOG implementation team will develop and provide one from each of the following:

- EIA: developed with EDI team.
- SDIA: developed with Sustainability Lead.
- HSWIA: developed with Health and Safety Team.
- Required at draft stage and submitted with product pack.
- Aligned with Policy number 0673 – Risk assessment procedure.

## 7. **Review and governance**

**All policy content is subject to formal governance before publication.**

Initial drafts reviewed by:

- NOG implementation team.
- Subject matter expert (SME) and peer group if applicable.
- Review cycle: every 3 years or after major incidents, national learning, or procedural changes.

## 8. **Version control and archiving**

All documents use the LFB master document template with embedded version control.

- Version number, date, and change history recorded on the front page.
- Obsolete versions archived securely and marked "Cancelled".
- The Hub must always host the current version.

## 9. **Communication and implementation**

- Once approved, the NOG implementation team will communicate the new information via their dedicated Hotwire page.
- Learning and Professional Development will be informed by the NOG team.

**NOG OIN/CIN workflow process****Department author/editor:**

- Create or edit an information note using the information note template or contact the IM policies team for the current draft version an existing document.
- Research relevant information and obtain approval from the Head of Department.

**Head of Department:**

- Review the new or draft information notes.
- Send the document to the IM policy team, copying all correspondence to the policiesandprocedures@london-fire.gov.uk and nogintegration@london-fire.gov.uk mailbox. Include all relevant teams in the process such as Learning and Professional Development and DaMOP.

**IM Policy Team:**

- Add or edit the information note in the admin database and SharePoint.
- Review the content, format the layout, and ensure the document is written clearly using plain English.
- Return the document to the author for approval.

**Department author/editor:**

- Review the edited information note.
- Complete impact assessments (Equality, Sustainability, Health and Safety). Send all signed off impact assessments to policiesandprocedures@london-fire.gov.uk.
- Forward the document to interested departments for wider consultation.

**Other Departments:**

- Review the document for consultation and provide feedback.
- Return the edited document to the author for approval, copying all correspondence to the policiesandprocedures@london-fire.gov.uk mailbox.

**Department author/editor:**

- Perform a final check on the document.
- Return the document to the IM policy team for publication.

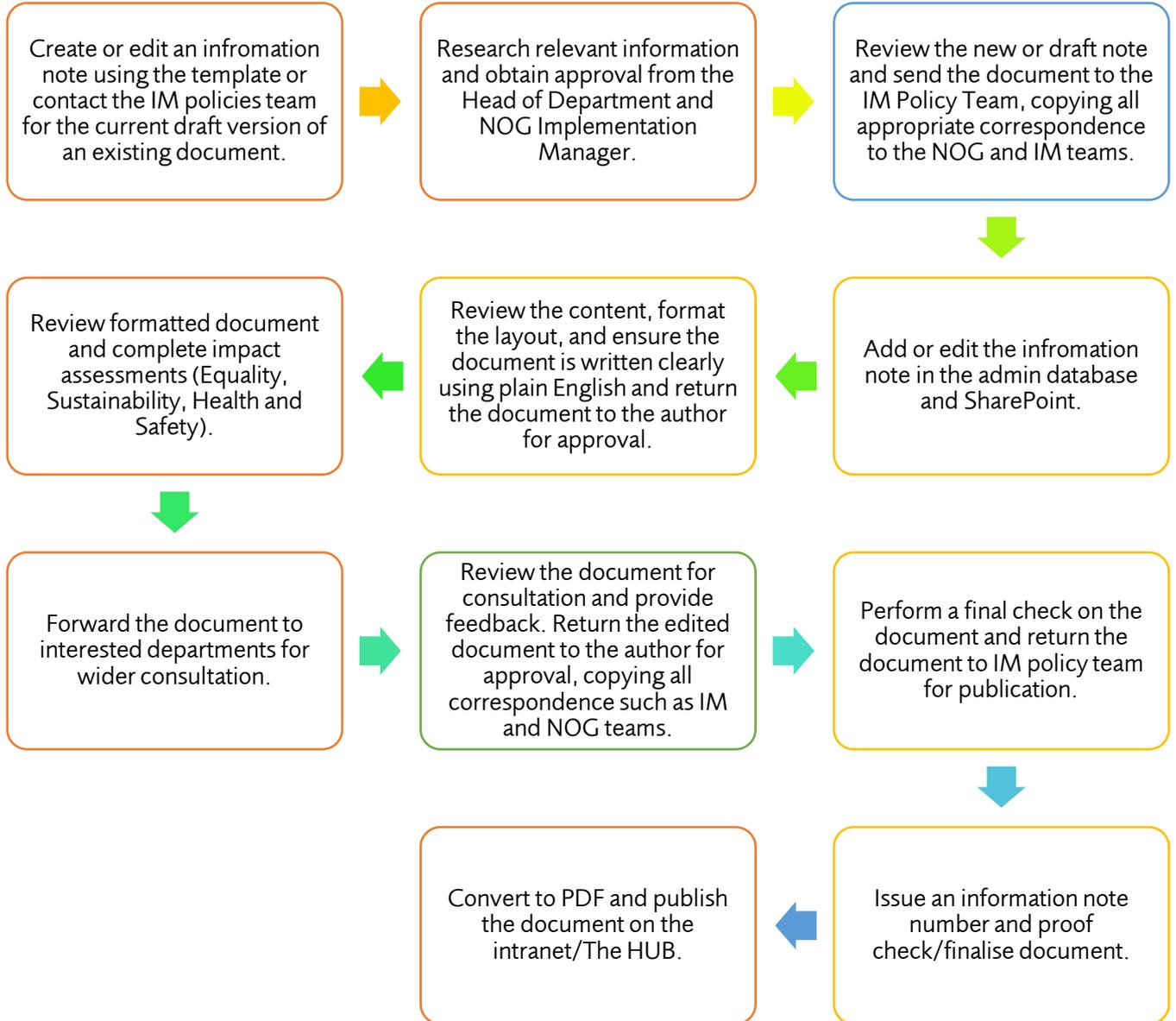
**IM Policy Team:**

- Issue a new information note number.
- Add or edit the information note in the admin database and SharePoint.
- Proof-check and finalise the document.
- Convert the information note to PDF and publish it on the intranet/The Hub.

If you are reviewing an existing NOG foundation document or SOP, you must obtain an editable PowerPoint version from the Knowledge Management Team by using the policy and procedure mailbox

(policiesandprocedures@london-fire.gov.uk). Ensure you copy in the NOG Implementation Team (nogintegration@london-fire.gov.uk) for document consistency.

Much of the editable information may be found in 'Slide Master' within the 'View' tab in PowerPoint, consult the NOG Implementation Team for assistance. All changes and amendments should be completed using the tracked change function so that there is an audit trail.



## Appendix 1 (C) – National Operational Guidance (NOG) foundation policies and Standard Operating Procedures (SOPS)

- 1 NOG policies and SOPs have their own templates separate from the standard LFB policy template that must be used. These can be found at **Start>new office documents>forms (departments)>Information Management**.
  - For NOG policies use template named 'LFB Policy template 2021'.
  - For SOPs use template named 'LFB SOP template'.
- 2 If you are reviewing an existing NOG foundation policy or SOP, you can obtain an editable Word version from the Knowledge Management Team by using the policy and procedure mailbox (policiesandprocedures@london-fire.gov.uk).

### New policy numbers for NOG policies and SOPs

- 3 NOG policies will be given a policy number the same as standard LFB policies and this will be issued by the Knowledge Management Team in ascending order.
- 4 For SOPs, the number is linked to the NOG policy it is related too, with each related SOP having an alphabetic suffix after the main policy number (e.g., for PN466 the related SOPs would be numbered PN466a, PN466b etc).

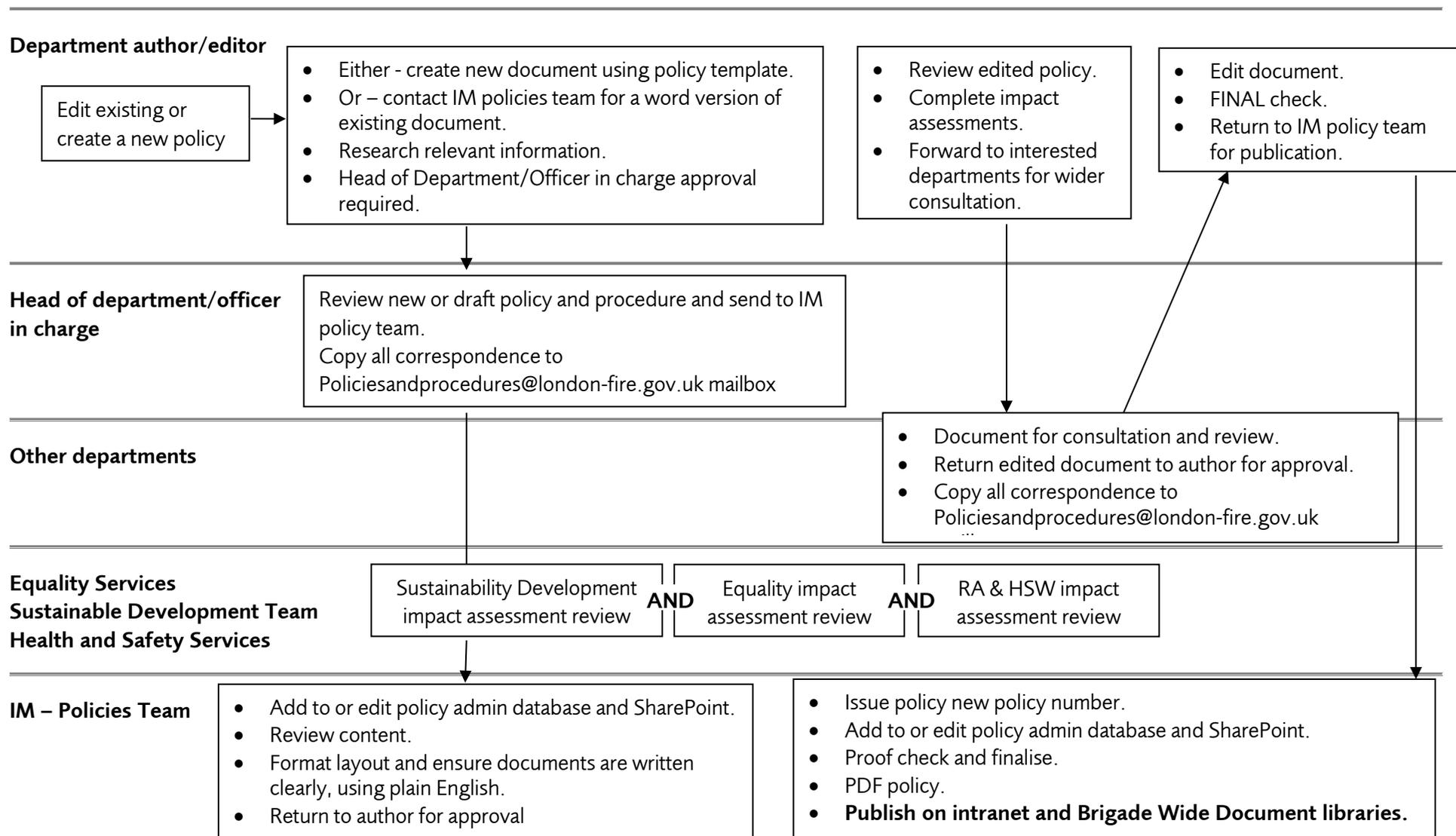
### NOG foundation policy title page and document information page

- 5 The NOG foundation policy title page differs from the standard LFB policy template in terms of look, with the policy dates found on the 'document information' page at the end of the policy rather than on the title page. Only the latest version date is on the title page, in the top right corner.
- 6 On the NOG policy title page, there is now an area to list related policies to be read in conjunction and an area to give a brief policy summary.
- 7 As with the standard policy procedure, the title page is mostly updated by the Policies and Procedures team so apart from the title and policy summary no other information is needed from the officer writing the policy and is for reference only.
- 8 The NOG foundation policy 'document information' page is used the same as the document history page on the standard LFB policy template but now includes the document dates section which lists the issued, reviewed as current, last amended, and next review due dates.

### SOP title page and document history

- 9 The SOP template does not have a main title page and should only have the title and SOP number in the top right corner (incident type code is not being used at present and should therefore be left blank). There is no policy owner or contents page on the SOP template.
- 10 The SOP template does not have a document information page and therefore any changes made to a SOP must be recorded on the document information page of the related main NOG foundation policy.

## Appendix 2 - Policies and procedures workflow



## Appendix 3 – 'Plain English' writing style

### Use 'plain English'

- 1 To make policies and procedures easy to absorb, authors should try to use language free from jargon and write in a 'plain English' style. Your job as writer is to transport ideas, instructions, or information into the mind of your reader as quickly as possible. The aim should be to use short, everyday words that your readers will find familiar. You want your readers to grasp the detail not spend time grappling with obscure language. You should care about your readers and want them to understand what you write. Ask yourself:
  - Who is the reader and what are they likely to know about the subject?
  - What is the real meaning I am trying to put across?
  - What attitude should I use? Am I informing, persuading, or explaining?
- 2 The following suggestions have been made by the Plain English Campaign:
  - **Avoid jargon:** Depending on your readers you should aim to avoid the use of jargon or expressions that have special professional or technical meaning. Sometimes it can be convenient to use shorthand, but you must be sure that all readers are familiar with the terms you use. The careless use of technical language or jargon will not impress your readers and may leave them confused.
  - **Long sentences:** These are difficult to write well because the longer they get, the more risk there is that readers will understand them in different ways. Read your text aloud. This will reveal whether your writing makes sense and is hitting the right note. If you run out of breath while you are reading, your sentence is probably too long.
- 3 Each of your sentences should contain just one main idea.
- 4 If many of your sentences are longer than 20 words, ask yourself whether you are trying to cover too much ground in each one. Try using full stops to break long sentences into shorter ones.
- 5 Wherever you have used a long word, an abbreviation, a jargon term, or a foreign sounding word, see if you can find a short, 'plain English' one that will do instead.
- 6 **Cut out redundant words/material:** Consider what you want to say. Then say it. Unnecessary words and phrases add nothing to the message. Try leaving these examples out of your writing. You will find your sentences survive and succeed without them:
  - Actually.
  - Basically.
  - Existing.
  - Extremely.
  - In due course.
  - In view of the fact that.
  - Obviously.
  - Quiet.

- 7 Some words that are commonly used in official writing are unnecessarily long, pompous-sounding, or vague. This list contains a few of them, with suggested replacements in brackets.
- additional (extra)
  - advise (tell)
  - the applicant (you)
  - acquire (buy, get)
  - commence (start)
  - complete (fill in)
  - cognisant of (know)
  - ensure (make sure)
  - forward (send)
  - in accordance with (under, keeping to)
  - in excess of (more than)
  - in respect of (for)
  - in the event of X (if X happens)
  - in order to (to)
  - manner (way)
  - on receipt of (when we/you receive)
  - on request (if you ask)
  - particulars (details)
  - per annum (a year)
  - persons (people)
  - promulgate (publish)
  - prior to (before)
  - purchase (buy)
  - regarding (about)
  - should you wish (if you wish)
  - terminate (end/finish)
  - whilst (while)
- 8 **Using active verbs:** one of the most common causes of unclear writing is the overuse of passive verbs. Clarity usually demands the use of active verbs. This has nothing to do with the action occurring in the sentence. It is the relationship between the different grammatical parts of the sentence. The most common and clear word order in English sentences uses active verbs as follows:
- The Brigade purchased an appliance.  
**not** An appliance was purchased by the Brigade.
  - Government sent a consultation paper.  
**not** A consultation paper was sent by Government.
  - We put out fires.  
**not** Fires are put out by us.
- Sentences full of active verbs can become monotonous. Try using the imperative or instruction instead. Examples are: make an entry in the log book, change the wheel, grease the spindle and fill in the form.
- 9 **Personal passive:** Avoid using the personal impassive. For example: 'it is thought', 'it is suggested'. In each of these examples the agent (person or group) taking the action is left unstated. If you make clear who the agent is you will help your readers. So use '**we thought**', '**we suggest**', etc.
- 10 **Make it positive:** A positive sentence is easier to understand than a negative one. A negative instruction only deals with the action that is not to be taken and leaves the reader to work out what should be done. For example, '**write comprehensible English**' is a little easier to understand than '**don't write incomprehensible English**'. Some words (like unless and except), and some verbs (like avoid and subtract) imply a negative. When combined with true negatives like not and never, they can produce difficult sentences. For example 'Never avoid taking the container cap off before filling with fuel' is more difficult to take in at first reading than 'Always take off the container cap before filling with fuel'.

## Appendix 4 – Publishing documents Brigade wide

1 This document explains where to publish a document, so it is available brigade wide.

### Where a document can be located for brigade wide access

2 There are three principal areas where a document can be located to make it available brigade wide these areas are the:

- Brigade wide document libraries; or
- Hotwire through the web content management system; or
- departmental SharePoint site.

3 As these areas are all web based it is possible to provide a link to them from Hotwire.

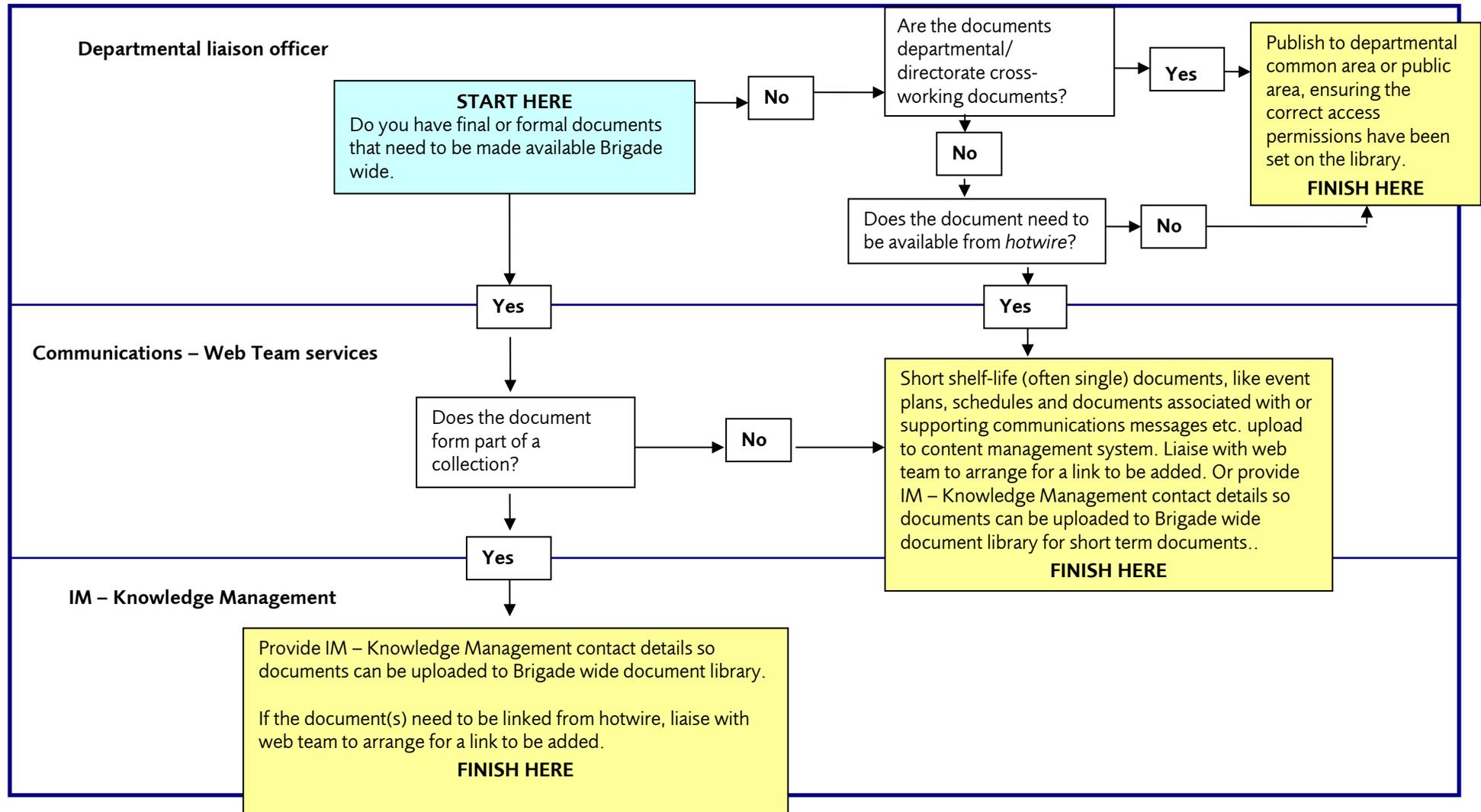
4 To establish the most appropriate place to publish a document Brigade wide, refer to the flowchart in the appendix.

### How to publish a document

5 When you have determined where your document should be published refer to the following:

- In the brigade wide documents area refer to Brigade wide document libraries guidance note;
- to the content management system liaise with the web team;
- to the common area or public area ensure the correct access permissions have been set on the library and save the document to the SharePoint site.

Flowchart for the publication of documents brigade wide





## Document history

### Assessments

An equality, sustainability or health, safety and welfare impact assessment and/or a risk assessment was last completed on:

EIA	29/01/24	SDIA	L - 27/02/26	HSWIA	13/06/23	RA	NA
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### Audit trail

Listed below is a brief audit trail, detailing amendments made to this policy/procedure.

Page/para nos.	Brief description of change	Date
Page 16	PN766 – publishing documents Brigade wide has been deleted and the content incorporated into this policy as Appendix 4.	18/01/2024
Page 6	Appendix 1A - terminology updated aligning with inclusion content on hotwire..	30/01/2024
Page 12	New Appendix 1B added to include guidance for uploading documents to The Hub.	02/05/2025
Page 24	SDIA date updated.	06/03/2026

### Subject list

You can find this policy under the following subjects.

Policies	Procedures
Policies and procedures	Formatting
Plain English	

### Freedom of Information Act exemptions

This policy/procedure has been securely marked due to:

Considered by: (responsible work team)	FOIA exemption	Security marking classification