



# DEVON & SOMERSET FIRE & RESCUE AUTHORITY

**M. Pearson  
CLERK TO THE AUTHORITY**

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**To: The Chair and Members of the  
Community Safety Committee**

**(see below)**

**SERVICE HEADQUARTERS  
THE KNOWLE  
CLYST ST GEORGE  
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**COMMUNITY SAFETY COMMITTEE**  
**(Devon & Somerset Fire & Rescue Service)**

**Friday, 11th November, 2022**

A meeting of the Community Safety Committee will be held on the above date, **commencing at 10.00 am in Committee Room A, Somerset House, Devon & Somerset Fire & Rescue Service Headquarters, Exeter** to consider the following matters.

M. Pearson  
Clerk to the Authority

**A G E N D A**

***PLEASE REFER TO THE NOTES AT THE END OF THE AGENDA LISTING SHEETS***

**1 Apologies**

**2 Minutes (Pages 1 - 4)**

of the previous meeting held on 27 April 2022 attached.

**3 Items Requiring Urgent Attention**

Items which, in the opinion of the Chair, should be considered at the meeting as matters of urgency.

## **PART 1 - OPEN COMMITTEE**

### **4 Strategic Priority 1 and 2 Performance Measures:**

- a Quarter 4 of 2021-22 and Quarters 1 of 2022-23 (Pages 5 - 38)  
Report of the Director of Service Delivery (CSC/22/9) attached.
- b Quarter 2 of 2022-23 (Pages 39 - 58)  
Report of the Director of Service Delivery (CSC/22/10) attached.

### **5 Home Fire Safety Visits Performance (Pages 59 - 68)**

Report of the Director of Service Delivery (CSC/22/11) attached.

### **6 Fatal Fire Deaths Review (Pages 69 - 72)**

Report of the Director of Service Delivery (CSC/22/12) attached.

### **7 Fire Engine Availability (Pages 73 - 90)**

Report of the Director of Service Delivery (CSC/22/13) attached.

### **8 His Majesty's Inspectorate of Constabulary & Fire & Rescue Services (HMICFRS) Areas For Improvement Action Plan Update (Pages 91 - 92)**

Report of the Deputy Chief Fire Officer (CSC/22/14) attached.

## **MEMBERS ARE REQUESTED TO SIGN THE ATTENDANCE REGISTER**

### **Membership:-**

Councillors Chesterton (Chair), Biederman (Vice-Chair), Brazil, McGeough, Partridge, Radford and Sully

## NOTES

### 1. **Access to Information**

Any person wishing to inspect any minutes, reports or lists of background papers relating to any item on this agenda should contact the person listed in the “Please ask for” section at the top of this agenda.

### 2. **Reporting of Meetings**

Any person attending a meeting may report (film, photograph or make an audio recording) on any part of the meeting which is open to the public – unless there is good reason not to do so, as directed by the Chair - and use any communication method, including the internet and social media (Facebook, Twitter etc.), to publish, post or otherwise share the report. The Authority accepts no liability for the content or accuracy of any such report, which should not be construed as representing the official, Authority record of the meeting. Similarly, any views expressed in such reports should not be interpreted as representing the views of the Authority.

Flash photography is not permitted and any filming must be done as unobtrusively as possible from a single fixed position without the use of any additional lighting; focusing only on those actively participating in the meeting and having regard also to the wishes of any member of the public present who may not wish to be filmed. As a matter of courtesy, anyone wishing to film proceedings is asked to advise the Chair or the Democratic Services Officer in attendance so that all those present may be made aware that is happening.

### 3. **Declarations of Interests at meetings (Authority Members only)**

If you are present at a meeting and you are aware that you have either a disclosable pecuniary interest, personal interest or non-registerable interest in any matter being considered or to be considered at the meeting then, unless you have a current and relevant dispensation in relation to the matter, you must:

- (i) disclose at that meeting, by no later than commencement of consideration of the item in which you have the interest or, if later, the time at which the interest becomes apparent to you, the existence of and – for anything other than a “sensitive” interest – the nature of that interest; and then
- (ii) withdraw from the room or chamber during consideration of the item in which you have the relevant interest.

If the interest is sensitive (as agreed with the Monitoring Officer), you need not disclose the nature of the interest but merely that you have an interest of a sensitive nature. You must still follow (i) and (ii) above.

Where a dispensation has been granted to you either by the Authority or its Monitoring Officer in relation to any relevant interest, then you must act in accordance with any terms and conditions associated with that dispensation.

Where you declare at a meeting a disclosable pecuniary or personal interest that you have not previously included in your Register of Interests then you must, within 28 days of the date of the meeting at which the declaration was made, ensure that your Register is updated to include details of the interest so declared.

	<b>NOTES (Continued)</b>
<b>4.</b>	<p><b><u>Part 2 Reports</u></b></p> <p>Members are reminded that any Part 2 reports as circulated with the agenda for this meeting contain exempt information and should therefore be treated accordingly. They should not be disclosed or passed on to any other person(s). Members are also reminded of the need to dispose of such reports carefully and are therefore invited to return them to the Committee Secretary at the conclusion of the meeting for disposal.</p>
<b>5.</b>	<p><b><u>Substitute Members (Committee Meetings only)</u></b></p> <p>Members are reminded that, in accordance with Standing Orders, the Clerk (or his representative) must be advised of any substitution prior to the start of the meeting. Members are also reminded that substitutions are not permitted for full Authority meetings.</p>
<b>6.</b>	<p><b><u>Other Attendance at Committees )</u></b></p> <p>Any Authority Member wishing to attend, in accordance with Standing Orders, a meeting of a Committee of which they are not a Member should contact the Democratic Services Officer (see “please ask for” on the front page of this agenda) in advance of the meeting.</p>

## COMMUNITY SAFETY COMMITTEE

(Devon & Somerset Fire & Rescue Authority)

27 April 2022

### Present:

Councillors Chesterton (Chair), Biederman, Corvid, Radford (Vice-Chair), Randall-Johnson (vice Parker-Khan) and Redman.

### Also in attendance in accordance with Standing Order 39:

Councillor Coles.

### Apologies:

Councillors McGeough and Parker-Khan.

#### \* **CSC/21/16** Minutes

**RESOLVED** that the Minutes of the meeting held on 9 February 2022 be signed as a correct record.

#### \* **CSC/21/17** Strategic Priority 1 and 2 Performance Measures: Quarter 3 2021-22

The Committee received for information a report of the Director of Service Delivery (CSC/22/6) on performance by the Service in Quarter 3 of the current (2021-22) financial year against those Key Performance Indicators (KPIs) associated with the following two Strategic Priorities as approved by the Authority for 2021-22 (Minute DSFRA/21/ refers):

**Strategic Priority 1:** “Our targeted prevention and protection activities will reduce the risks in our communities, improving health, safety and wellbeing and supporting the local economy”; and

**Strategic Priority 2:** “Our operational resources will provide an effective emergency response to meet the local and national risks identified in our Community Risk Management Plan”.

The performance status of the Service KPIs was based on the following criteria:

Succeeding	The KPI was achieving its target
Near Target	The KPI is less than 10% away from achieving its target
Needs Improvement	The KPI is at least 10% away from achieving its target

In summary, the report identified that Quarter 3 performance against the KPIs was:

	Succeeding	Near target	Needs improvement
<b>Priority 1</b>	11	7	1
<b>Priority 2</b>	8	5	0

The Priority 1 KPI needing improvement related to the number of home fire safety visits completed, which varied from target by 31.6% (9,236 completed visits against a year-to-date target of 13,400). The report identified the main factors behind the ability to deliver the expected level of productivity, together with actions intended to secure performance improvement.

In debating the report, the following points were raised:

- that finalised data for quarter 4 reporting would be submitted to the next meeting. Analysis of the raw data, though, showed some improvement for the number of home fire safety visits completed, which should see performance at 82% (14,800 visits) against the full-year target of 18,000 visits;
- measures to improve home fire safety visit performance included targeted leaflet drops by wholetime crews, with a home fire safety visit subsequently booked if requested;
- the Service continued with “hot strike” leaflet drops for those areas where a fire had recently occurred;
- the Service also undertook seasonal fire safety campaigns (e.g. barbecue safety in summer; bonfire safety in November; candle safety at Christmas);
- that, in setting targets for prevention work, it was necessary to balance quantity with quality. In general terms, prevention activities were targeted at those groups identified as being most vulnerable;
- that targets set were based on capacity to deliver during a normal year. The COVID pandemic had, however, impacted on reaching targets set for the last two years.

The Committee commented that it would be helpful if:

- a report could be submitted to a future meeting of this Committee specifically on home fire safety visits (targeting; processes involved etc.); and
- information could be presented to a future Members’ Forum meeting on the impact of the implementation of Pay for Availability on appliance availability across the area served.

\* **CSC/21/18** **Risk-Based Inspection Programme**

The Committee received for information a report of the Director of Service Delivery (CSC/22/7) on the risk-based inspection programme used by the Devon & Somerset Fire & Rescue Service (the Service) to enforce the requirements of the Regulatory Reform (Fire Safety) Order 2004 (the Order).

The risk-based inspection programme sought to target the highest risk premises within Devon and Somerset against which to undertake fire safety audits, using staff trained in line with the national competency framework. Normal risk premises also had an inspection regime using a fire safety check which could be undertaken by appropriately trained staff.

While there was currently no national definition for a “high-risk” premise, the Service had re-defined what it considered to be “high-risk” by using various data sources and risk attributes. The current Service definition for a high-risk premise, which informed the risk-based inspection programme, was:

*‘Buildings identified as Category 1 “Higher Risk” are more likely to have vulnerable occupants, through unfamiliarity and/or their mobility. They are likely to have evacuation methods consisting of stay put, delayed, or phased/progressive strategies.*

*Any fire safety failures or lack of compliance places occupants at significant risk due to the critical reliance on the building design and management of any evacuation strategy. Buildings that have the potential to cause significant harm and/or large loss of life in the event of fire, including indirectly due to community impact/loss, will be our highest priority’.*

The types of Category 1 (Higher Risk) premises were identified in the report and included:

- premises used for sleeping/residential of 6 or more storeys;
- very large commercial premises (15,000sq.m or over);
- all hospitals;
- care homes; and
- significant sleeping accommodation providers (e.g. hotels; boarding and guest houses).

With the exception of hospitals (which were inspected annually), all other Category 1 (Higher Risk) premises would be inspected initially every three years, reducing to annual inspection once recruited inspecting officers achieved competence.

The report identified Fire Safety Inspection Officer development and competency requirements alongside the expected number of inspections to be undertaken in each year and some of the potential risks and challenges that could impact on delivery.

The risk-based inspection programme was complemented by a communications strategy and compliance education on the requirements of the Order. The Service would be seeking to introduce a more comprehensive compliance education strategy during 2022-23.

\* **CSC/21/19**    **Prevention - Children and Young People**

The Committee received for information a report of the Director of Service Delivery (CSC/22/8) on core, prevention-based, engagement activities of the Devon & Somerset Fire & Rescue Service (the Service) for children and young people. These were focussed on the following areas:

- education in schools to promote fire and road safety;
- Fire Cadet and Academy programmes;
- “Out of the Blue” courses; and
- fire setter intervention programmes.

The elements of each of these activities, together with the delivery mechanisms, was detailed in the report. Delivery against each of the activities would be reviewed during 2022 to ensure alignment with the approved Community Risk Management Plan and the Service delivery plan 2021-23.

The Committee acknowledged the considerable voluntary effort required for the successful delivery of many of these initiatives and asked that their appreciation of the work of all involved be placed on record.

**\* DENOTES DELEGATED MATTER WITH POWER TO ACT**



<b>REPORT REFERENCE NO.</b>	<b>CSC/22/9</b>
<b>MEETING</b>	<b>COMMUNITY SAFETY COMMITTEE</b>
<b>DATE OF MEETING</b>	<b>11 NOVEMBER 2022</b>
<b>SUBJECT OF REPORT</b>	<b>STRATEGIC PRIORITY 1 AND 2 PERFORMANCE MEASURES: QUARTER 4 OF 2021-22 AND QUARTER 1 OF 2022-23</b>
<b>LEAD OFFICER</b>	<b>DIRECTOR OF SERVICE DELIVERY</b>
<b>RECOMMENDATIONS</b>	<i>That the performance against targets under Strategic Priorities 1 and 2 be welcomed and noted.</i>
<b>EXECUTIVE SUMMARY</b>	<p>At its ordinary meeting on 29 June 2021, the Devon &amp; Somerset Fire &amp; Rescue Authority (the Authority) agreed four Strategic Priorities to guide the activity of the Service (Minute DSFRA/21/9 refers). These Strategic Priorities were also approved for 2022-23 by the Authority at its budget meeting on 21 February 2022 (Minute DSFRA/21/36 refers).</p> <p>It was further agreed that performance against Strategic Priorities 1 and 2 and associated objectives should be reported to this Committee on a regular basis.</p> <p>At its meeting on 26 July 2021, the Committee agreed a set of key performance indicators (KPIs) to maintain scrutiny of Service activity and progress against Strategic Priorities 1 and 2 (Minute CSC/21/2 refers). It was further agreed that a KPI report would be produced for the preceding quarter of the financial year for each subsequent Committee meeting.</p> <p>Appendix A of this report presents the Quarter 4 of 2021-22 KPI report for Strategic Priorities 1 and 2.</p> <p>Appendix B of this report sets out the Quarter 1 of 2022-23 KPI report for the same priorities.</p>
<b>RESOURCE IMPLICATIONS</b>	Existing budget and staffing is sufficient to deliver the required improvements
<b>EQUALITY RISKS AND BENEFITS ANALYSIS</b>	N/A
<b>APPENDICES</b>	<p>A. Community Safety Committee 2021-22 Quarter 4 performance report</p> <p>B. Community Safety Committee 2022-23 Quarter 1 performance report</p>
<b>BACKGROUND PAPERS</b>	<a href="#">Report DSFRA/21/9 (Strategic Policy Objectives 2021-22)</a> to the Authority ordinary meeting held on 29 June 2021 (and <a href="#">the Minutes of that meeting</a> ).

	<a href="#">Report DSFRA/22/2 (Strategic Policy Objectives 2022-23)</a> to the Authority budget meeting held on 21 February 2022 (and the Minutes of that meeting).
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**1. INTRODUCTION**

- 1.1. At its ordinary meeting on 29 June 2021, the Devon & Somerset Fire & Rescue Authority (FRA) agreed 4 Strategic Priorities to guide the activity of the Service (Minute DSFRA/21/9 refers). These Strategic Priorities were also approved for 2022-23 by the Authority at its budget meeting on 21 February 2022 (Minute DSFRA/21/36 refers).
- 1.2. It was further agreed that performance against Strategic Priorities 1 and 2 and associated objectives should be reported to this Committee on a regular basis.
- 1.3. At its meeting on 26 July 2021, the Committee agreed a set of key performance indicators (KPIs) to maintain scrutiny of Service activity and progress against Strategic Priorities 1 and 2 (Minute CSC/21/2 refers). It was further agreed that a KPI report would be produced for the preceding quarter of the financial year for each subsequent Committee meeting.
- 1.4. Appendix 1 of this report presents the Quarter 3 of 2021-22 KPI report for Strategic Priorities 1 and 2.

**2. PERFORMANCE OVERVIEW**

- 2.1. The performance status of the Service KPIs is based on the following criteria:
  - Succeeding                      The KPI is achieving its target.
  - Near target                      The KPI is less than 10% away from achieving its target.
  - Needs improvement            The KPI is at least 10% away from achieving its target.

**Performance overview: top level**

- 2.2. Table 1 below shows the Service’s performance status overview in Quarter 4 of 2021-22:

	Succeeding	Near target	Needs improvement
Priority 1	9	8	2
Priority 2	10	4	0

- 2.3. There were two Priority 1 KPIs requiring improvement:
  - KPI 1.1.2.1 – number of dwelling fire fatalities; and
  - KPI 1.1.4.1 - Number of Home Safety Visits completed (an exception report is included at page 7 of Appendix A).

2.4. Table 2 below shows the Service’s performance status overview in Quarter 1 of 2022-23:

	Succeeding	Near target	Needs improvement
Priority 1	10	8	1
Priority 2	7	6	1

2.5. There are currently two KPIs requiring improvement:

- KPI 1.1.2.2 – dwelling fire fatalities (exception report is included at page 7 of Appendix B); and
- KPI 2.1.4.2 – percentage of operational risk information in date – level 4 tactical plans (an exception report is included at page 10 of Appendix B).

2.6. Separate reports are included elsewhere on the agenda for this meeting on the Service’s performance on Home Fire Safety Visits and the Fatal Fire Death Reviews respectively.

**ACFO PETE BOND**  
**Director of Service Delivery**



DEVON &  
SOMERSET  
FIRE & RESCUE SERVICE

# Community Safety Committee

## 2021/22 quarter four performance report

This report provides an overview of performance against the priorities and objectives that fall within the remit of the Community Safety and Corporate Planning Committee.

Alice Murray, Strategic Analyst

Devon & Somerset  
Fire & Rescue Service



**Contents**

Introduction ..... 4

Performance overview: top level ..... 4

Performance overview: priority one ..... 5

    Objective 1.1: we will work with partners to target our prevention activities where they have the greatest impact on the safety and wellbeing of our communities. .... 5

Exception report: number of dwelling fire fatalities ..... 7

Exception report: number of home safety visits completed ..... 9

    Objective 1.2: we will protect people in the built environment through a proportionate, risk-based approach to the regulation of fire safety legislation. .... 10

    Objective 2.1: we will maintain accurate, timely and relevant risk information, enabling our operational crews to understand and be prepared to respond to the demand and risks present in their local communities. .... 11

    Objective 2.2: We will monitor changes in risk to ensure that our resources are most available in the locations necessary to mitigate them. .... 12

    Objective 2.4: we will support the effective delivery of our frontline services by seeking improvements to our operational resourcing, mobilising and communications functions. .... 13

    Objective 2.8: we will be prepared to respond to major incidents and support partner agencies. .... 14

Glossary..... 15

## Introduction

To make sure that we are delivering the best possible service to the communities of Devon and Somerset and its visitors, we need to regularly monitor our performance. This report looks at Key Performance Indicators (KPIs) from the Services' Performance Management Framework that require the scrutiny of the Community Safety Committee.

The KPIs will support us to deliver against two of our four strategic priorities:

**Priority 1** – “Our targeted prevention and protection activities will reduce the risks in our communities, improving health, safety and wellbeing and supporting the local economy.”

**Priority 2** – “Our operational resources will provide an effective emergency response to meet the local and national risks identified in our Community Risk Management Plan”

The performance status of our KPIs is based on the following criteria:

Succeeding	The KPI is achieving its target.
Near target	The KPI is less than 10% away from achieving its target.
Needs improvement	The KPI is at least 10% away from achieving its target.

When a KPI has a status of “needs improvement”, an exception report will be provided which will contain further analysis and identify whether an additional action needs to be taken to drive improvement. Updates on progress against actions will be provided in future reports until they are closed.

KPIs that are “near target” will be monitored by the lead manager to assess whether performance is likely to improve where appropriate implement tactical changes to influence the direction of travel. No further information will be provided within this report.

## Performance overview: top level

Table 1: performance status overview 2021/22 Q4

	Succeeding	Near target	Needs improvement
Priority 1	9	8	2
Priority 2	10	4	0

The two KPIs with a status of “needs improvement” are:

- KPI 1.1.2.1 - Number of dwelling fire fatalities
- KPI 1.1.4.1 - Number of Home Safety Visits completed (exception report, page 7)



## Performance overview: priority one

**Objective 1.1: we will work with partners to target our prevention activities where they have the greatest impact on the safety and wellbeing of our communities.**

Table 2: KPIs that require improvement

KPI Ref	Description	Current	Target	% Diff.
1.1.2.1	Number of dwelling fire fatalities in reporting quarter	2	0	NA
	Number of dwelling fire fatalities in last 12 months vs five-year average	6	7	-14.3%
	Dwelling fires fatality performance status	Needs improvement: fatalities reported in quarter		

KPI Ref	Description	Current	Target	% Diff.
1.1.4.1	Number of home fire safety visits completed	14,781	18,000	-17.9%

Table 3: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
1.1.3.2	Rate of dwelling fire hospitalisations per 100,000 population	4.44	4.27	4.0%
1.1.6.1	Percentage of targeted home safety visits meeting two or more risk criteria	54.4%	60.0%	-5.6%
1.1.10.2	Rate of other primary fire hospitalisations per 100,000 population (excludes dwellings and non-domestic premises)	0.64	0.59	8.7%
1.1.11.2	Rate of secondary fires per 100,000 population	91.94	91.85	0.1%

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Table 4: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
1.1.1.2	Rate of dwelling fires attended per 100,000 population	52.84	53.65	-1.5%

<sup>1</sup> The actual and target figures within this document are rounded to two decimal places for KPIs that are calculated as a rate. The percentage change is calculated using a higher degree of accuracy, this means that for smaller figures the percentage change may not be derived from the rounded figures presented in this report.

KPI Ref	Description	Current	Target	% Diff.
1.1.8.2	Rate of other primary fires per 100,000 population (excludes dwellings and non-domestic premises)	45.61	46.98	-2.9%
1.1.12.2	Rate of deliberate fires per 100,000 population	78.60	81.38	-3.4%
1.1.13.2	Rate of road traffic collisions per 100,000 population	49.14	52.17	-5.8%
1.1.14.2	Rate of people killed or seriously injured in road traffic collisions per 100,000 population	26.99	27.06	-0.3%

KPI Ref	Description	Current	Target	% Diff.
1.1.9.1	Number of other fire fatalities in reporting quarter	0	0	NA
	Number of other fire fatalities in last 12 months vs five-year average	2	2	0.0%
	Other fires fatality performance status	Succeeding: both quarter and 12-month average on target		

### **Exception report: number of dwelling fire fatalities**

This KPI reports on the number of fire-related fatalities in dwelling fires.

If there is a fire-related fatality within the reporting quarter, the KPI will immediately be reported as “Needs Improvement” and require an exception report.

If there is not a fire-related fatality in the quarter, a performance status will be provided that incorporates the 12-month figure vs the five-year average.

#### **Analysis**

The KPI is currently in exception due to two fire-related fatalities being recorded within the reporting quarter.

**Date and location: 19/03/2022, Brixham**

**Victim: Female, 100 years old**

**Property type: Terraced House – single occupancy**

**Emergency Response Standard: Met**

**Incident details:** On the 19<sup>th</sup> of March 2022 at 12:38pm, three crews from Brixham and Paignton stations were mobilised to a “Fire Domestic Persons Reported” incident. Brixham were first on scene, arriving at the incident 9 minutes 5 seconds after the call was received (meeting the Emergency Response Standard for dwelling fires).

On arrival, crews reported that smoke was issuing from the property, they had also been alerted that the elderly female occupant was inside and was reliant on a walking frame.

Firefighters in breathing apparatus entered the property and located the 100-year-old female occupant in the hallway and rescued her from the property. The victim was unconscious; first aid was administered while awaiting the arrival of the ambulance service. Despite the efforts of the crews, the victim was pronounced dead at the scene.

Following fire investigation, it was established that the fire started accidentally as a result of either a fault within the double square adaptor or the electric blanket. Both of these items have been sent for forensic testing and we are awaiting the results.

**Date and location: 26/03/2022, Plymouth**

**Victim: Male, 25 years old**

**Property type: Caravan/mobile home (permanent dwelling)**

**Emergency Response Standard: Met**

**Incident details:** On the 26<sup>th</sup> of March 2022 at 1:07pm, four appliances from Camels Head, Crownhill and Greenbank (two appliances) were mobilised to a “Fire Domestic Persons Reported” incident. Crownhill were first on scene, arriving at the incident 3 minutes 16

seconds after the call was received, having been assigned to the incident whilst returning from another shout in the Plymouth area.

On arrival, crews were met by a caravan that was well alight. Unfortunately, the occupant of the caravan, a 25-year-old male, was pronounced dead at the scene.

Due to the extent of damage an exact cause of the fire could not be determined, however, evidence examined by the Fire Investigator indicated that it most likely started accidentally.

### **Actions**

- All incidents where there is a fire-related fatality are reviewed by the Community Safety department, Strategic Analysts and Communications and Engagement department.
- Where learning points or potential trends are identified, actions are put into place to support improved outcomes for communities.

### Exception report: number of home safety visits completed

This measure calculates the number Home Safety Visits (HSVs) that have been completed which meet the Home Office requirements of:

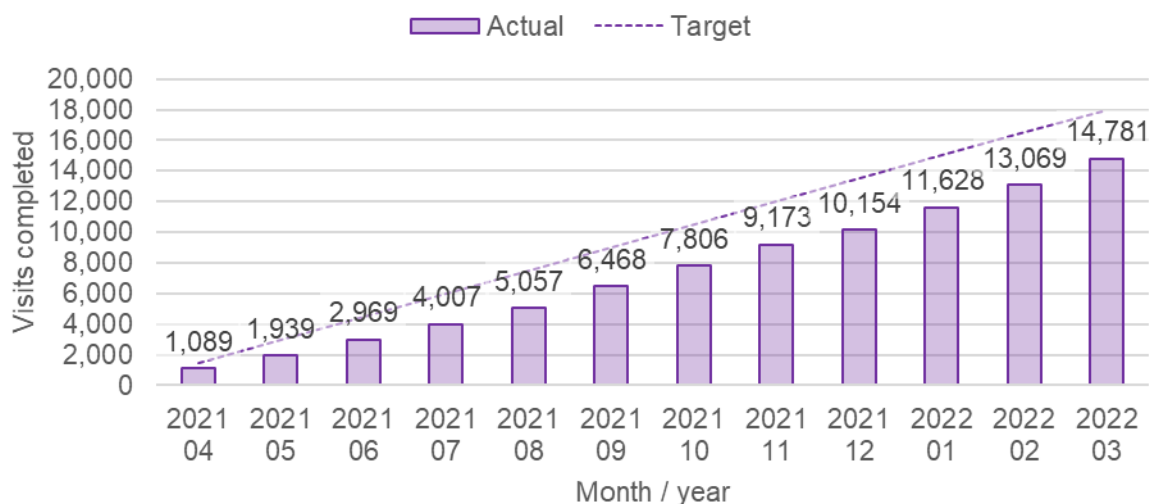
- identifying and advising of the potential fire risks within the home
- advising householders what to do to reduce or prevent these risks
- putting together an escape plan in case a fire does break out, and
- ensuring the householder has working smoke alarms.

#### Analysis

During 2021/21 we completed 14,781 Home Fire Safety Visits, 17.1% below our target of 18,000. The target was based on the capacity of our home safety technicians and the introduction of doorstep home safety visits, delivered by our wholetime crews.

During Q4 2021/22, the service delivered an average of 1,542 HFSVs per month, compared to an average of 1,128 during the preceding nine months.

Table 5: cumulative number of HSVs completed against target, 2021/22



There are two main factors that have affected our ability to deliver the expected level of productivity.

1. COVID-19: during 2021/22 there has continued to be some reluctance from the public to allow our technicians crews into their homes.
2. The introduction of doorstep home safety visits has taken time to implement. All wholetime watches have now received their training and early indications suggest that this will significantly increase the number of households that we are reaching.

#### Actions

1. Continue the review processes and systems relating to the delivery of home safety activities to maximise efficiency and effectiveness.

**Objective 1.2: we will protect people in the built environment through a proportionate, risk-based approach to the regulation of fire safety legislation.**

Table 6: KPIs that are requiring improvement

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement	--	--	--

Table 7: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
1.2.1.2	Rate of non-domestic premises fires per 10,000 rateable premises (hereditaments)	61.60	61.50	0.1%
1.2.4.2	Number of fire safety audits completed (short and full)	549	600	-8.5%
1.2.5.4	Rate of non-domestic false alarms per 10,000 rateable premises (hereditaments)	265.04	254.66	4.1%
1.2.6.1	Percentage of statutory consultations completed to required timescales	99.1%	100.0%	-0.9%

Table 8: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
1.2.3.2	Rate of non-domestic premises fire hospitalisations per 10,000 rateable premises (hereditaments)	1.12	1.25	-10.2%
1.2.4.1	Number of fire safety checks completed	3273	2000	63.7%

KPI Ref	Description	Current	Target	% Diff.
1.2.2.1	Number of non-domestic fire fatalities in reporting quarter	0	0	NA
	Number of non-domestic fire fatalities in last 12 months vs five-year average	0	1	-100.0%
	Non-domestic fires fatality performance status	Succeeding: both quarter and 12-month average on target		

**Objective 2.1: we will maintain accurate, timely and relevant risk information, enabling our operational crews to understand and be prepared to respond to the demand and risks present in their local communities.**

Table 10: KPIs that are requiring improvement

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement	--	--	--

Table 11: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently near to achieving target.	--	--	--

Table 12: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.1.1.1	Number of local exercises completed	54	36	50.0%
M2.1.1.2	Number of crossborder exercises completed	14	12	16.7%
M2.1.1.3	Number of national exercises completed	5	1	400.0%
M2.1.4.1	Percentage of operational risk information in date - level 3 SSRI	96.7%	94.0%	2.7%
M2.1.4.2	Percentage of operational risk information in date - level 4 tactical plans	100.0%	98.0%	2.0%

<sup>2</sup>

<sup>2</sup> M2.1.4.2: whilst reported performance levels indicate that this KPI is succeeding, significant issues have been identified within the data. It is highly likely that this KPI is currently over reporting and performance is likely to be worse than indicated. A more accurate picture will be available within the 2022/23 Q1 Performance Report.

**Objective 2.2: We will monitor changes in risk to ensure that our resources are most available in the locations necessary to mitigate them.**

Table 13: KPIs that are requiring improvement

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently near to achieving target.	--	--	--

Table 14: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.2.3.1	Percentage of dwelling fires attended within 10 minutes of call answer	71.4%	75.0%	-4.8%

Table 15: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.2.3.2	Percentage of road traffic collisions attended within 15 minutes of call answer	76.4%	75.0%	1.4%



**Objective 2.4: we will support the effective delivery of our frontline services by seeking improvements to our operational resourcing, mobilising and communications functions.**

Table 16: KPIs that are requiring improvement

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement.	--	--	--

Table 17: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.4.1.1	Risk prioritised pump availability (percentage)	96.7%	98.0%	-1.3%
M2.4.1.2	Standard pump availability (percentage)	80.8%	85.0%	-4.2%
M2.4.3.1	Percentage of calls handled within target time (call answer to resource mobilisation)	89.3%	90.0%	-0.7%

Table 18: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.4.3.2	Average turnout time for emergency incidents - wholetime duty system (median)	81	90	-10.0%
M2.4.3.3	Average turnout time for emergency incidents - on-call duty system (median)	288	300	-4.0%

**Objective 2.8: we will be prepared to respond to major incidents and support partner agencies.**

Table 19: KPIs that are requiring improvement

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement.	--	--	--

Table 20: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently near to achieving target.	--	--	--

Table 21: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.8.1.1	Availability of national resilience assets (percentage)	100%	100%	0.0%
M2.8.1.2	National resilience competencies in date	100%	100%	0.0%

## Glossary

Most terms and definitions can be found within the Home Office Fire Statistics Definitions document:

Some other terms are listed below:

**Operational risk information:** this information is focused on location specific risks posed to firefighters.

**Site specific risk information (SSRI):** this information is captured for locations that are particularly complex and pose greater levels of risk to our fire-fighters. Visits are made to these locations, hazards identified and plans made on how to respond if an incident occurs.

**Risk prioritised pump:** there are 56 priority fire engines in our highest risk areas that are essential to enabling us to effectively manage risk levels. There is an expectation that each of these appliances will be available to respond a minimum of 98% of the time.

**Standard pump:** there are 56 appliances located in less risky areas, but which are still key to ensuring that we are keeping our communities safe. These are all on-call or volunteer appliances and there is an expectation that each appliance will be available at least 85% of the time.

**Home fire safety visits:** these are visits that are carried out at people's homes by our home safety technicians and wholetime firefighters.

**Fire safety checks:** FSCs are delivered by our operational crews and provide a basic assessment of fire safety standards within businesses. Where potential issues are identified premises will be referred for a fire safety audit that is conducted by one of our professional fire safety officers.

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DEVON &  
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# Community Safety Committee

## 2022/23 quarter one performance report

This report provides an overview of performance against the priorities and objectives that fall within the remit of the Community Safety and Corporate Planning Committee.

Alice Murray, Strategic Analyst

Devon & Somerset  
Fire & Rescue Service



## Contents

Introduction .....	4
Performance overview: top level .....	4
Performance overview: priority one .....	5
Objective 1.1: we will work with partners to target our prevention activities where they have the greatest impact on the safety and wellbeing of our communities. ....	5
Exception report: number of dwelling fire fatalities .....	7
Objective 1.2: we will protect people in the built environment through a proportionate, risk-based approach to the regulation of fire safety legislation. ....	8
Objective 2.1: we will maintain accurate, timely and relevant risk information, enabling our operational crews to understand and be prepared to respond to the demand and risks present in their local communities. ....	9
Exception report: percentage of operational risk information in date - level 4 tactical plans .....	10
Objective 2.2: We will monitor changes in risk to ensure that our resources are most available in the locations necessary to mitigate them. ....	11
Objective 2.4: we will support the effective delivery of our frontline services by seeking improvements to our operational resourcing, mobilising and communications functions. ....	12
Objective 2.8: we will be prepared to respond to major incidents and support partner agencies. ....	13
Glossary.....	14

## Introduction

To make sure that we are delivering the best possible service to the communities of Devon and Somerset and its visitors, we need to regularly monitor our performance. This report looks at Key Performance Indicators (KPIs) from the Services' Performance Management Framework that require the scrutiny of the Community Safety Committee.

The KPIs will support us to deliver against two of our four strategic priorities:

**Priority 1** – “Our targeted prevention and protection activities will reduce the risks in our communities, improving health, safety and wellbeing and supporting the local economy.”

**Priority 2** – “Our operational resources will provide an effective emergency response to meet the local and national risks identified in our Community Risk Management Plan”

The performance status of our KPIs is based on the following criteria:

Succeeding	The KPI is achieving its target.
Near target	The KPI is less than 10% away from achieving its target.
Needs improvement	The KPI is at least 10% away from achieving its target.

When a KPI has a status of “needs improvement”, an exception report will be provided which will contain further analysis and identify whether an additional action needs to be taken to drive improvement. Updates on progress against actions will be provided in future reports until they are closed.

KPIs that are “near target” will be monitored by the lead manager to assess whether performance is likely to improve where appropriate implement tactical changes to influence the direction of travel. No further information will be provided within this report.

## Performance overview: top level

Table 1: performance status overview 2022/23 Q1

	Succeeding	Near target	Needs improvement
Priority 1	10	8	1
Priority 2	7	6	1

The two KPIs with a status of “needs improvement” are:

- KPI 1.1.2.2 – Dwelling fire fatalities (exception report, page 7)
- KPI 2.1.4.2 – Percentage of operational risk information in date - level 4 tactical plans (exception report, page 10)



## Performance overview: priority one

**Objective 1.1: we will work with partners to target our prevention activities where they have the greatest impact on the safety and wellbeing of our communities.**

Table 2: KPIs that require improvement

KPI Ref	Description	Current	Target	% Diff.
1.1.2.2	Number of dwelling fire fatalities in reporting quarter	1	0	NA
	Number of dwelling fire fatalities in last 12 months vs five-year average	5	6	-16.7%
	Dwelling fires fatality performance status	Needs improvement: fatality reported in quarter		

Table 3: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
1.1.3.2	Rate of dwelling fire hospitalisations per 100,000 population	4.30	4.26	1.0%
1.1.4.1	Number of home fire safety visits completed	4,357	4,500	-3.2%
1.1.10.2	Rate of other primary fire hospitalisations per 100,000 population (excludes dwellings and non-domestic premises)	62.5%	57.4%	8.8%
1.1.11.2	Rate of secondary fires per 100,000 population	92.11	91.65	0.5%

1

KPI Ref	Description	Current	Target	% Diff.
1.1.9.2	Number of other fire fatalities in reporting quarter	0	0	NA
	Number of other fire fatalities in last 12 months vs five-year average	2	1	100.0%
	Other fires fatality performance status	Near target: zero fatalities in quarter but 12-month average above target		

<sup>1</sup> The actual and target figures within this document are rounded to two decimal places for KPIs that are calculated as a rate. The percentage change is calculated using a higher degree of accuracy, this means that for smaller figures the percentage change may not be derived from the rounded figures presented in this report.

Table 4: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
1.1.1.2	Rate of dwelling fires attended per 100,000 population	52.48	53.37	-1.7%
1.1.6.1	Percentage of targeted home safety visits meeting two or more risk criteria	60.2%	60.0%	0.2%
1.1.8.2	Rate of other primary fires per 100,000 population (excludes dwellings and non-domestic premises)	45.21	46.85	-3.5%
1.1.12.2	Rate of deliberate fires per 100,000 population	78.21	81.22	-3.7%
1.1.13.2	Rate of road traffic collisions per 100,000 population	48.44	51.28	-5.5%
1.1.14.2	Rate of people killed or seriously injured in road traffic collisions per 100,000 population	26.53	26.84	-1.2%

## Exception report: number of dwelling fire fatalities

This KPI reports on the number of fire-related fatalities in dwelling fires.

If there is a fire-related fatality within the reporting quarter, the KPI will immediately be reported as “Needs Improvement” and require an exception report.

If there is not a fire-related fatality in the quarter, a performance status will be provided that incorporates the 12-month figure vs the five-year average.

### Analysis

The KPI is currently in exception due to one potentially fire-related fatality being recorded within the reporting quarter.

**Date and location: 09/04/2022, Plymouth**

**Victim: Female, 78 years old**

**Property type: Single occupancy dwelling**

**Emergency Response Standard: Met**

**Incident details:** On the 9<sup>th</sup> of April 2022 at 8:17pm, three appliances from Greenbank (two appliances) and Plymstock stations were mobilised to a “Fire Domestic” incident. Greenbank were first on scene, arriving at the incident 8 minutes 16 seconds after the call was received (meeting the Emergency Response Standard for dwelling fires).

On arrival, crews found that a very small fire that is believed to have started [accidentally] had burnt itself out and no firefighting action was required. Sadly, a [insert age]-year-old woman was found dead at the scene.

The post-mortem results are yet to be received and it is possible that the cause of death was unrelated to the fire. If this is the case, the record will be removed from the statistics in future reports.

### Action

No further action required until the post-mortem results are delivered.

If it is identified that the death was fire related, a Fatal Fire Review will be conducted to identify any learning points.

If it is identified that the death was unrelated to the fire, the record will be removed from these statistics.

**Objective 1.2: we will protect people in the built environment through a proportionate, risk-based approach to the regulation of fire safety legislation.**

Table 6: KPIs that are requiring improvement

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement	--	--	--

Table 7: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
1.2.1.2	Rate of non-domestic premises fires per 10,000 rateable premises (hereditaments)	61.74	60.80	1.5%
1.2.5.4	Rate of non-domestic false alarms per 10,000 rateable premises (hereditaments)	266.53	253.73	5.0%
1.2.6.1	Percentage of statutory consultations completed to required timescales	99.5%	100.0%	-0.5%

Table 8: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
1.2.3.2	Rate of non-domestic premises fire hospitalisations per 10,000 rateable premises (hereditaments)	1.12	1.27	-11.3%
1.2.4.1	Number of fire safety checks completed	826	750	10.1%
1.2.4.2	Number of fire safety audits completed (short and full)	126	120	5.0%

KPI Ref	Description	Current	Target	% Diff.
1.2.2.2	Number of non-domestic fire fatalities in reporting quarter	0	0	NA
	Number of non-domestic fire fatalities in last 12 months vs five-year average	0	1	-100.0%
	Non-domestic fires fatality performance status	Succeeding: both quarter and 12-month average on target		

**Objective 2.1: we will maintain accurate, timely and relevant risk information, enabling our operational crews to understand and be prepared to respond to the demand and risks present in their local communities.**

Table 10: KPIs that are requiring improvement

KPI Ref	Description	Current	Target	% Diff.
M2.1.4.2	Percentage of operational risk information in date - level 4 tactical plans	36.0%	98.0%	-62.0%

Table 11: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.1.1.3	Number of national exercises completed	0	1	-100.0%
M2.1.4.1	Percentage of operational risk information in date - level 3 SSRI	93.1%	94.0%	-0.9%

Table 12: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.1.1.1	Number of local exercises completed	16	9	77.8%
M2.1.1.2	Number of crossborder exercises completed	5	3	66.7%

## Exception report: percentage of operational risk information in date - level 4 tactical plans

This KPI reports on the percentage of premises with a level 4 tactical plan that are in date for revalidation.

A site or premises ranked as level 4 requires the completion of a Tactical Plan. This may be in addition to an SSRI, but an SSRI is not a pre-requisite for the production of a Tactical Plan. A Tactical Plan is a detailed document with information relevant to Level 2 and 3 Incident Commanders about the response to an incident at a specific site should it be likely to be complex or protracted.

### Analysis

The KPI is in exception as of 30<sup>th</sup> June 2022, with just 36.0% of level 4 sites in date for revalidation, 62.0% below the 98.0% target.

Performance throughout 2022/23 to date has been below target, this is largely due to ongoing capacity issues due to staff shortages of Risk Inspection Officers and Risk Information Technicians.

It is also acknowledged that previous processes were not efficient or resilient, leading to a significant backlog of work. This is now being addressed, with new processes being embedded that will support increased output and improved resilience.

It is anticipated that performance will gradually improve over coming months and that once the backlog is resolved a high level of performance can be maintained.

### Actions

- Following review, processes have been refined including:
  - the introduction of three specialist officers on 21-hour contracts to conduct development and review of tactical plans at complex sites e.g. large hospitals, prisons etc.
  - the introduction of reviews of tactical plans by Response Groups
  - utilisation of specialisms already within the organisation in the development of tactical plans e.g. Capability Leads.

**Objective 2.2: We will monitor changes in risk to ensure that our resources are most available in the locations necessary to mitigate them.**

Table 13: KPIs that are requiring improvement

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently near to achieving target.	--	--	--

Table 14: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.2.3.1	Percentage of dwelling fires attended within 10 minutes of call answer	68.5%	75.0%	-8.7%

Table 15: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.2.3.2	Percentage of road traffic collisions attended within 15 minutes of call answer	76.0%	75.0%	1.0%

**Objective 2.4: we will support the effective delivery of our frontline services by seeking improvements to our operational resourcing, mobilising and communications functions.**

Table 16: KPIs that are requiring improvement

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement.	--	--	--

Table 17: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.4.1.1	Risk prioritised pump availability (percentage)	96.7%	98.0%	-1.3%
M2.4.1.2	Standard pump availability (percentage)	80.8%	85.0%	-4.2%
M2.4.3.1	Percentage of calls handled within target time (call answer to resource mobilisation)	89.3%	90.0%	-0.7%

Table 18: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.4.3.2	Average turnout time for emergency incidents - wholetime duty system (median)	81	90	-10.0%
M2.4.3.3	Average turnout time for emergency incidents - on-call duty system (median)	288	300	-4.0%



**Objective 2.8: we will be prepared to respond to major incidents and support partner agencies.**

Table 19: KPIs that are requiring improvement

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement.	--	--	--

Table 20: KPIs that are near to achieving target

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently near to achieving target.	--	--	--

Table 21: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.8.1.1	Availability of national resilience assets (percentage)	100%	100%	0.0%
M2.8.1.2	National resilience competencies in date	100%	100%	0.0%

## Glossary

Most terms and definitions can be found within the Home Office Fire Statistics Definitions document: <https://www.gov.uk/government/publications/fire-statistics-guidance/fire-statistics-definitions>

Some other terms are listed below:

**Operational risk information:** this information is focused on location specific risks posed to firefighters.

**Site specific risk information (SSRI):** this information is captured for locations that are particularly complex and pose greater levels of risk to our fire-fighters. Visits are made to these locations, hazards identified and plans made on how to respond if an incident occurs.

**Risk prioritised pump:** there are 56 priority fire engines in our highest risk areas that are essential to enabling us to effectively manage risk levels. There is an expectation that each of these appliances will be available to respond a minimum of 98% of the time.

**Standard pump:** there are 56 appliances located in less risky areas, but which are still key to ensuring that we are keeping our communities safe. These are all on-call or volunteer appliances and there is an expectation that each appliance will be available at least 85% of the time.

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**Fire safety checks:** FSCs are delivered by our operational crews and provide a basic assessment of fire safety standards within businesses. Where potential issues are identified premises will be referred for a fire safety audit that is conducted by one of our professional fire safety officers.

<b>REPORT REFERENCE NO.</b>	<b>CSC/22/10</b>												
<b>MEETING</b>	<b>COMMUNITY SAFETY COMMITTEE</b>												
<b>DATE OF MEETING</b>	<b>11 NOVEMBER 2022</b>												
<b>SUBJECT OF REPORT</b>	<b>STRATEGIC PRIORITY 1 AND 2 PERFORMANCE MEASURES: QUARTER 2 - 2022/23</b>												
<b>LEAD OFFICER</b>	<b>ACFO PETE BOND, DIRECTOR OF SERVICE DELIVERY</b>												
<b>RECOMMENDATIONS</b>	<p><i>(a) That the Committee requests reports on areas of performance in relation to agreed strategic objectives; and</i></p> <p><i>(b) That, subject to (a) above, the report be noted and</i></p>												
<b>EXECUTIVE SUMMARY</b>	<p>Appendix 1 of this report presents the Quarter 2 2022/23 Key Performance Indicator (KPI) report for Strategic Priorities 1 and 2. Unless otherwise stated, the performance status of our KPIs is based on the following criteria:</p> <p><u>Succeeding</u>: the KPI is achieving its target.</p> <p><u>Near target</u>: the KPI is less than 10% away from achieving its target.</p> <p><u>Needs improvement</u>: the KPI is at least 10% away from achieving its target.</p> <p><b>Performance overview: top level</b></p> <p>Table 1: performance status overview 2021/22 Q1</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th></th> <th style="background-color: #90EE90;">Succeeding</th> <th style="background-color: #FFFF99;">Near target</th> <th style="background-color: #FFC0CB;">Needs improvement</th> </tr> </thead> <tbody> <tr> <td>Priority 1</td> <td style="text-align: center;">13</td> <td style="text-align: center;">7</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Priority 2</td> <td style="text-align: center;">7</td> <td style="text-align: center;">6</td> <td style="text-align: center;">1</td> </tr> </tbody> </table> <p>The three KPIs with a status of “needs improvement” are:</p> <p>KPI 1.1.2.2 – Number of dwelling fire fatalities</p> <p>KPI 1.10.1.2 – Rate of other primary fire hospitalisations per 100,000 population</p> <p>KPI 2.1.4.2 – Percentage of operational risk information in date - level 4 tactical plans</p>		Succeeding	Near target	Needs improvement	Priority 1	13	7	2	Priority 2	7	6	1
	Succeeding	Near target	Needs improvement										
Priority 1	13	7	2										
Priority 2	7	6	1										

	All have been subject to review, with an exception report included. Where required, action plans have been developed to bring performance back on track.
<b>RESOURCE IMPLICATIONS</b>	Existing budget and staffing is sufficient to deliver the required improvements
<b>EQUALITY RISKS AND BENEFITS ANALYSIS</b>	N/A
<b>APPENDICES</b>	Appendix A - Community Safety Committee 2022/23 quarter two performance report
<b>BACKGROUND PAPERS</b>	DSFRA/21/9 Strategic Policy Objectives 2021-22



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# Community Safety Committee

## 2022/23 quarter two performance report

This report provides an overview of performance against the priorities and objectives that fall within the remit of the Community Safety and Corporate Planning Committee.

Alice Murray, Strategic Analyst

Devon & Somerset  
Fire & Rescue Service



**Contents**

Introduction ..... 4

Performance overview: top level ..... 4

    Performance overview: priority one ..... 5

        Objective 1.1: we will work with partners to target our prevention activities where they have the greatest impact on the safety and wellbeing of our communities. .... 5

Exception report: number of dwelling fire fatalities ..... 7

Exception report: rate of hospitalisations in other primary fires per 100,000 population ..... 9

    Objective 1.2: we will protect people in the built environment through a proportionate, risk-based approach to the regulation of fire safety legislation. .... 11

    Objective 2.1: we will maintain accurate, timely and relevant risk information, enabling our operational crews to understand and be prepared to respond to the demand and risks present in their local communities. .... 12

Exception report: percentage of operational risk information in date - level 4 tactical plans ..... 13

    Objective 2.2: We will monitor changes in risk to ensure that our resources are most available in the locations necessary to mitigate them ..... 14

    Objective 2.4: we will support the effective delivery of our frontline services by seeking improvements to our operational resourcing, mobilising and communications functions. .... 15

    Objective 2.8: we will be prepared to respond to major incidents and support partner agencies. .... 16

Glossary ..... 17

## Introduction

To make sure that we are delivering the best possible service to the communities of Devon and Somerset and its visitors, we need to regularly monitor our performance. This report looks at Key Performance Indicators (KPIs) from the Services’ Performance Management Framework that require the scrutiny of the Community Safety Committee.

The KPIs will support us to deliver against two of our four strategic priorities:

**Priority 1** – “Our targeted prevention and protection activities will reduce the risks in our communities, improving health, safety and wellbeing and supporting the local economy.”

**Priority 2** – “Our operational resources will provide an effective emergency response to meet the local and national risks identified in our Community Risk Management Plan”

The performance status of our KPIs is based on the following criteria:

Succeeding	The KPI (key performance indicator) is achieving its target.
Near target	The KPI is less than 10% away from achieving its target.
Needs improvement	The KPI is at least 10% away from achieving its target.

When a KPI has a status of “needs improvement”, an exception report will be provided which will contain further analysis and identify whether an additional action needs to be taken to drive improvement. Updates on progress against actions will be provided in future reports until they are closed.

KPIs that are “near target” will be monitored by the lead manager to assess whether performance is likely to improve where appropriate implement tactical changes to influence the direction of travel. No further information will be provided within this report.

## Performance overview: top level

Table 1: performance status overview 2022/23 Q2

	Succeeding	Near target	Needs improvement
Priority 1	13	7	2
Priority 2	7	6	1

The three KPIs with a status of “needs improvement” are:

- KPI 1.1.2.2 – Number of dwelling fire fatalities (exception report, page 7)
- KPI 1.10.1.2 – Rate of other primary fire hospitalisations per 100,000 population (exception report, page 9)
- KPI 2.1.4.2 – Percentage of operational risk information in date - level 4 tactical plans (exception report, page 13)



## Performance overview: priority one

**Objective 1.1: we will work with partners to target our prevention activities where they have the greatest impact on the safety and wellbeing of our communities.**

Table 2: KPIs that require improvement

KPI Ref	Description	Current	Target	% Diff.
1.1.2.2	Number of dwelling fire fatalities in reporting quarter	2	0	NA
	Number of dwelling fire fatalities in last 12 months vs five-year average	6	6	0.0%
	Dwelling fires fatality performance status	Needs improvement: fatality reported in quarter		
1.1.10.2	Rate of other primary fire hospitalisations per 100,000 population (excludes dwellings and non-domestic premises)	0.64	0.57	12.4%

Table 3: KPIs that are near to achieving target<sup>1</sup>

KPI Ref	Description	Current	Target	% Diff.
1.1.2.2	Rate of dwelling fire fatalities per 100,000 population	0.37	0.34	8.8%
1.1.3.2	Rate of dwelling fire hospitalisations per 100,000 population	4.39	4.25	3.2%
1.1.6.1	Percentage of targeted home safety visits meeting two or more risk criteria	57%	60%	-3.5%
1.1.11.2	Rate of secondary fires per 100,000 population	98.42	91.43	7.6%

<sup>1</sup> The actual and target figures within this document are rounded to two decimal places for KPIs that are calculated as a rate. The percentage change is calculated using a higher degree of accuracy, this means that for smaller figures the percentage change may not be derived from the rounded figures presented in this report.

Table 4: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
1.1.9.2	Number of other fire fatalities in reporting quarter	0	0	NA
	Number of other fire fatalities in last 12 months vs five-year average	0	1	-100.0%
	Other fires fatality performance status	Succeeding: both quarter and 12-month average on target		
1.1.1.2	Rate of dwelling fires attended per 100,000 population	51.85	53.12	-2.4%
1.1.4.1	Number of home fire safety visits completed	9,678	9,000	7.5%
1.1.8.2	Rate of other primary fires per 100,000 population (excludes dwellings and non-domestic premises)	45.85	46.70	-1.8%
1.1.9.2	Rate of other primary fire fatalities per 100,000 population (excludes dwellings and non-domestic premises)	0.08	0.10	-21.3%
1.1.12.2	Rate of deliberate fires per 100,000 population	80.02	81.05	-1.3%
1.1.13.2	Rate of road traffic collisions per 100,000 population	47.15	50.33	-6.3%
1.1.14.2	Rate of people killed or seriously injured in road traffic collisions per 100,000 population	25.68	26.59	-3.4%

### Exception report: number of dwelling fire fatalities

This KPI reports on the number of fire-related fatalities in dwelling fires.

If there is a fire-related fatality within the reporting quarter, the KPI will immediately be reported as “Needs Improvement” and require an exception report.

If there is not a fire-related fatality in the quarter, a performance status will be provided that incorporates the 12-month figure vs the five-year average.

#### Analysis

The KPI is currently in exception due to two potentially fire-related fatalities being recorded within the reporting quarter.

Table 5: performance status - number of dwelling fire fatalities

KPI Ref	Description	Current	Target	% Diff.
1.1.2.2	Number of dwelling fire fatalities in reporting quarter	2	0	NA
	Number of dwelling fire fatalities in last 12 months vs five-year average	6	6	0.0%
	Dwelling fires fatality performance status	Needs improvement: fatality reported in quarter		

A summary providing some detail on each incident is provided below:

**Date and location:** 03/08/2022, Exmouth

**Victim:** Female, 54 years old

**Property type:** Converted Flat/Maisonette

**Emergency Response Standard:** Met

**Incident details:** On the 3<sup>rd</sup> of August 2022 at 12:26am, a call was received by fire Control who mobilised resources to a “Fire Domestic, Persons Reported” incident in Exmouth. Two fire engines from Exmouth and one fire engine from Middlemoor (Exeter) attended; Exmouth’s wholetime crew were first on scene, arriving at the incident 7 minutes 22 seconds after the call was received.

On arrival, crews found that a member of the public had rescued the victim from the property. Sadly, despite crews administering CPR to the victim, a 54-year-old female was pronounced dead at the scene.

The fire is believed to have started accidentally in the kitchen when cooking that had been left unattended ignited.

**Date and location:** 14/09/2022, Brompton Regis

**Victim:** Male, 54 years old

**Property type:** House – single occupancy

**Emergency Response Standard:** Not met<sup>2</sup>

**Incident details:** On the 14th of September 2022 at 6:10pm, the Fire Control received a call from the Police to attend an attempted suicide incident in Brompton Regis. A fire engine from Dulverton was mobilised in line with the pre-determined attendance (PDA) requirement.

Around a minute after Dulverton mobilised, information was received that there had been an explosion and property was now on fire. Additional fire engines from Wiveliscombe and Williton were mobilised to meet the updated PDA requirements.

Dulverton were first in attendance, arriving 30 minutes 48 seconds after the initial call was received by Fire Control. Under normal circumstances the journey would take less than 15 minutes, however, their response was delayed by a road closure, increasing their travel time by around 7 to 8 minutes.

On arrival, the fire was well developed, largely due to the presence of a significant amount of accelerant (petrol) which had been distributed around a bedroom in the property by the victim of the fire.

While it is believed that the victim intended to set fire to the property, it is thought that the ignition occurred accidentally when electrical item(s) ignited vapours from the petrol.

The severity of the fire meant that it was not possible to carry out a rescue.

#### **Action(s)**

- When a death is confirmed by the Coroner as being fire-related, a Fatal Fire Review is conducted by the Community Safety department and other stakeholders to identify any learning points.

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<sup>2</sup> As the initial call did not have a “domestic fire” incident type, this incident is not included within the Emergency Response Standard KPI.

### Exception report: rate of hospitalisations in other primary fires per 100,000 population

This KPI reports on the number of people that sustained an injury that required treatment in hospital, either as an inpatient or outpatient, as a result of a fire in a location other than a dwelling or non-domestic premises. The KPI is presented as a rate per 100,000 resident population. This allows us to monitor trends more effectively, as changes to population levels are incorporated into the calculation. It also means that we can benchmark our performance against the other fire and rescue services.

#### Analysis

This KPI is in exception due to being 12.4% above target (actual = 0.64 hospitalisations per 100,000 population, target = 0.57).

Table 6: performance status - rate of hospitalisations in other primary fires per 100,000 population

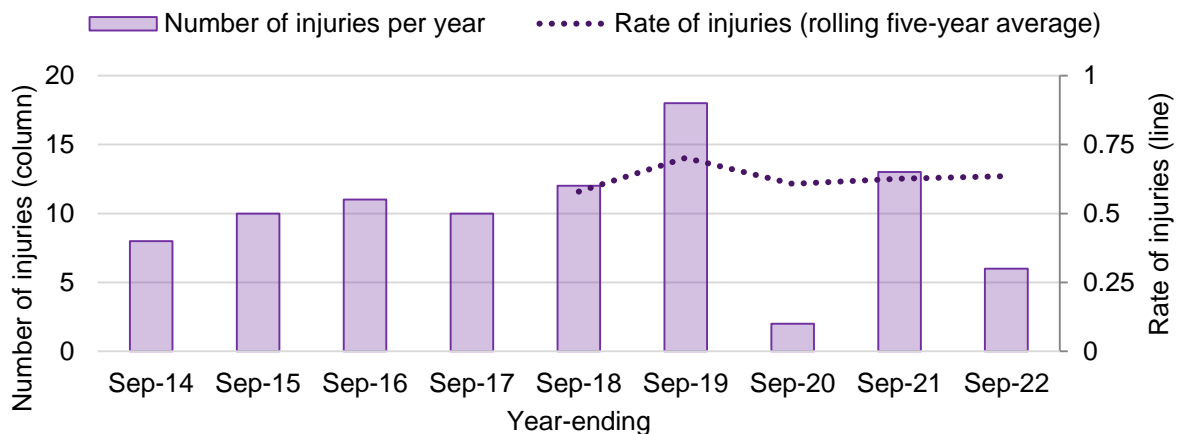
KPI Ref	Description	Current	Target	% Diff.
1.1.10.2	Rate of other primary fire hospitalisations per 100,000 population (excludes dwellings and non-domestic premises)	0.64	0.57	12.4%

Our aim is to reduce dwelling the average annual rate of other fire hospitalisations (based on a five-year rolling average) by 15% over the three-year period from April 2021 to March 2024.

In the past 12 months (October 2021 to September 2022), 6 people have required hospital treatment. The preceding five-year average is 11 hospitalisations per year. The rate is prone to significant fluctuation as the numbers in question are very low.

While the rolling five-year average is above target, it is largely due to relatively high numbers during the 12-month period from October 2018 to September 2019.

Figure 1: rate of hospitalisations as a result of other primary fires per 100,000 population based on rolling five-year average, with number of hospitalisations per year



### **Action**

It is recommended that the method for assessment of performance is reviewed.

Based on the evidence above and improved confidence in the stability of incident levels in the aftermath of the Covid pandemic, we are now in a position where we can set a reasonable expectation of where injury levels should be.

A more effective option is to monitor whether the rate of injuries is within expected ranges based on historic performance. Should performance exceed the upper limit, an exception report should be provided.

**Objective 1.2: we will protect people in the built environment through a proportionate, risk-based approach to the regulation of fire safety legislation.**

*Table 7: KPIs that are requiring improvement*

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement	--	--	--

*Table 8: KPIs that are near to achieving target*

KPI Ref	Description	Current	Target	% Diff.
1.2.1.2	Rate of non-domestic premises fires per 10,000 rateable premises (hereditaments)	61.80	60.10	2.8%
1.2.5.4	Rate of non-domestic false alarms per 10,000 rateable premises (hereditaments)	266.24	252.59	5.4%
1.2.6.1	Percentage of statutory consultations completed to required timescales	100%	100%	-0.5%

*Table 9: KPIs that are achieving target*

KPI Ref	Description	Current	Target	% Diff.
1.2.2.2	Number of non-domestic fire fatalities in reporting quarter	0	0	NA
	Number of non-domestic fire fatalities in last 12 months vs five-year average	0	1	-100.0%
	Non-domestic fires fatality performance status	Succeeding: both quarter and 12-month average on target		
1.2.2.2	Rate of non-domestic premises fire fatalities per 10,000 rateable premises (hereditaments)	0.11	0.13	-17.8%
1.2.3.2	Rate of non-domestic premises fire hospitalisations per 10,000 rateable premises (hereditaments)	1.06	1.24	-14.0%
1.2.4.1	Number of fire safety checks completed	1,958	1,500	30.5%
1.2.4.2	Number of fire safety audits completed (short and full)	414	240	72.5%

**Objective 2.1: we will maintain accurate, timely and relevant risk information, enabling our operational crews to understand and be prepared to respond to the demand and risks present in their local communities.**

*Table 10: KPIs that are requiring improvement*

KPI Ref	Description	Current	Target	% Diff.
M2.1.4.2	Percentage of operational risk information in date - level 4 tactical plans	51.9%	98.0%	-46.1%

*Table 7: KPIs that are near to achieving target*

KPI Ref	Description	Current	Target	% Diff.
M2.1.4.1	Percentage of operational risk information in date - level 3 SSRI	88.5%	94.0%	-5.5%

*Table 8: KPIs that are achieving target*

KPI Ref	Description	Current	Target	% Diff.
M2.1.1.1	Number of local exercises completed	86	36	138.9%
M2.1.1.2	Number of crossborder exercises completed	20	12	66.7%
M2.1.1.3	Number of national exercises completed	5	1	400.0%



## Exception report: percentage of operational risk information in date - level 4 tactical plans

This KPI reports on the percentage of premises with a level 4 tactical plan that are in date for revalidation.

A site or premises ranked as level 4 requires the completion of a Tactical Plan. This may be in addition to an SSRI, but an SSRI is not a pre-requisite for the production of a Tactical Plan. A Tactical Plan is a detailed document with information relevant to Level 2 and 3 Incident Commanders about the response to an incident at a specific site should it be likely to be complex or protracted.

### Analysis

The KPI is in exception as of 30<sup>th</sup> September 2022, with just 48.1% (13 of 27) of level 4 sites in date for revalidation, 49.9% below the 98.0% target.

Table 9: performance status - percentage of operational risk information in date - level 4 tactical plans

KPI Ref	Description	Current	Target	% Diff.
M2.1.4.2	Percentage of operational risk information in date - level 4 tactical plans	51.9%	98.0%	-46.1%

Performance throughout 2022/23 to date has been below target, this is largely due to ongoing capacity issues due to staff shortages of Risk Inspection Officers and Risk Information Technicians. While there has been a slight improvement compared to the quarter one position (36.0% in date), the percentage has not changed since August.

As mentioned in the quarter one report, it is acknowledged that previous processes were not efficient or resilient, leading to a significant backlog of work. This is now being addressed, with new processes being embedded that are supporting increased output and improved resilience. However, capacity is still limited and the review and development of a tactical plan can take 1-2 months for one person working full time.

It is anticipated that performance will continue to improve over coming months, five reviews are currently in progress and nearing completion. Once the backlog is resolved it is expected that an elevated level of performance can be maintained.

### Actions

- The issue of level four tactical plans that are overdue review has been added to the Corporate Risk Register.
- Consideration is being given to initiating business continuity arrangements within the Operational Risk team.
- Dedicated personnel to continue to work through the backlog, updating plans systematically.

**Objective 2.2: We will monitor changes in risk to ensure that our resources are most available in the locations necessary to mitigate them**

*Table 14: KPIs that are requiring improvement*

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement.	--	--	--

*Table 15: KPIs that are near to achieving target*

KPI Ref	Description	Current	Target	% Diff.
M2.2.3.1	Percentage of dwelling fires attended within 10 minutes of call answer	70.6%	75.0%	-4.4%
M2.2.3.2	Percentage of road traffic collisions attended within 15 minutes of call answer	72.8%	75.0%	-2.2%

*Table 16: KPIs that are achieving target*

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently achieving target.	--	--	--

**Objective 2.4: we will support the effective delivery of our frontline services by seeking improvements to our operational resourcing, mobilising and communications functions.**

*Table 17: KPIs that are requiring improvement*

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement.	--	--	--

*Table 18: KPIs that are near to achieving target*

KPI Ref	Description	Current	Target	% Diff.
M2.4.1.1	Risk prioritised pump availability (percentage)	92.2%	98.0%	-5.8%
M2.4.1.2	Standard pump availability (percentage)	75.3%	85.0%	-9.7%
M2.4.3.1	Percentage of calls handled within target time (call answer to resource mobilisation)	89.6%	90.0%	-0.4%

*Table 19: KPIs that are achieving target*

KPI Ref	Description	Current	Target	% Diff.
M2.4.3.2	Average turnout time for emergency incidents - wholetime duty system (median)	80	90	-11.1%
M2.4.3.3	Average turnout time for emergency incidents - on-call duty system (median)	291	300	-3.0%

**Objective 2.8: we will be prepared to respond to major incidents and support partner agencies.**

*Table 2010: KPIs that are requiring improvement*

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently requiring improvement.	--	--	--

*Table 21: KPIs that are near to achieving target*

KPI Ref	Description	Current	Target	% Diff.
--	No KPIs are currently near to achieving target.	--	--	--

*Table 22: KPIs that are achieving target*

KPI Ref	Description	Current	Target	% Diff.
M2.8.1.1	Availability of national resilience assets (percentage)	100%	100%	0.0%
M2.8.1.2	National resilience competencies in date	100%	100%	0.0%

## Glossary

Most terms and definitions can be found within the Home Office Fire Statistics Definitions document: <https://www.gov.uk/government/publications/fire-statistics-guidance/fire-statistics-definitions>

Some other terms are listed below:

**Operational risk information:** this information is focused on location specific risks posed to firefighters.

**Site specific risk information (SSRI):** this information is captured for locations that are particularly complex and pose greater levels of risk to our fire-fighters. Visits are made to these locations, hazards identified and plans made on how to respond if an incident occurs.

**Risk prioritised pump:** there are 56 priority fire engines in our highest risk areas that are essential to enabling us to effectively manage risk levels. There is an expectation that each of these appliances will be available to respond a minimum of 98% of the time.

**Standard pump:** there are 56 appliances located in less risky areas, but which are still key to ensuring that we are keeping our communities safe. These are all on-call or volunteer appliances and there is an expectation that each appliance will be available at least 85% of the time.

**Home fire safety visits:** these are visits that are carried out at people's homes by our home safety technicians and wholetime firefighters.

**Fire safety checks:** FSCs are delivered by our operational crews and provide a basic assessment of fire safety standards within businesses. Where potential issues are identified premises will be referred for a fire safety audit that is conducted by one of our professional fire safety officers.

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# Agenda Item 5

<b>REPORT REFERENCE NO.</b>	<b>CSC/22/11</b>
<b>MEETING</b>	<b>COMMUNITY SAFETY COMMITTEE</b>
<b>DATE OF MEETING</b>	<b>11 NOVEMBER 2022</b>
<b>SUBJECT OF REPORT</b>	<b>HOME FIRE SAFETY VISITS PERFORMANCE</b>
<b>LEAD OFFICER</b>	<b>ACFO PETE BOND, DIRECTOR OF SERVICE DELIVERY</b>
<b>RECOMMENDATIONS</b>	<i>That the report be noted.</i>
<b>EXECUTIVE SUMMARY</b>	This paper will look at the Service's Home Fire Safety Visit Program performance. How well do we deliver the Home Safety element of our Prevention activities? What has Her Majesties Inspectorate for Constabularies and Fire and Rescue Services said about this activity in Devon and Somerset. What are we currently delivering and what needs to improve if we are to maintain a good standard. What the Community Safety Committee can do to hold the Service to account.
<b>RESOURCE IMPLICATIONS</b>	Business as usual. No resource request
<b>EQUALITY RISKS AND BENEFITS ANALYSIS</b>	Complete
<b>APPENDICES</b>	None
<b>BACKGROUND PAPERS</b>	None

## **1. INTRODUCTION**

- 1.1. The previous paper on Home Fire Safety delivered to the Community Safety Committee in February 2022 (Minute CSC/22/xx refers) explained why the Service undertakes Prevention activity and how it delivers its home fire safety visit programme, targeting those most vulnerable to fire, in our communities to carry out a fire safety check and provide safety equipment if appropriate.
- 1.2. The Fatal Fires paper for the Community Safety Committee, November 2022 (elsewhere on the agenda for this meeting) explains the risk factors for fatal fires and how the Service can learn from previous fatal fires in order to improve our prevention activity. This paper will focus on the Service performance and delivery of the Home Fire Safety Visit programme.

## **2. HOME SAFETY VISIT PERFORMANCE**

- 2.1. The number of home fire safety visits delivered each year is only one of the factors that needs to be considered when judging performance. Clearly, we need to reach a large number of people within our communities if we are to reduce fires, injuries and fatalities across Devon and Somerset. We know we have over 60,000 over 85-year-olds within Devon and Somerset with age being one of the risk factors that increase the likelihood of having a fire.
- 2.2. The Service also considers how visits are targeted to ensure it is visiting the most vulnerable people within its limited resource. It would not be possible to visit every home within Devon and Somerset in a timely manner and therefore its essential we target our visits to those that we know from our research are more likely to have fires and more likely to be injured or killed.
- 2.3. It is crucial that the visits that are undertaken are of a suitable quality that will make a difference and reduce risk. The National Fire Chief Council (NFCC) have worked collaboratively with Fire and Rescue Services to set the benchmark through the Person Centred Framework. This, along with the Fire Standard for Prevention is what Her Majesty's Inspectorate for Constabulary and Fire and Rescue Services (HMICFRS) will use as a benchmark for future grading of fire and rescue services.
- 2.4. In the latest Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS – hereinafter known as the Inspectorate)) report the Service was graded as "good" for Prevention. However, if the Service is to remain as "good", or achieve "outstanding" there will need to be improvement in the way services are delivered, ensuring alignment to the NFCC Person Centred Framework and the Fire Standard for Prevention.
- 2.5. To achieve this, a gap analysis will be undertaken against the Fire Standard for Prevention and the NFCC Person Centred Framework to ensure that, as a Service, its services are in line with sector best practice.



- 2.6. In the latest report on Prevention, the Inspectorate identified two Areas for Improvement (AFI's).
- The Service should evaluate its prevention activity, so it understands what works; and
  - Safeguarding training should be provided to all staff.
- 2.7. The Inspection report recognised that the Community Safety Plan is linked to the risks identified in the IRMP (now the Community Risk Management Plan) stating *“The Service has recognised that accidental dwelling fires and an increasingly ageing population are some of the risks the service is facing”*.
- 2.8. The report also quoted *“The Service consistently targets its highest risk people for Home Safety Visits. Prevention activity is clearly prioritised using a risk-based approach towards people most at risk from fire and other emergencies”*.
- 2.9. The inspectorate also sampled Home Safety Visit records and stated *“They were completed to a good standard”*. It recognised the Service works with partner organisations and the communities, including those from ethnic backgrounds”. Which is a component of the fire standard to ensure equality of access to Services.
- 2.10. The report identified that Home Safety specialists receive the appropriate training with staff saying they have the right skills and confidence to undertake Home Safety Visits. However, the Service needs to do better at targeting our operational staff to deliver home safety visits, and improve safeguarding training.
- 2.11. The inspectorate said,
- “Most staff told us they have the right skills and confidence to make Home Safety Visits”. These checks cover an appropriate range of hazards that can put vulnerable people at greater risk from fire and other emergencies. Some Operational staff felt they should receive more Prevention training”*.
- 2.12. But recognised our specialist staff receive enhanced training and continuous professional development. As part of our gap analysis the service will address the training required for our operational staff to ensure they are confident in undertaking Home Safety Visits.
- 2.13. In the previous Inspectorate report, an area for improvement was identified that the Service should assure itself that home safety visits undertaken by staff were consistent. In the latest report it recognised that although the process has been put in place, it has been slow to quality assure its staff due to the Covid Pandemic.

2.14. However, the process is now fully operating, and quality assurance of our specialist staff is underway. This process will also be rolled out with our operational crews to identify any areas where further learning is required. This will enable the Service to identify areas for further training and continuous professional development. Reassuringly as previously mentioned it has been recognised that the standard of home safety visits in the service is good.

2.15. Reassuringly, the inspectorate also recognised that the service is good at collaborating in Prevention. *“The service works with a wide range of other organisations such as care providers, social services and other emergency services to prevent fires and other emergencies. It has over 500 partner agencies which are regularly reviewed. From the Home Safety Visit files we sampled, we found referrals were consistently made from these organisations”*.

*“We were pleased to see the service introduced a specialist safeguarding officer role, which is jointly funded by Devon and Cornwall Police. This is a positive move. It is intended to improve how the service handles complex safeguarding cases and makes it easier for both services to share information about vulnerable people. This in turn allows the service to identify the most at risk people in the community and provide the relevant support where necessary”*.

2.16. The Inspectorate stated that, following a tragic fire, the service provided good support to its communities. The Service provided bespoke interventions to Schools, including providing 26 home safety visits to families as well as providing home safety visits to the wider community.

### 3. **NUMBERS OF HOME FIRE SAFETY VISITS DELIVERED**

3.1. The table below compares the number of accidental dwelling fires and the number of Home Fire Safety Visits delivered for each year over the past ten years.

Year	12/13	13/14	14/15	15/16	16/17	17/18	18/19	19/20	20/21	21/22
<b>Fires</b>	1051	1058	980	968	1006	1060	926	933	866	864
<b>HFSV</b>	3278	3477	4651	9968	8774	10864	9827	16697	8525	14781

3.2. The target for 2022/23 is to deliver 18,000 Home Fire Safety Visits using a combination of operational crews and specialist staff.

3.3. Since 2018, the Service has fitted over 20,000 Smoke alarms and delivered other equipment that has helped prevent fires and save lives.

3.4. The Service currently expects to carry out a home fire safety visit within 28 days of a referral. However, for various reasons this is not always possible. Examples of where we don't meet the target include the client cancels the visit, the client is taken into care or into hospital. Re-prioritising visits can also lead to a cancellation such as an arson referral. However, over the past twelve months 55% of visits are carried out within the 28 days and 77% within 56 days. (Less than 2 months).

- 3.5. From April 2022 until the end of July 2022, the Service delivered 6049 Home Fire Safety Visits. The majority of these visits have been carried out using two delivery models. Our Home Safety Technicians delivered 3803 visits, these are more complex visits generally referred by partners, and rural area visits.
- 3.6. Wholetime operational crews delivered 2225 visits, targeting areas most likely to have fires using MOSAIC data from our analysts. The crews will door knock in these areas to generate a visit. The following table shows the number of visits per Watch.

Station	Watch	DHSV Completed - Home Office Criteria April - July 2022 (4 month period) TOTAL
01 Barnstaple	Blue	41
	Green	71
	Red	23
	White	37
01 Barnstaple Total		172
02 Ilfracombe	On Call	1
16 Woolacombe	On Call	1
17 Torquay	Blue	77
	Green	91
	Red	71
	White	53
17 Torquay Total		292
18 Paignton	Blue	80
	Green	40
	Red	106
	White	40
18 Paignton Total		291
22 Buckfastleigh	On Call	8
31 Totnes	On Call	1
28 Newton Abbot	Community Responders	28
32 Danes Castle	Blue	12
	Green	32
	Red	64
	White	46
32 Danes castle Total		153
33 Exmouth	Blue	50
	Green	49
	Red	38
	White	27

<b>Station</b>	<b>Watch</b>	<b>DHSV Completed - Home Office Criteria April - July 2022 (4 month period) TOTAL</b>
33 Exmouth Total		164
39 Cullompton	Community Responders	2
47 Plympton	On Call/ Comm Responders	9
48 Camels Head	Blue	27
	Green	29
	Red	34
	White	44
48 Camels Head Total		134
49 Crownhill	Blue	47
	Green	24
	Red	44
	White	71
49 Crownhill Total		214
50 Greenbank	Blue	47
	Green	43
	Red	18
	White	19
50 Greenbank Total		127
59 Middlemoor	Blue	55
	Green	22
	Red	1
	White	1
59 Middlemoor Total		78
61 Taunton	Blue	80
	Green	77
	Red	86
	White	74
61 Taunton Total		317
62 Bridgewater	Blue	41
	Green	58
	Red	41
	White	17
62 Bridgewater Total		157
73 Yeovil	Blue	39
	Green	31
	Red	24
	White	30

Station	Watch	DHSV Completed - Home Office Criteria April - July 2022 (4 month period) TOTAL
73 Yeovil Total		124
73 Yeovil HSV App		12
<b>Service Total</b>		<b>2246</b>

#### 4. **NUMBER OF RISK FACTORS**

- 4.1. The Service has identified that risk factors are significant in identifying if a person is more or less likely to have a fire or be injured or killed in a fire.
- 4.2. The Table at paragraph 4.4 below shows the risk factors identified for home fire safety visits undertaken since September 2018. Note, due to our current processes and ICT systems we are not always able to identify or record all potential risk factors. For example, a client may not disclose a risk factor, but a partner may have identified one. This is an area for improvement. However, we have seen an increase in the percentage of visits with two or more risk factors since we started recording.
- 4.3. In 2019/20, 47.21% of visits had two risk factors or more, rising to 58.3% to date this year. The Service aims to have 60% of visits with two or more risk factors and continue to refine our processes and data recording.
- 4.4. The higher the percentage of visits with two or more risk factors provides re-assurance that the Service is targeting the right people and using our resources efficiently.

	Sep 18 - Mar 19	2019/20	2020/21	2021/22	April - Jun 22	Total
<b>Smoking</b>	680	1399	942	1605	305	4931
<b>Alcohol</b>	64	170	143	233	55	665
<b>Drugs</b>	34	80	56	100	29	299
<b>Mental Health</b>	625	1466	976	1569	334	4970
<b>Poor Housekeeping (Hoarding)</b>	591	1127	688	1446	313	4165
<b>Disability</b>	1204	2397	1388	2130	378	7497
<b>Sensory Loss, such as hearing or visual</b>	1201	2966	1542	2837	613	9160
<b>Limited Mobility</b>	2017	4909	3290	5299	955	16470
<b>Living Alone</b>	2441	6199	3713	5641	1118	19113
<b>Over 65s</b>	3613	8395	5526	7912	1491	26939
<b>Overs 85s</b>	1280	2691	1683	2642	544	8840

## **5. CURRENT ISSUES**

- 5.1 The home safety team has been using dated technology in the form of a Home Safety App which is a tool built by our ICT team internally. The app is slow, has limited functionality and sits on a server that has crashed multiple times causing delays in delivery. This app is due to be replaced by MORI (Management of Risk Information). There is a balance to be struck on how much resource is used to keep the current app operating, verses resourcing MORI to get a new system delivered. Some of the issues with the current technology prohibit our ability to extract accurate data or book visits in the most efficient manner. We are currently using a business analyst working with our data teams to overcome some of these issues in the short term. However, the tools available to the Prevention team are currently the biggest risk in being able to deliver an efficient Prevention strategy.

## **6. CONCLUSION**

- 6.1. The delivery of home fire safety visits has been recognised as good by the inspectorate and the Service prevention team continue to refine processes and escalate risk to improve efficiency and effectiveness. We expect to deliver more than 18,000 quality home fire safety visits this year, and fit smoke alarms and other equipment where necessary to reduce risk in our communities.
- 6.2. The Service works consistently well with partners to identify the people who are most likely to have a fire, be injured or become a fatality.
- 6.3. The Service continues to analyse data to target our visits to those most at need and monitor performance to ensure we are delivering our services effectively. Staff are currently working on processes to further check eligibility criteria to refine how visits are targeted. This is assisted by a new online home fire safety tool where people can carry out their own home fire safety check. If the individual is identified as requiring further help it will refer them into the Service.
- 6.4. Although the team is working hard to deliver quality services, the current ICT tools are hindering delivery. The Service is investing in an internal ICT solution, MORI to overcome this problem, although for various reasons the project has seen delays. These legacy issues regarding our ICT system and data along with legacy processes are causing some issues.
- 6.5. The ability to improve ICT systems functionality, data quality and use data for analysis, including geo-spatial will be essential if we are to provide an efficient service to our communities. It has been identified by the inspectorate that we need to evaluate our work better to improve our services. This will require collaboration with ICT and our data analysts to provide the statistical data and evaluation required to improve.

- 6.6. Service Performance is good currently, but the prevention department along with our colleagues in ICT and the data teams will need to find solutions to the current challenges if it is to maintain this rating in line with the Fire Standard for Prevention. The Community Safety Committee can play an active role by holding the Service to account, ensuring we make progress in having the right tools to deliver our services efficiently, that we plan to align to the Fire Standard for Prevention and deliver against the Service Delivery Strategy aligned to the CRMP as well as delivering against our Key Performance Indicators (KPI's).

**ACFO PETE BOND**  
**Director of Service Delivery**

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# Agenda Item 6

<b>REPORT REFERENCE NO.</b>	<b>CSC/22/12</b>
<b>MEETING</b>	<b>COMMUNITY SAFETY COMMITTEE</b>
<b>DATE OF MEETING</b>	<b>11 NOVEMBER 2022</b>
<b>SUBJECT OF REPORT</b>	<b>FATAL FIRE DEATH REVIEWS</b>
<b>LEAD OFFICER</b>	<b>ACFO PETE BOND, DIRECTOR OF SERVICE DELIVERY</b>
<b>RECOMMENDATIONS</b>	<i>That the report be noted.</i>
<b>EXECUTIVE SUMMARY</b>	This paper explains how the Service reviews fatal fire deaths or significant fires in order to learn from previous incidents and adapt Prevention strategy to help reduce future fires, injuries and deaths.
<b>RESOURCE IMPLICATIONS</b>	Business as usual. No resource request
<b>EQUALITY RISKS AND BENEFITS ANALYSIS</b>	Complete
<b>APPENDICES</b>	None
<b>BACKGROUND PAPERS</b>	None

**1. INTRODUCTION**

- 1.1. Reviewing past incidents is one of the many steps in informing the Service’s future prevention strategies, to reduce the number of accidental fires and risks to those most vulnerable to fire.
- 1.2. The Service undertakes a review, following a fatal fire death or serious injury, for the purpose of learning, to see if more can be done to prevent fires that lead to injuries or deaths. A referral from any significant near miss will also enter this process. Other appropriate agencies are also invited to participate in these reviews, however, there is no statutory requirement for other agencies to attend.
- 1.3. The objective of the review panel is to understand if any learning can take place from a Prevention perspective either by the Service or other agencies to prevent future fires, injuries, and fatalities. Collaboration between agencies is crucial in reducing fatal fires and serious injuries as often an individual is known to one or more agencies.
- 1.4. A review will start with an overview from the fire investigator so that the panel are able to understand the contributing factors.

**2. FATAL FIRES -RISK FACTORS AND CAUSES**

- 2.1. The Service’s target is to reduce fatal fires within Devon and Somerset to zero. Sadly, the number of fatal fires within Devon and Somerset Fire and Rescue Service area varies from year to year but would normally be 10 or less.
- 2.2. The data in Table 1 below shows the number of fatal fires within Devon and Somerset for the past 10 years. Of the 77 fire deaths, 12 were started deliberately and of these, 10 of the deliberate fires were set by the person that perished in the fire.

Table 1

2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22
10	12	8	8	6	5	4	8	10	6

- 2.3. The Service has previously commissioned two investigation reports into fire deaths in the South-West region to understand the most likely causes and risk factors associated with accidental fire deaths. By using data from the region, it provides a larger data set which enables a more accurate statistical analysis.
- 2.4. The first report covered the period 2008-2013. The second report covered 2013 to 2017. Seven risk factors were identified from these two reports, with causes of fire changing within this time period. The Service is aware that it is unable to reduce fatal fires alone, but relies heavily on its partners who care for the most vulnerable in society. Through partnership working the Service is able to target its prevention activities at those with the highest risk factors.

2.5. From the reports commissioned, the Service has identified the following risk factors being present as a percentage of fatal fires. 72% of fatal fires had one or more risk factors present with just over half having two or more risk factors present. 28% had none of the risk factors identified.

Living alone	49%
Mobility issues	33%
Smoking	26%
Drugs (Medical or recreation)	15%
Alcohol	14%
Housekeeping/Hording	12%
Mental Health	10%

2.6. Gender and age is a contributing factor. Those in the 80+ age group are more likely to be a victim of fire. Between the ages of 40 and 70 three times more men are victims of fire than women. The two highest contributory factors in the 40-49 age group are living alone and alcohol. In the 60-69 age group the highest contributory factors living alone and mobility.

2.7. From the 2013-2017 report the causes of ignition for fatal fires were as follows: -

Smoking materials	29%
Matches/lighters	14%
Heating equipment	13%
Cooking	9%
Electrical	8%
Candles	6%
Other	11%
Unknown	10%

2.8. 31% of fatal fires between 2013-17 had no smoke detection. Therefore, smoke detection is important. However, it is not the only factor. 48% had smoke detection that raised the alarm but still resulted in a fatality. This is often due to the risk factors such as living alone, alcohol and mobility. This shows that we need to do more than just fit smoke alarms in homes if we are to reduce fire deaths. A person's behaviour and individual factors are also important. A person-centred approach in line with the National Fire Chiefs Council person centred framework is required to prevent fatalities and serious injuries.

### **3. RESULTS AND ACTIONS OF RECENT FATAL FIRE REVIEWS**

3.1. Regular fatal fire review meeting take place once per month to review any fatal fires or fires involving serious injuries. Near misses can also be referred for a review. The actions log is also reviewed at this meeting to ensure progress on any actions taken from previous learning and reviews. A recent Coroners court acknowledged how the Service reviews and learns from fatal fires.

3.2. Examples of recent actions following reviews include: -

- Carrying out specific campaigns to raise awareness of risk, for example emollient creams campaign in pharmacies. This has followed a trend in a number of fire fatalities where emollient creams have been a contributing factor.
- In certain circumstances where there is high risk, providing specific equipment e.g., an alternative single induction hob to replace a gas hob. This has followed a number of fatal fires where a gas hob was the cause of ignition.
- Reviewing Service strategy regarding re-visits to ensure that those at risk receive another home fire safety visit at a future appropriate date. This followed a fatal fire where the Service had carried out a Home Fire Safety Visit a number of years previously to the fatal fire but the individuals circumstances had changed due to age and mobility.
- Reviewing Service cancellation policy if unable to contact the client. This followed an incident where the service had received a partnership referral but we had been unable to contact the client. The previous policy had been two attempts to contact and then cancel the visit. We now follow this up with a door knock and contact the partner agency to see if they are able to assist in making contact.

3.3. All actions have a single named owner and a completion date and are reviewed each month to ensure progress is being made.

#### **4. RECENT TRENDS**

4.1. Recent fatal fire reviews have continued the trend of age and mobility being significant factors in fatal fires. A recent theme in fatal fires has been emollient creams which can be flammable and can impregnate clothing. This is a particular risk if the person is bed bound and a smoker, and in the proximity of naked flames such as gas hobs, open fires and gas heaters.

#### **5. CONCLUSION**

5.1. Fatal fire reviews are an important part of ongoing learning and improvement, to help reduce future fires, injuries, and deaths. The Service's fire investigators will be aligning to the ISO accreditation to ensure its fire investigation standards are professional. Accurate fire investigation is crucial if the Service is to identify the causes of fire and subsequently learn the lessons needed to prevent future fires. A person centred and targeted approach using lessons learnt from the reviews to guide our strategy, will assist us to reduce fires, injuries and ultimately fire deaths.

**ACFO PETE BOND**  
**Director of Service Delivery**

# Agenda Item 7

<b>REPORT REFERENCE NO.</b>	<b>CSC/22/13</b>
<b>MEETING</b>	<b>COMMUNITY SAFETY COMMITTEE</b>
<b>DATE OF MEETING</b>	<b>11 NOVEMBER 2022</b>
<b>SUBJECT OF REPORT</b>	<b>FIRE ENGINE AVAILABILITY</b>
<b>LEAD OFFICER</b>	<b>ACFO PETER BOND, DIRECTOR OF SERVICE DELIVERY</b>
<b>RECOMMENDATIONS</b>	<p>That the Committee:</p> <p>(a). Notes the contents of this paper as suitable evidence to support scrutiny of strategic objective 2a as agreed by the Authority namely:</p> <ul style="list-style-type: none"> <li>• Provide response resources at times and in locations relevant to identified risks of fires and other emergencies</li> </ul> <p>(b). Includes a follow up paper for 12 months' time on the Committee's forward agenda.</p>
<b>EXECUTIVE SUMMARY</b>	<p>Fire engine availability and the readiness of a competent and qualified crew of fire fighters is the single most important factor in the delivery of an emergency response for Devon and Somerset Fire &amp; Rescue Service ("the Service").</p> <p>The Service is the largest employer of On Call firefighters in the country and has a reliance on these staff to deliver 88% of the response capability to the communities of Devon and Somerset.</p> <p>On Call availability is completely reliant on the crewing requirements for each fire engine being met whenever the appliance is required. This is generally 24 hours a day apart from the 11 Risk Dependent Availability fire engines only required at night.</p> <p>A decline in general performance was identified in 2017 and, through the Integrated Risk Management Plan for 2018 to 2022, a number of initiatives started to mitigate against this risk. The main focus of this has been the introduction of the Pay for Availability duty system which provides an enhanced set of terms and conditions for On Call staff in order to improve recruitment and retention of firefighters.</p> <p>Performance analysis of the past 5 years from December 2016 to November 2021 indicates that the general decline in fire engine availability has been arrested. However, there are identified issues at certain locations that are impacting on the overall Service performance figures.</p> <p>By adopting Pay for Availability, stations are identifying distinct gaps in their cover profile and this is enabling targeted recruitment campaigns to fill those gaps and subsequently improve availability.</p>

<b>RESOURCE IMPLICATIONS</b>	As set out within this report.
<b>EQUALITY RISKS AND BENEFITS ANALYSIS (ERBA)</b>	Not undertaken.
<b>APPENDICES</b>	<p>A. All Pump Availability 5-Year Data with Seven-Month Update (01/12/16 – 30/06/22)</p> <p>B. Risk Priority Pump Availability 5-Year Data with Seven-Month Update (01/12/16 – 30/06/22)</p>
<b>LIST OF BACKGROUND PAPERS</b>	<p>Pay for Availability Information Booklet</p> <p>Community Safety Committee Fire Engine Availability Report, February 2022</p>

**1. INTRODUCTION**

1.1 The Community Safety Committee of the Devon & Somerset Fire & Rescue Authority is tasked with reviewing the following strategic priorities and objectives:

<b>Strategic Priority 1</b> Our targeted prevention and protection activities will reduce the risks in our communities, Improving Health, Safety and wellbeing, supporting the local economy.		<b>Strategic Priority 2</b> Our Operational resources will provide an effective emergency response to meet the local and national risks.	
1a	Deliver interventions and education events to reduce the risk of fires in the community	2a	Provide response resources at times and in locations relevant to identified risks of fires and other emergencies
1b	Develop and deliver initiatives to support children and young people in making safe lifestyle choices	2b	Ensure that we continue to meet our obligations under the Civil Contingencies Act and the National Resilience Model and continue to develop plans and capability to respond to major emergencies in line with changing threat and risk levels
1c	Target risk-based inspection processes and enforcement activities towards the highest risk and ensure that they are effective and properly resourced	2c	Explore and develop opportunities to work with other agencies where the Service can add value to community outcomes

1.2 This report on fire engine availability presents evidence to support scrutiny of objective 2a as noted above and provides an update on the performance measures presented within the Community Safety Committee Fire Engine Availability Report of February 2022

1.3 The availability of fire engines is probably the single most important requirement of any fire and rescue service in delivering against the expectations of the public and the relevant legislation.

1.4 In 2018, Devon & Somerset Fire & Rescue Service (the Service) published its Integrated Risk Management Plan (IRMP) that identified the key risks that could affect the communities of Devon and Somerset over the following four years.

1.5 One of these key risks was the availability of On Call fire engines which make up approximately 90% of the response capability maintained by the Service to deal with emergency incidents.

1.6 Following the publication of the IRMP, the Service introduced several projects under the Safer Together Programme to introduce measures to mitigate the risks identified. One of these projects was the introduction of a new duty system for On Call firefighters known as Pay for Availability, which has been designed to support the recruitment and retention of staff into On Call roles and subsequently help to improve overall fire engine availability.

## **2. BACKGROUND**

2.1. In 2017, the Service undertook analysis of its delivery with regards to the availability of fire engines and in particular those crewed by On Call fire fighters.

2.2. At the time, only 13 of the fleet of 121 fire engines were crewed 24 hours per day by wholetime fire fighters. This meant that 108 fire engines were completely reliant upon on call firefighters being available – approximately 90% of the total response capability. However, for the 12 months to the end of February 2017, there was an average 14% unavailability of on call appliances.

2.3. The issues causing this problem included:

- a reliance on people living and working within a five minute response time of the fire station;
- the Service's requirement for people to maintain a set number of hours availability each week;
- the Service's training design – particularly for new recruits;
- a decrease in the number of incidents;
- a reward mechanism that incentivises activity not availability; and
- the Service's requirement to provide a minimum crew of four on an appliance – preferably five.

2.4. In the same IRMP, the Service also raised the risk of over resourcing in comparison to the actual risk now being faced by the communities of Devon and Somerset.

2.5. Proposals approved by the Authority on 10th January 2020, following a public consultation in 2019, resulted in resources being rationalised to better reflect the risk and a subsequent change to the fleet.

2.6. This has resulted in a total of 112 fire engines in the Service of which 13 are crewed by wholetime fire fighters and 99 by On Call (approximately 88% of total response capability). In addition, 11 of the On Call fire engines are only required to be available at night between the hours of 6.00pm and 8.00am. These have been termed risk dependent availability fire engines.

2.7. Of the issues noted above there were concerns raised by existing On Call firefighters about the inflexibility of their contractual hours and the amount of money earned by individuals in comparison to the amount of commitment required by the Service.



- 2.8. In response to these concerns the Service established a project to consider new ways of working that could better support On Call fire fighters and lead to improved recruitment and retention rates which would subsequently improve fire engine availability.
- 2.9. This project produced the Pay for Availability duty system which provides a far more flexible commitment by firefighters to provide between 30 and 120 hours of availability each week and an increased pay model that rewards staff for the actual hours of availability rather than paying a retaining fee. Further information on Pay for Availability is contained in the information booklet which can be provided as background reading.
- 2.10. The implementation of Pay for Availability was subject to formal negotiations with the representative bodies of on call firefighters namely the Fire and Rescue Services Association (FRSA) and the Fire Brigades Union (FBU) in an effort to reach a collective agreement on the terms and conditions of the new duty system. Whilst a collective agreement was made with the FRSA on this matter, the FBU was not in a position to follow suit in 2020.
- 2.11. The Service therefore undertook to engage directly with staff at individual stations to offer the opportunity of transferring to the Pay for Availability system on a voluntary basis. The requirement being that 100% of staff on a station had to agree to the transfer.
- 2.12. The initial group of stations transferred on 1st October 2020 and, since 1st January 2021, there have been monthly transitions of stations resulting in 69 of 79 eligible stations (87%) now working the Pay for Availability system (as at 1st December 2021).

### **3. DATA ANALYSIS**

- 3.1. In order to provide a relevant view, the data within this report covers five complete years running from December 2016 to November 2021, plus the latest seven months from December 2021 to June 2022. All data for each fire engine is provided over this period and split into 12-month blocks at Appendix A.
- 3.2. Fire engines in the Service each have an individual call sign for identification. The call sign is made up of the station number, a prefix of KV, which is the Home Office identifier for the Service, and a suffix of P1 or P2 (spoken as papa one or papa two) which relates to the number of fire engines located at any station. For example, Barnstaple is station 01 and has two fire engines – call signs KV01P1 and KV01P2; Cheddar is station 76 and has one fire engine – call sign KV76P1. Availability data is tracked against each call sign to ensure consistency in analysis.
- 3.3. Availability performance is reported to the Executive Board monthly and to the Community Safety Committee quarterly.

- 3.4. These performance reports are split into 3 areas, namely:
- Standard pump availability;
  - Risk prioritised pump availability; and
  - Risk dependent availability.
- 3.5. Standard pump availability is the overall measure of all fire engines at all times. The aim is to achieve a minimum of 85% availability.
- 3.6. Risk prioritised availability is the measure of those fire engines that are recognised as having the most significant impact on reducing dwelling fire casualties across Devon and Somerset. These fire engines are listed in priority order at Appendix B. The aim is to achieve a minimum of 98% availability.
- 3.7. Risk dependent availability is a measure of the 11 fire engines that have been moved from 24 hour cover to night cover only as noted above. The aim is to achieve a minimum of 85% availability.
- 3.8. Availability is measured as the percentage of time over the required period that fire engines (pumps) can be mobilised to an emergency incident with a minimum crew of four firefighters including at least one Incident Command qualified firefighter and one emergency fire appliance qualified driver.
- 3.9. There are two main reasons for fire engines to be unavailable – lack of required crew or a defective appliance or risk critical piece of equipment. Defects are subject to a Service Level Agreement between Fleet and Service Delivery to have fire engines and equipment repaired within specific timeframes or a reserve appliance provided to maintain availability. By far the greatest impacts on availability are crewing levels and the readiness of incident commanders and drivers.
- 3.10. The following tables summarise the availability of each performance indicator identified above:

*Table 1: Standard Pump Availability – 5-year analysis with seven-month update*

	<b>Dec-16 to Nov-17</b>	<b>Dec-17 to Nov-18</b>	<b>Dec-18 to Nov-19</b>	<b>Dec-19 to Nov-20</b>	<b>Dec-20 to Nov-21</b>	<b>Dec-21 to Jun-22</b>
<b>First appliance availability</b>	95%	91%	91%	94%	91%	90%
<b>Second appliance availability</b>	71%	65%	65%	73%	76%	70%
<b>Third appliance availability</b>	54%	45%	69%	87%	79%	NA
<b>Overall appliance availability</b>	<b>87%</b>	<b>82%</b>	<b>83%</b>	<b>88%</b>	<b>87%</b>	<b>85%</b>

Table 2: Risk Prioritised Availability – 5-year analysis with seven-month update

	Dec-16 to Nov-17	Dec-17 to Nov-18	Dec-18 to Nov-19	Dec-19 to Nov-20	Dec-20 to Nov-21	Dec-21 to Jun-22
<b>Risk prioritised appliances</b>	98%	97%	97%	98%	96%	94%

Table 3: Risk Dependent Availability – 5-year analysis with seven-month update

Station name & Pump Call Sign	Dec-16 to Nov-17	Dec-17 to Nov-18	Dec-18 to Nov-19	Dec-19 to Nov-20		Dec-20 to Nov-21		Dec-21 to Jun-22	
	24-hour	24-hour	24-hour	Day	Night	Day	Night	Day	Night
Ilfracombe (KV02P2)	32%	16%	11%	13%		0%	7%	1%	5%
Okehampton (KV13P2)	85%	67%	66%	72%		69%	76%	41%	91%
Brixham (KV21P2)	72%	66%	52%	54%		50%	47%	1%	40%
Dartmouth (KV24P2)	36%	21%	51%	51%	32%	n/a	33%	1%	3%
Teignmouth (KV30P2)	97%	94%	81%	87%		77%		19%	84%
Honiton (KV40P2)	54%	49%	48%	64%		54%	92%	3%	93%
Sidmouth (KV43P2)	85%	83%	68%	80%		60%	75%	5%	73%
Tiverton (KV44P2)	50%	52%	51%	79%	93%	n/a	85%	2%	84%
Tavistock (KV57P2)	68%	83%	73%	76%		86%	52%	4%	53%
Williton (KV71P2)	57%	32%	15%	26%		52%	63%	0%	51%
Wells (KV83P2)	62%	60%	44%	38%		31%	48%	1%	12%

- 3.11. The summary data provided above, and detailed data contained in Appendices A and B of this report show that the original risk of declining On Call availability identified in the 2018-2022 IRMP has been arrested but there continues to be areas for improvement, particularly with regards to Risk Priority and Risk Dependent fire engines.

- 3.12. Table 1 overleaf indicates that overall pump availability has now recovered to the level of 5 years ago following a decline through 2017 to 2019. The much-improved figure for 2020 reflects the impact of the Covid 19 pandemic and the lockdown periods imposed by central government. This enabled many staff to declare availability at times they normally would not have.
- 3.13. During 2021, the phased roll out of Pay for Availability maintained this improved performance and it is anticipated this will continue, however, as stations have settled into utilising the new duty system there has been a drop in availability particularly of second appliances. It is anticipated that the full impact of the new duty system will take at least another 12 months to be fully realised.
- 3.14. Risk Priority fire engines were originally identified in 2017 using a facility known as the Fire Service Emergency Cover toolkit (FSEC). This used an algorithm to predict the effect of attendance times on a selected parameter, (in this case dwelling fire fatalities) to identify which fire engines would need to be available the majority of the time to have the greatest effect on minimising predicted fatalities.
- 3.15. The performance indicated at Table 2 overleaf shows that the Service remains slightly below target at 94% for the seven-month period from 1<sup>st</sup> December 2021 to 30<sup>th</sup> June 2022, 2% lower than the preceding 12-month period. Analysis of the individual fire engine data at Appendix B shows that 25 of the 56 pumps are not achieving the required 98% level. Of these, ten are below the 85% standard pump availability measure, an increase of seven compared to the preceding 12-month period. These appliances and the associated reasons for the decline in performance are noted in Table 4 below.
- 3.16. FSEC was originally produced by the Home Office for all Services to use but has subsequently been withdrawn and no further support is available to update this data. The Service has also implemented other changes through the Service Delivery Operating Model which means that a review of the definition and requirements of Risk Priority fire engines is required. This work has started with the Strategic Analysis Team.

Table 4: Risk Priority Pump Availability < 85%, 5 year data with seven month update (01/12/16 – 30/06/22)

Station	Pump	Call sign	Dec-16 Nov-17	Dec-17 Nov-18	Dec-18 Nov-19	Dec-19 Nov-20	Dec-20 Nov-21	Dec-21 Jun-21	Change	Reason
Chulmleigh	P1	KV06P1	85%	84%	81%	79%	60%	61%	1%	Shortage of staff including shortage of C&C* and driver (struggling to recruit)
Hatherleigh	P1	KV09P1	99%	94%	98%	98%	91%	68%	-23%	Shortage of staff including shortage of C&C (struggling to recruit)
North Tawton	P1	KV12P1	98%	94%	98%	98%	76%	73%	-3%	Shortage of staff including shortage of C&C. 2 individuals Long Term Sick
Dartmouth	P1	KV24P1	100%	98%	94%	97%	96%	84%	-12%	Shortage of staff including shortage of C&C and drivers seasonal nature of employment results in difficulties attracting new joiners
Totnes	P1	KV31P1	98%	94%	90%	86%	86%	82%	-4%	Shortage of staff including shortage of C&C (struggling to recruit)
Crediton	P1	KV38P1	100%	95%	97%	98%	75%	82%	7%	Shortage of staff (including Sickness) including shortage of C&C
Plymstock	P1	KV51P1	85%	87%	89%	93%	89%	81%	-8%	Overlapping of contracts
Ivybridge	P1	KV53P1	89%	95%	94%	92%	87%	80%	-7%	Shortage of staff due to 3 x long term sickness
Williton	P1	KV71P1	100%	98%	92%	96%	97%	83%	-14%	Struggle day time due to staff working at Hinkley Point C
Martock	P1	KV80P1	98%	96%	92%	97%	95%	75%	-20%	Shortage of staff due to ongoing sickness and shortage of C&C and Driving

\*C & C = Command & Control

- 3.17. Risk Dependent Availability is statistically an extremely volatile measure due to the low numbers (11) of fire engines being measured. The indicator is further complicated by the move from 24-hour cover to night cover only being adopted by the individual stations when they chose to move to Pay for Availability. This position was taken to ease the burden of change on staff and ensure that Pay for Availability reflected the Service Delivery Operating Model as soon as possible.
- 3.18. The key performance indicator in Table 3 is the night cover availability from December 2020 onwards, as this reflects the requirements of the Service Delivery Operating Model. During the latest seven-month period, two (Okehampton (91%), Honiton (93%)) out of the 11 appliances have met the 85% target. Ilfracombe (5%), Dartmouth (3%) and Wells (12%) are seeing particularly low levels of availability.

*Impact of Pay for Availability*

- 3.19. As indicated at paragraph 3.9 the main issue affecting fire engine availability is the crewing requirement for each appliance. Pay for Availability is designed to enable better support for staff in predicting their availability and to manage their work/life balance so that the Service can have greater reliance on those staff on a regular basis.
- 3.20. The outcome of this is that those stations that have adopted Pay for Availability have seen the volatility of their crewing numbers removed and most importantly the gaps in cover over 24 hour and or weekly time scales identified.
- 3.21. This now allows for specific workforce planning requirements to be developed for each fire station and targeted recruitment campaigns to attract people to join the Service. By focusing on these requirements crewing deficiencies will be filled and subsequently availability will improve.

*Actions to improve availability*

- 3.22. Recruitment to On Call stations continues to be a key requirement in improving fire engine availability. In the past this has taken a Service wide approach, however analysis by Group Commanders has identified key locations where focused recruitment campaigns are to be rolled out. This work is being facilitated by the Human Resources department and supported by Service Delivery.
- 3.23. Certain key skills are required to maintain availability including Incident Command and Emergency Fire Appliance Driver. Changes in legislation to the Road Traffic Act have increased the requirements for driver qualifications including instructor to student contact time. This has led to a backlog of driving courses for both new drivers and those that require requalification leading to fire engines not being available. Investment has been made to support further courses and increase the number of instructors to clear this backlog and maintain this skill in the future.

- 3.24 At present, availability is measured by the number of fire engines that have a minimum crew of 4. The Pay for Availability agreement allows stations to crew with an absolute minimum of 2 as long as there is a driver and a competent firefighter available. This was included as the Service was anticipating the introduction of software that will count the number of firefighters individually rather than as a single crew of 4. This implementation has been delayed so a manual intervention is being introduced through the Operational Resource Centre and Fire Control to enable these fire engines to become available.
- 3.25 Consideration is being given to reviewing the five minute response time to stations for On Call firefighters. It is apparent that an extension of this time for certain stations could increase the pool of people available to recruit without having a detrimental effect on the Emergency Response Standard for the area. This work is currently in development.

#### **4. CONCLUSION**

- 4.1. Fire engine availability and the readiness of a competent and qualified crew of fire fighters is the single most important factor in the delivery of an emergency response for the Service.
- 4.2. The Service is the largest employer of On Call firefighters in the country and has a reliance on these staff to deliver 88% of the response capability to the communities of Devon and Somerset
- 4.3. On Call availability is completely reliant on the crewing requirements for each fire engine being met whenever the appliance is required. This is generally 24 hours a day apart from the 11 Risk Dependent Availability fire engines only required at night.
- 4.4. A decline in general performance was identified in 2017 and through the Integrated Risk Management Plan for 2018 to 2022 a number of initiatives started to mitigate against this risk. The main focus of this has been the introduction of the Pay for Availability duty system which provides an enhanced set of terms and conditions for On Call staff in order to improve recruitment and retention of firefighters.
- 4.5. There has been a slight decline in overall performance during the seven-month period from December 2021 to June 2022 compared to the preceding 12-month period.
- 4.6. While availability of risk dependent appliances continues to be an issue, the increase in the number of risk prioritised appliances that are below the 98% target and in particular those that are below the 85% standard appliance target is a concern.
- 4.7. By adopting Pay for Availability stations are identifying distinct gaps in their cover profile and this is enabling targeted recruitment campaigns to fill those gaps and subsequently seek to improve overall availability.

4.8 Further work to improve availability through training and utilising all available firefighters is also being implemented.

**ACFO PETER BOND**  
**Director of Service Delivery**



**APPENDIX A TO REPORT CSC/22/13**

**ALL PUMP AVAILABILITY 5 YEAR DATA WITH SEVEN MONTH UPDATE (01/12/16 – 30/06/22)**

Station	Pump	Callsign	Dec-16 Nov-17	Dec-17 Nov-18	Dec-18 Nov-19	Dec-19 Nov-20	Dec-20 Nov-21	Dec-21 Jun-21	Risk Priority
Barnstaple	P1	KV01P1	100%	100%	100%	100%	100%	100%	Y
Barnstaple	P2	KV01P2	100%	100%	100%	100%	99%	100%	N
Ilfracombe	P1	KV02P1	99%	97%	97%	99%	99%	98%	N
Ilfracombe	P2	KV02P2	32%	16%	11%	13%	6%	6%	N
Appledore	P1	KV03P1	28%	27%	33%	71%	80%	93%	N
Bideford	P1	KV04P1	100%	100%	100%	100%	100%	100%	Y
Bideford	P2	KV04P2	87%	79%	86%	91%	94%	77%	N
Braunton	P1	KV05P1	93%	70%	63%	79%	95%	96%	N
Chulmleigh	P1	KV06P1	85%	84%	81%	79%	60%	61%	Y
Combe Martin	P1	KV07P1	76%	48%	62%	85%	72%	61%	N
Hartland	P1	KV08P1	97%	94%	97%	98%	97%	95%	N
Hatherleigh	P1	KV09P1	99%	94%	98%	98%	91%	68%	Y
Holsworthy	P1	KV10P1	99%	99%	98%	98%	98%	95%	Y
Lynton	P1	KV11P1	100%	96%	98%	100%	100%	100%	Y
Lynton	P2	KV11P2	40%	16%	29%	37%	N/A	N/A	N
North Tawton	P1	KV12P1	98%	94%	98%	98%	76%	73%	Y
Okehampton	P1	KV13P1	100%	100%	100%	100%	99%	99%	Y
Okehampton	P2	KV13P2	85%	67%	66%	72%	71%	91%	N
South Molton	P1	KV14P1	100%	100%	100%	100%	100%	100%	Y
Torrington	P1	KV15P1	99%	98%	99%	100%	99%	99%	Y
Woolacombe	P1	KV16P1	85%	55%	50%	43%	25%	56%	N
Torquay	P1	KV17P1	100%	100%	100%	100%	100%	100%	Y
Torquay	P2	KV17P2	96%	94%	99%	99%	99%	100%	N
Torquay	P3	KV17P3	10%	6%	76%	100%	100%	N/A	N
Paignton	P1	KV18P1	100%	100%	100%	100%	100%	100%	Y
Paignton	P2	KV18P2	94%	96%	96%	94%	88%	81%	N
Ashburton	P1	KV19P1	91%	82%	87%	96%	95%	95%	N
Bovey Tracey	P1	KV20P1	90%	97%	98%	99%	99%	98%	Y
Brixham	P1	KV21P1	100%	100%	100%	100%	98%	98%	N
Brixham	P2	KV21P2	72%	66%	52%	54%	49%	45%	N
Buckfastleigh	P1	KV22P1	94%	87%	92%	94%	81%	87%	N
Chagford	P1	KV23P1	100%	98%	100%	100%	100%	100%	Y
Dartmouth	P1	KV24P1	100%	98%	94%	97%	96%	84%	Y
Dartmouth	P2	KV24P2	36%	21%	51%	49%	33%	2%	N

Dawlish	P1	KV25P1	93%	87%	89%	97%	94%	81%	N
Kingsbridge	P1	KV26P1	89%	94%	88%	90%	84%	85%	N
Moretonhampstead	P1	KV27P1	94%	87%	64%	58%	53%	65%	N
Newton Abbot	P1	KV28P1	100%	100%	100%	100%	100%	100%	Y
Newton Abbot	P2	KV28P2	99%	99%	99%	99%	78%	67%	N
Salcombe	P1	KV29P1	83%	54%	52%	57%	81%	79%	N
Teignmouth	P1	KV30P1	100%	100%	100%	100%	100%	100%	Y
Teignmouth	P2	KV30P2	97%	94%	81%	87%	77%	55%	N
Totnes	P1	KV31P1	98%	94%	90%	86%	86%	82%	Y
Totnes	P2	KV31P2	17%	13%	14%	6%	N/A	N/A	N
Danes Castle	P1	KV32P1	100%	100%	100%	100%	100%	100%	Y
Danes Castle	P2	KV32P2	98%	93%	96%	88%	88%	73%	N
Exmouth	P1	KV33P1	100%	100%	100%	100%	100%	100%	Y
Exmouth	P2	KV33P2	99%	72%	79%	97%	99%	97%	N
Axminster	P1	KV34P1	98%	97%	99%	96%	92%	89%	Y
Bampton	P1	KV35P1	86%	57%	52%	76%	79%	75%	N
Budleigh Salterton	P1	KV36P1	86%	73%	73%	79%	N/A	N/A	N
Colyton	P1	KV37P1	93%	91%	92%	95%	98%	95%	N
Crediton	P1	KV38P1	100%	95%	97%	98%	75%	82%	Y
Crediton	P2	KV38P2	32%	7%	11%	40%	N/A	N/A	N
Cullompton	P1	KV39P1	98%	89%	90%	98%	97%	96%	Y
Honiton	P1	KV40P1	99%	97%	98%	99%	100%	100%	Y
Honiton	P2	KV40P2	54%	49%	48%	64%	82%	94%	N
Ottery St Mary	P1	KV41P1	97%	96%	94%	99%	97%	91%	Y
Seaton	P1	KV42P1	93%	82%	94%	92%	94%	96%	N
Sidmouth	P1	KV43P1	100%	100%	100%	100%	99%	99%	Y
Sidmouth	P2	KV43P2	85%	83%	68%	80%	71%	69%	N
Tiverton	P1	KV44P1	100%	98%	98%	100%	100%	100%	Y
Tiverton	P2	KV44P2	50%	52%	51%	80%	85%	84%	N
Clyst St George	P1	KV45P1	N/A	N/A	N/A	N/A	79%	73%	N
Topsham	P1	KV45P1T	91%	93%	98%	93%	77%	N/A	N
Topsham	P2	KV45P2	21%	25%	29%	24%	N/A	N/A	N
Witheridge	P1	KV46P1	100%	99%	99%	98%	97%	99%	N
Plympton	P1	KV47P1	88%	87%	91%	98%	93%	91%	Y
Camels Head	P1	KV48P1	100%	100%	100%	100%	100%	100%	Y
Crownhill	P1	KV49P1	100%	100%	100%	100%	100%	100%	Y
Crownhill	P2	KV49P2	65%	77%	74%	89%	85%	74%	N
Greenbank	P1	KV50P1	100%	100%	100%	100%	100%	100%	Y
Greenbank	P2	KV50P2	100%	100%	100%	100%	100%	100%	Y
Plymstock	P1	KV51P1	85%	87%	89%	93%	89%	81%	Y
Bere Alston	P1	KV52P1	94%	90%	93%	97%	98%	88%	N
Ivybridge	P1	KV53P1	89%	95%	94%	92%	87%	80%	Y
Kingston	L1	KV54L1	100%	61%	73%	78%	55%	30%	N

Modbury	P1	KV55P1	88%	87%	85%	73%	50%	47%	N
Princetown	L1	KV56L1	73%	51%	74%	75%	39%	74%	N
Tavistock	P1	KV57P1	100%	100%	100%	100%	100%	100%	Y
Tavistock	P2	KV57P2	68%	83%	73%	76%	61%	56%	N
Yelverton	P1	KV58P1	98%	97%	96%	97%	98%	94%	N
Middlemoor	P1	KV59P1	100%	100%	100%	100%	100%	100%	Y
Middlemoor	P2	KV59P2	N/A	N/A	N/A	37%	94%	92%	N
Taunton	P1	KV61P1	100%	100%	100%	100%	100%	100%	Y
Taunton	P2	KV61P2	100%	99%	99%	100%	99%	98%	N
Taunton	P5	KV61P5	76%	52%	62%	95%	100%	N/A	N
Bridgwater	P1	KV62P1	100%	100%	100%	100%	100%	100%	Y
Bridgwater	P2	KV62P2	98%	95%	98%	99%	96%	91%	N
Bridgwater	P3	KV62P3	48%	53%	61%	79%	81%	N/A	N
Burnham on Sea	P1	KV63P1	98%	98%	96%	97%	96%	94%	Y
Burnham on Sea	P2	KV63P2	49%	47%	42%	53%	50%	46%	N
Dulverton	P1	KV64P1	86%	81%	86%	96%	91%	87%	N
Glastonbury	P1	KV65P1	100%	100%	100%	100%	100%	100%	Y
Minehead	P1	KV66P1	100%	100%	100%	100%	100%	100%	Y
Minehead	P2	KV66P2	86%	81%	90%	93%	72%	72%	N
Nether Stowey	P1	KV67P1	92%	83%	82%	85%	79%	81%	N
Porlock	L1	KV68L1	94%	88%	86%	77%	69%	78%	N
Street	P1	KV69P1	100%	100%	100%	100%	100%	100%	Y
Wellington	P1	KV70P1	100%	100%	100%	100%	100%	100%	Y
Wellington	P2	KV70P2	84%	89%	78%	93%	89%	86%	N
Williton	P1	KV71P1	100%	98%	92%	96%	97%	83%	Y
Williton	P2	KV71P2	57%	32%	15%	26%	56%	52%	N
Wiveliscombe	P1	KV72P1	98%	91%	87%	85%	84%	80%	N
Yeovil	P1	KV73P1	100%	100%	100%	100%	100%	100%	Y
Yeovil	P2	KV73P2	100%	100%	99%	99%	99%	97%	N
Yeovil	P5	KV73P5	85%	70%	75%	73%	74%	N/A	N
Castle Cary	P1	KV74P1	99%	97%	94%	94%	91%	93%	Y
Chard	P1	KV75P1	100%	99%	99%	100%	100%	99%	Y
Chard	P2	KV75P2	75%	53%	60%	72%	55%	62%	N
Cheddar	P1	KV76P1	100%	98%	94%	96%	92%	91%	Y
Crewkerne	P1	KV77P1	99%	82%	81%	89%	90%	86%	Y
Frome	P1	KV78P1	100%	98%	99%	100%	99%	98%	Y
Frome	P2	KV78P2	73%	53%	57%	78%	58%	47%	N
Ilminster	P1	KV79P1	96%	93%	94%	99%	97%	87%	Y
Martock	P1	KV80P1	98%	96%	92%	97%	95%	75%	Y
Martock	P2	KV80P2	55%	44%	42%	41%	N/A	N/A	N
Shepton Mallet	P1	KV81P1	100%	100%	100%	99%	98%	91%	Y
Shepton Mallet	P2	KV81P2	67%	68%	77%	72%	46%	35%	N
Somerton	P1	KV82P1	99%	97%	98%	99%	92%	94%	Y

Wells	P1	KV83P1	100%	99%	98%	97%	93%	87%	Y
Wells	P2	KV83P2	62%	60%	44%	38%	44%	14%	N
Wincanton	P1	KV84P1	100%	99%	97%	99%	100%	98%	Y

**APPENDIX B TO REPORT CSC/22/13**

**RISK PRIORITY PUMP AVAILABILITY 5 YEAR DATA (01/12/16 – 30/06/22)**

Station	Pump	Callsign	Dec-16 Nov-17	Dec-17 Nov-18	Dec-18 Nov-19	Dec-19 Nov-20	Dec-20 Nov-21	Dec-21 Jun-21
Barnstaple	P1	KV01P1	100%	100%	100%	100%	100%	100%
Bideford	P1	KV04P1	100%	100%	100%	100%	100%	100%
Chulmleigh	P1	KV06P1	85%	84%	81%	79%	60%	61%
Hatherleigh	P1	KV09P1	99%	94%	98%	98%	91%	68%
Holsworthy	P1	KV10P1	99%	99%	98%	98%	98%	95%
Lynton	P1	KV11P1	100%	96%	98%	100%	100%	100%
North Tawton	P1	KV12P1	98%	94%	98%	98%	76%	73%
Okehampton	P1	KV13P1	100%	100%	100%	100%	99%	99%
South Molton	P1	KV14P1	100%	100%	100%	100%	100%	100%
Torrington	P1	KV15P1	99%	98%	99%	100%	99%	99%
Torquay	P1	KV17P1	100%	100%	100%	100%	100%	100%
Paignton	P1	KV18P1	100%	100%	100%	100%	100%	100%
Bovey Tracey	P1	KV20P1	90%	97%	98%	99%	99%	98%
Chagford	P1	KV23P1	100%	98%	100%	100%	100%	100%
Dartmouth	P1	KV24P1	100%	98%	94%	97%	96%	84%
Newton Abbot	P1	KV28P1	100%	100%	100%	100%	100%	100%
Teignmouth	P1	KV30P1	100%	100%	100%	100%	100%	100%
Totnes	P1	KV31P1	98%	94%	90%	86%	86%	82%
Danes Castle	P1	KV32P1	100%	100%	100%	100%	100%	100%
Exmouth	P1	KV33P1	100%	100%	100%	100%	100%	100%
Axminster	P1	KV34P1	98%	97%	99%	96%	92%	89%
Crediton	P1	KV38P1	100%	95%	97%	98%	75%	82%
Cullompton	P1	KV39P1	98%	89%	90%	98%	97%	96%
Honiton	P1	KV40P1	99%	97%	98%	99%	100%	100%
Ottery St Mary	P1	KV41P1	97%	96%	94%	99%	97%	91%
Sidmouth	P1	KV43P1	100%	100%	100%	100%	99%	99%
Tiverton	P1	KV44P1	100%	98%	98%	100%	100%	100%
Plympton	P1	KV47P1	88%	87%	91%	98%	93%	91%
Camels Head	P1	KV48P1	100%	100%	100%	100%	100%	100%
Crownhill	P1	KV49P1	100%	100%	100%	100%	100%	100%
Greenbank	P1	KV50P1	100%	100%	100%	100%	100%	100%
Greenbank	P2	KV50P2	100%	100%	100%	100%	100%	100%
Plymstock	P1	KV51P1	85%	87%	89%	93%	89%	81%
Ivybridge	P1	KV53P1	89%	95%	94%	92%	87%	80%
Tavistock	P1	KV57P1	100%	100%	100%	100%	100%	100%
Middlemoor	P1	KV59P1	100%	100%	100%	100%	100%	100%
Taunton	P1	KV61P1	100%	100%	100%	100%	100%	100%

Station	Pump	Callsign	Dec-16 Nov-17	Dec-17 Nov-18	Dec-18 Nov-19	Dec-19 Nov-20	Dec-20 Nov-21	Dec-21 Jun-21
Bridgwater	P1	KV62P1	100%	100%	100%	100%	100%	100%
Burnham on Sea	P1	KV63P1	98%	98%	96%	97%	96%	94%
Glastonbury	P1	KV65P1	100%	100%	100%	100%	100%	100%
Minehead	P1	KV66P1	100%	100%	100%	100%	100%	100%
Street	P1	KV69P1	100%	100%	100%	100%	100%	100%
Wellington	P1	KV70P1	100%	100%	100%	100%	100%	100%
Williton	P1	KV71P1	100%	98%	92%	96%	97%	83%
Yeovil	P1	KV73P1	100%	100%	100%	100%	100%	100%
Castle Cary	P1	KV74P1	99%	97%	94%	94%	91%	93%
Chard	P1	KV75P1	100%	99%	99%	100%	100%	99%
Cheddar	P1	KV76P1	100%	98%	94%	96%	92%	91%
Crewkerne	P1	KV77P1	99%	82%	81%	89%	90%	86%
Frome	P1	KV78P1	100%	98%	99%	100%	99%	98%
Ilminster	P1	KV79P1	96%	93%	94%	99%	97%	87%
Martock	P1	KV80P1	98%	96%	92%	97%	95%	75%
Shepton Mallet	P1	KV81P1	100%	100%	100%	99%	98%	91%
Somerton	P1	KV82P1	99%	97%	98%	99%	92%	94%
Wells	P1	KV83P1	100%	99%	98%	97%	93%	87%
Wincanton	P1	KV84P1	100%	99%	97%	99%	100%	98%

# Agenda Item 8

<b>REPORT REFERENCE NO.</b>	<b>CSC/22/14</b>
<b>MEETING</b>	<b>COMMUNITY SAFETY COMMITTEE</b>
<b>DATE OF MEETING</b>	<b>11 NOVEMBER 2022</b>
<b>SUBJECT OF REPORT</b>	<b>HIS MAJESTY'S INSPECTORATE OF CONSTABULARY &amp; FIRE &amp; RESCUE SERVICES (HMICFRS) AREAS FOR IMPROVEMENT ACTION PLAN UPDATE</b>
<b>LEAD OFFICER</b>	<b>Deputy Chief Fire Officer</b>
<b>RECOMMENDATIONS</b>	<i>That the Committee reviews progress in delivery of the action plan.</i>
<b>EXECUTIVE SUMMARY</b>	<p>On Wednesday 27th July 2022, HMICFRS published the DSFRS 2022 inspection report. The inspection report identified one Cause of Concern and 14 Areas for Improvement (AFIs). Of these AFIs, two have been linked to the Community Safety Committee.</p> <p>The paper appended to this report outlines the progress that has been made against the HMICFRS Areas for Improvement action plans during October 2022. The key highlights are that:</p> <ul style="list-style-type: none"> <li>• Delivery of the Areas for Improvement action plan is on track.</li> </ul>
<b>RESOURCE IMPLICATIONS</b>	Considered within the Action Plan where appropriate.
<b>EQUALITY RISKS AND BENEFITS ANALYSIS</b>	Considered within the Action Plan where appropriate.
<b>APPENDICES</b>	Appendix A: HMICFRS - Community Safety Committee Update
<b>BACKGROUND PAPERS</b>	None

**HMICFRS ACTION PLAN – COMMUNITY SAFETY COMMITTEE UPDATE**

**1. INTRODUCTION**

On Wednesday 27<sup>th</sup> July 2022 HMICFRS published the DSFRS 2022 inspection report. The inspection report identified one Cause of Concern and 14 Areas for Improvement (AFIs).

This report provides an update on the Areas For Improvement action plan that has been produced following the inspection, which concluded in October 2021.

**2. AREAS FOR IMPROVEMENT ACTION PLAN COMPLETION STATUS**

Table 2 lists the Areas For Improvement linked to the Community Safety Committee and their individual implementation status.

**Table 2:**

DSFRS Reference	Description	Target Completion Date	Status
HMI-1.2-202203	The service should evaluate its prevention activity so it understands what works.	31/01/2024	In Progress (On Track)
HMI-1.2-202204	Safeguarding training should be provided to all staff.	31/04/2024	Not Started (On Track)

Table 3 below outlines the completion status of all actions designed to address the Areas For Improvement linked to the Community Safety Committee.

Table 3: Summary of progress against the 10 individual actions					
Areas for Improvement (Community Safety Committee)					
Not started (on track)	Not started (off track)	In progress (on track)	In progress (off track)	Completed	Closed
6	0	4	0	0	0

\*Please note that 2 of the actions which have not yet started are the evidence and assurance required once all other actions have been completed.