

DEVON & SOMERSET FIRE & RESCUE AUTHORITY

M. Pearson CLERK TO THE AUTHORITY

To: The Chair and Members of the Community Safety Committee

(see below)

SERVICE HEADQUARTERS THE KNOWLE CLYST ST GEORGE EXETER DEVON EX3 0NW

Your ref : Our ref : CSC/MP/SS Website : www.dsfire.gov.uk Date : 23 January 2023 Please ask for : Sam Sharman Email : ssharman@dsfire.gov.uk Telephone : 01392 872200 Fax : 01392 872300 Direct Telephone : 01392 872393

<u>COMMUNITY SAFETY COMMITTEE</u> (Devon & Somerset Fire & Rescue Authority)

Tuesday, 31st January, 2023

A meeting of the Community Safety Committee will be held on the above date, <u>commencing at 2.00 pm in Committee Room A, Somerset House, Devon &</u> <u>Somerset Fire & Rescue Service Headquarters</u> to consider the following matters.

> M. Pearson Clerk to the Authority

AGENDA

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

- 1 Apologies
- 2 <u>Minutes</u> (Pages 1 8)

of the previous meeting held on 11 November 2022 (attached).

3 <u>Items Requiring Urgent Attention</u>

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

PART 1 - OPEN COMMITTEE

4 <u>Strategic Priority 1 and 2 Performance Measures: Quarter 3 2022-23</u> (Pages 9 - 28)

Report of the Director of Service Delivery (CSC/23/1) attached.

5 <u>Change to Key Performance Indicator for Risk Priority Pumps</u> (Pages 29 - 40)

Report of the Director of Service Delivery (CSC/23/2) attached.

- 6 <u>His Majesty's Inspectorate of Constabulary & Fire & Rescue Services</u> (HMICFRS) Areas for Improvement Action Plan Update (Pages 41 - 42) Report of the Deputy Chief Fire Officer (CSC/23/3) attached.
- 7 <u>National Resilience Exercising Requirements</u> (Pages 43 46) Report of the Director of Service Delivery (CSC/23/4) attached.
- 8 <u>Protection Enforcement</u> (Pages 47 56)

Report of the Director of Service Delivery (CSC/23/5) attached.

MEMBERS ARE REQUESTED TO SIGN THE ATTENDANCE REGISTER

Membership:-

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

NO	TES
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.

	NOTES (Continued)
4.	Part 2 Reports
	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.
5.	Substitute Members (Committee Meetings only)
	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.
6.	Other Attendance at Committees)
	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.

COMMUNITY SAFETY COMMITTEE

(Devon & Somerset Fire & Rescue Authority)

11 November 2022

Present:

Councillors Chesterton (Chair), Biederman (Vice-Chair), Coles (vice Brazil), Cook-Woodman (vice Radford), McGeough, Sully, and Randall-Johnson (vice Partridge)

Apologies:

Councillors Brazil, Partridge and Radford.

* CSC/22/1 Minutes

RESOLVED that the Minutes of the meeting held on 27 April 2022 be signed as a correct record.

CSC/22/2 Strategic Priority 1 and 2 Performance Measures:

a Quarter 4 of 2021-22 and Quarters 1 of 2022-23

The Committee received for information a report of the Director of Service Delivery (CSC/22/9) on performance by the Service in:

- Quarter 4 of the previous (2021-22) financial year; and
- Quarter 1 of the current financial year (2022-23)

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 4 performance (2021-22) against the KPIs was:

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

There were 2 Priority 1 KPIs needing improvement in this quarter which related to:

- KPI 1.1.2.1 the number of dwelling fire fatalities; and
- KPI 1.1.4.1the number of home fire safety visits completed, which varied from target by 17.1% (14781 completed visits against a the target of 18000). 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 quarter 1 of 2022-23, the report identified that performance was:

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

There were 2 KPIs in this quarter needing improvement which related to:

- KPI 1.1.2.1 the number of dwelling fire fatalities; and
- KPI 2.1.4.2. percentage of operational risk information in date at level 4.

It was noted that there were exception reports for all 4 of the KPIs which had underperformed as included within the report circulated. In debating the report, the following points were raised:

- that the fire fatalities in both quarters were due largely to the age and lifestyle choices made by the victims but the Service continued to target resources to individuals most in need via the Home Fire Safety visit programme;
- There was evidence to support the view that performance on fire fatalities was improving as this was based on a five year average and that the preventative work being undertaken was thus succeeding;
- despite being below target in quarter 4 of 2021-22, the number of home fire safety visit had improved as a result of efforts made to improve the productivity of the wholetime staff;
- that, in setting targets for prevention work, it was necessary to balance the quantity of visits undertaken with the quality of outcomes. In general terms, prevention activities were targeted at those groups identified as being most vulnerable;

• the underperformance in quarter 1 of 2022-23 on the percentage of operational risk information in date at level 4 was due largely to the outcome of the Covid-19 pandemic. Action had been taken to temporarily increase the number of inspectors in place following a number of retirements to assist in catching up with the visits.

The Committee commented that it would be helpful if:

- the reporting of the statistics could be consistent as there were differences in the statistics set out in the reports between quarter 4 of 2021-22 and quarter 1 of 2022-23 (such as on hospitalisation of casualties); and
- that a review of the Service's response times was undertaken to ensure they were fit for purpose. It was noted that current response times were based on the risk to the community as set out within the Authority's Community Risk Management Plan (CRMP). This risk information had been cascaded down in Local Risk Management Plans and the Deputy Chief Fire Officer undertook to present information on this to a future meeting of the Committee.

It was noted that there were separate, in depth reports elsewhere on the agenda for this meeting in respect of Home Fire Safety Visits performance and the Fatal Fire Deaths Review.

NB. Minutes CSC/22/2b,CSC/22/3, CSC/22/4 and CSC/22/6 also refer.

* b <u>Quarter 2 of 2022-23</u>

The Committee received for information a report of the Director of Service Delivery (CSC/22/10) on performance by the Service in Quarter 1 of the current financial year (2022-23) 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 4 performance (2021-22) against the KPIs was:

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

There were 3 KPIs with a status of "needs improvement" which were:

- KPI 1.1.2.2 number of dwelling fire fatalities;
- KPI 1.10.1.2. rate of other primary fire hospitalisations per100,000 of population; and
- KPI 2.1.4.2. percentage of operational risk information in date at level 4 tactical plans.

In terms of the areas needing improvement, the Director of Service Delivery advised that there had been two dwelling fire fatalities this quarter (KPI 1.1.2.2), both of which involved factors such as age and lifestyle choices. There had been a delay in the response to one of the fatalities due to information on a local road closure not being communicated amongst the watch but action had been taken to ensure this did not happen again. In this case, however, there was evidence to support the point that the delay did not impact on the scale of the fire nor could the fatality have been prevented.

It was noted that, despite the target for percentage of operational risk information in date at level 4 tactical plans needing improvement, there had been a significant improvement since quarter 1 of 2022-23.

In addition, there had been a significant improvement in the delivery of Fire Safety Audits and an increase in target due to the point that the new staff appointed had achieved their qualifications which meant that more detailed audits could be undertaken.

The Committee enquired as to whether there was a national database in place setting out the lessons learned from fatal fires. It was noted that the Service always picked out lessons learned from coroner's reports and that the National Fire Chiefs' Council was looking at the provision of a national database currently.

* CSC/22/3 Home Fire Safety Visits Performance

The Committee received for information a report of the Director of Service delivery (CSC/22/11) that set out details of the Service's Home Fire Safety Visits performance since the previous report to the Committee in February 2022 (Minute CSC/21/14) refers). The report set out the performance in 2022-23, the actions being taken to address the improvement in performance needed and comparisons against the number of accidental dwelling fires from 2012-13 to 2021-22.

It was noted that the target for home fire safety visits in 2022-23 was 18,000 using a combination of operational crews and specialist staff. In the period 1 April 2022 to 30 July 2022, the Service had delivered 6049 home fire safety visits of which 3803 had been delivered by Home Safety Technicians and 2225 by Wholetime operational crews. It was anticipated that the Service was on track to meet the target at the year end.

An independent of Home Fire Safety Visits had been undertaken by Her Majesty's Inspectorate of Fire & Rescue Services under prevention activities in 2021-22. There were two areas for improvement, namely:

- The Service needed to evaluate its prevention activity so it understood what worked; and
- Safeguarding training should be provided to all staff.

The Director of Service Delivery assured the Committee that this work was being addressed. The Committee enquired as to the position on data sharing with partners so that the vulnerable in the community could be targeted for home fire safety visits. The Director of Service Delivery replied that ther had been some success with data sharing but acknowledged that this was challenging. Reference was also made to a difference in performance between wholetime watches and specialist technicians and the question was raised as to whether there was some resistance to this work being undertaken. The Director of Service Delivery stated that the number of visits undertaken on wholetime stations may vary due to other areas of operational response whereas the technicians were a dedicated resource. The Committee also drew attention to the position on the Equality and Risks Benefit Analysis and requested that a link was included in future reports to this so it was accessible.

Attention was drawn to the position on the Home Fire Safety Visits (HFSV) App as set out in paragraph 5.1 of the report circulated given the high level of investment placed into Information Technology in recent years by the Authority and the point that this work was not being delivered. The Director of Service Delivery replied that there had been discussions at Executive Board level in respect of the performance of the HFSV App and a Corporate Risk had been raised. An external review had been commissioned upon the performance in respect of home fire safety visits together with consideration of the IT capacity issues, the results of which were due very shortly. The Committee requested a report be submitted to the next meeting of the Authority on 12 December 2022 setting out the issue in depth.

NB. Minute CSC/22/6 below also refers.

* CSC/22/4 Fatal Fire Deaths Review

The Committee received for information a report of the Director of Service delivery (CSC/22/12) that set out the process behind fatal fire reviews or significant fires in order to enable the Service to learn from previous incidents and to adapt to future needs.

It was noted that the Service's target was to reduce fatal fires within Devon & Somerset to zero. The report set out the number of fatal fires within Devon & Somerset since 2013-14 which was 12. This had decreased to 4 in 2018-19 but had since increased in 2021-22 to 6. The Service had 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. The first report covered the period 2008-2013 and the second covered 2013-17. Seven risk factors were identified from these two reports with causes of fire changing within this time period. The risk factors were as identified within paragraph 2.5 of report CSC/22/11. The Service was aware that it could not reduce fatal fire deaths without assistance from partners and it was through this avenue that it was able to target its prevention activities towards the most vulnerable in society.

* CSC/22/5 Fire Engine Availability

The Committee received for information a report of the Director of Service Delivery (CSC/22/13) setting out the Service's performance on fire engine availability covering the period December 2016 to November 2021, together with the latest seven months from December 2021 to June 2022.

The performance reports were split into 3 key areas, namely:

- Standard pump availability (112 appliances);
- Risk prioritised pump availability (56 appliances); and
- risk dependent availability (11 appliances).

The targets set were:

- standard pump availability a minimum of 85% availability;
- risk prioritised availability a minimum of 98% availability; and.
- risk dependent availability to achieve a minimum of 85% availability.

The performance for standard pump availability over the five years from December 2016 to November 2021 with update to June 2022 was:

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

The table above showed that overall pump availability had now recovered to the level of 5 years ago following a decline through 2017 to 2019. The much improved performance in 2020 reflected the impact of the Covid-19 pandemic and the lockdown periods which enabled many staff to declare availability at time they would not normally have been free.

The Director of Service Delivery advised the Committee that there was a huge programme of work ongoing to increase the recruitment and retention of staff in order to bolster appliance availability. He was confident that any decline in performance had been stabilised and that the work on prioritising recruitment and retention was starting to plug any gaps in availability. Performance had also been impacted in the past by the change in legislation surrounding driving qualifications but work had been instigated to ensure that the required training was available now. It was noted that a report would be submitted to a future meeting o the Committee addressing the Service's risk critical plans n accordance with the CRMP and expectations of HMICFRS.

RESOLVED

- (a) That the contents of the report be noted as suitable evidence supporting scrutiny of strategic objectives 2a s agreed by the Authority namely:
 - To provide response resources at times and in locations relevant to identified risks of fires and other emergencies;
- (b) That a follow up paper be submitted to the Committee within the next 12 months as part of the forward agenda.

NB. Minute CSC/22/8 below also refers.

CSC/22/6 <u>His Majesty's Inspectorate of Constabulary & Fire & Rescue Services</u> (HMICFRS) Areas For Improvement Action Plan Update

The Committee received for information a report of the Deputy Chief Fire officer (CSC/22/14) setting out the progress that had been made against the His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) Areas for Improvement as set out in the Action Plan appended to the report.

There were two actions directly related to the work of this Committee together with the progress made to date which were set out below, namely:

- HMI-1.-2-202203 the Service should evaluate its prevention activity so it understands what works – this was in progress; and
- HMI 1.2-202204 safeguarding training should be provided to all staff this had not been started as yet.

NB. Minute CSC/22/3 above also refers.

*DENOTES DELEGATED MATTER WITH POWER TO ACT

The Meeting started at 10.00 am and finished at 12.57 pm

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REPORT REFERENCE NO.	CSC/23/1			
MEETING	COMMUNITY SAFETY COMMITTEE			
DATE OF MEETING	31 JANUARY 2	2023		
SUBJECT OF REPORT	STRATEGIC P QUARTER 3 -	-	2 PERFORMAN	ICE MEASURES:
LEAD OFFICER	ACFO GERAL	D TAYLOR, DIRE	CTOR OF SER	
RECOMMENDATIONS		performance in relation to agreed strategic objectives;		
	(b) That, su	ıbject to (a) abov	e, the report b	e noted and
EXECUTIVE SUMMARY		his report presents dicator (KPI) repo		2022/23 Key Priorities 1 and 2.
	Unless otherwis	se stated, the perfollowing criteria:	_	
	Succeeding: the	e KPI is achieving	its target.	
	<u>Near target:</u> 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			
	Table 1: perform	mance status over	view 2021/22 C	21
		Succeeding	Near target	Needs improvement
	Priority 1	13	6	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			
	KPI 1.10.1.2 – Rate of other primary fire hospitalisations per 100,000 population			
	KPI 2.1.4.2 – Percentage of operational risk information in date - level 4 tactical plans			

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

APPENDIX A TO REPORT CSC/23/1





Community Safety Committee

2022/23 quarter three 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

DSFRS Community Safety Committee

2022/23 Quarter Three Performance Report



DSFRS Community Safety Committee

2022/23 Quarter Three Performance Report

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Exception report: number of dwelling fire fatalities7
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
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
Exception report: percentage of operational risk information in date - level 4 tactical plans
Objective 2.2: We will monitor changes in risk to ensure that our resources are most available in the locations necessary to mitigate them
Objective 2.4: we will support the effective delivery of our frontline services by seeking improvements to our operational resourcing, mobilising and communications functions.
Objective 2.8: we will be prepared to respond to major incidents and support partner agencies
Glossary



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 Q3

	Succeeding	Near target	Needs improvement
Priority 1	13	6	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	7	7	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)	0.62	0.56	11.3%

Table 3: KPIs that are near to achieving target¹

KPI Ref	Description	Current	Target	% Diff.
1.1.3.2	Rate of dwelling fire hospitalisations per 100,000 population	4.40	4.24	3.6%
1161	Percentage of targeted home safety visits meeting two or more risk criteria	59.2%	60.0%	-0.8%
1.1.11.2	Rate of secondary fires per 100,000 population	96.86	91.32	6.1%

¹ 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.



2022/23 Quarter Three Performance Report

KPI Ref	Description	Current	Target	% Diff.
	Number of other fire fatalities in reporting quarter	0	0	NA
1.1.9.2	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	51.35	52.84	-2.8%
1.1.4.1	Number of home fire safety visits completed	14,667	13,500	8.6%
1.1.8.2	Rate of other primary fires per 100,000 population (excludes dwellings and non-domestic premises)	45.74	46.60	-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	-20.7%
1.1.12.2	Rate of deliberate fires per 100,000 population	78.31	80.93	-3.2%
1.1.13.2	Rate of road traffic collisions per 100,000 population	46.47	49.29	-5.7%
1.1.14.2	Rate of people killed or seriously injured in road traffic collisions per 100,000 population	25.32	26.33	-3.9%

Table 4: KPIs that are achieving 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 in currently in exception due to two <u>potentially fire-related</u> fatalities being recorded within the reporting quarter.

Table 5: performance status - number of dwelling fire fatalities

KPI Ref	Description	Current	Target	% Diff.
	Number of dwelling fire fatalities in reporting quarter	2	0	NA
	Number of dwelling fire fatalities in last 12 months vs five- year average	7	7	0.0%
	Dwelling fires fatality performance status	Needs improvement: fatality reported in quarte		

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

Date and location: 27/11/2022, Chard

Victim: Male, 68 years old

Property type: House - single occupancy

Emergency Response Standard: Not met; outside 10-minute response zone.

On the morning of the fire, an on-call firefighter who was at their place of work was informed by a member of the public that the property was on fire, persons reported.

A 999 call was made to fire control, and the on-call firefighter made their way to the property. Once in attendance, it was ascertained that the property was well alight, with full roof collapse, and partial collapse of the first floor, into the ground floor of the property. Whilst waiting for the first fire appliance to arrive the individual tried to contain the fire using the properties garden hose.

A crew from Chard arrived on scene at 05:26, 16 minutes and 32 seconds after the initial call was received. On arrival, crews were faced with a fully developed fire. Defensive tactics were deployed using mains jets from outside the property.



It is believed that the fire started on the first floor of the property and then spread to the roof, causing the structural collapse. The extent of damage meant an exact cause remains undetermined.

Date and location: 29/11/2022, Ilminster

Victim: Male, 91 years old

Property type: House - single occupancy

Emergency Response Standard: Not met²

Incident details:

On the 29th of November at 16:38, a call was received from a member of the public as a domestic alarm was operating and the caller was unable to raise a response either at the property or on the telephone.

A crew from Ilminster were first on scene, 14 minutes 31 seconds after the initial call was received. On arrival, the property was found to be locked and forced entry was required. The occupier was found on the kitchen floor, having suffered extensive burns. Crews recovered the victim from the property and administered oxygen. Sadly, despite the efforts of fire service and ambulance personnel, the victim was pronounced dead on route to hospital.

Fire damage was isolated to the victim and some small areas of localised burning within the kitchen. It is believed that the victim's clothing ignited while he was cooking a meal.

Two working smoke alarms were present in the property.

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.

² 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 11.3% above target (actual = 0.62 hospitalisations per 100,000 population, target = 0.56).

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

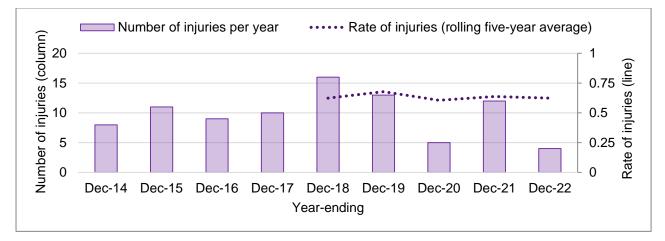
KPI Ref	Description	Current	Target	% Diff.
	Rate of other primary fire hospitalisations per 100,000 population (excludes dwellings and non-domestic premises)	0.62	0.56	11.3%

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 (January 2022 to December 2022), four 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 during 2018 and 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)	61.00	59.53	2.5%
1.2.5.4	Rate of non-domestic false alarms per 10,000 rateable premises (hereditaments)	268.42	251.37	6.8%
1.2.6.1	Percentage of statutory consultations completed to required timescales	99.5%	100.0%	-0.5%

Table 9: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.	
	Number of non-domestic fire fatalities in reporting quarter	0	0	NA	
1.2.2.2	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	-17.7%	
1.2.3.2	Rate of non-domestic premises fire hospitalisations per 10,000 rateable premises (hereditaments)	0.95	1.22	-22.1%	
1.2.4.1	Number of fire safety checks completed	2,860	2,250	27.1%	
1.2.4.2	Number of fire safety audits completed (short and full)	599	425	40.9%	



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	66.7%	98.0%	-31.3%

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	86.3%	94.0%	-7.7%

Table 8: KPIs that are achieving target

Note that the figures below could not be updated for 2022/23 Q3. Performance levels during 2022/23 Q2 exceeded the target for 2022/23 Q3, therefore the status for all KPIs remains as "succeeding".

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 31st December 2022, with just 66.7% (18 of 27) of level 4 sites in date for revalidation, 31.3% below the 98.0% target.

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

KPI Ref	Description	Current	Target	% Diff.
M2.1.4.2	Percentage of operational risk information in date - level 4 tactical plans	66.7%	98.0%	-31.3%

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. There has been an improvement compared to the quarter two position (48.1% in date), indicating a positive direction of travel.

As mentioned in previous reports, 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. Capacity is remains 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. Once the backlog is resolved it is expected that an elevated level of performance can be maintained.

Actions

• 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.
IVIZ.Z.3.1	Percentage of dwelling fires attended within 10 minutes of call answer	68.3%	75.0%	-6.7%
	Percentage of road traffic collisions attended within 15 minutes of call answer	71.6%	75.0%	-3.4%

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)	92.5%	98.0%	-5.5%
M2.4.1.2	Standard pump availability (percentage)	75.9%	85.0%	-9.1%
	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.
	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)	297	300	-1.0%



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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REPORT REFERENCE NO.	CSC/23/2			
MEETING	COMMUNITY SAFETY COMMITTEE			
DATE OF MEETING	31 JANUARY 2023			
SUBJECT OF REPORT	CHANGE TO KEY PERFORMANCE INDICATOR FOR RISK PRIORITY PUMPS			
LEAD OFFICER	ACFO PETE BOND - DIRECTOR OF SERVICE IMPROVEMEN			
RECOMMENDATIONS	That the Committee notes the contents of this paper for future performance reports.			
EXECUTIVE SUMMARY	The Service currently operates 56 risk priority pumps from 55 locations. The designation of risk priority was made using out of date modelling and prior to the implementation of the Service Delivery Operating Model and the new Community Risk Management Plan for 2022-2027.			
	Up to date risk modelling software has been used to review the number and location of risk priority pumps across Devon and Somerset based on the new operating model, Home Office business continuity expectations and geographical area covered.			
	This has resulted in the Executive Board approving a revised model of 34 Risk Priority Pumps as the Key Performance Indicator.			
RESOURCE	Reduced reliance on bank staff to support risk priority pumps.			
IMPLICATIONS	Ability to focus recruitment on risk priority stations.			
EQUALITY RISKS AND BENEFITS ANALYSIS (ERBA)	Not applicable			
APPENDICES	A. Current list of 56 Risk Priority Pumps			
LIST OF BACKGROUND PAPERS	None			

1. INTRODUCTION

- 1.1. The Service currently operates 112 front line appliances from 83 stations located across Devon and Somerset (not including Lundy Island).
- 1.2. In order to support the outcomes of the Integrated Risk Management Plan 2018-2022 the Service has maintained the availability of these fire engines on a risk priority basis such that 56 appliances based at 55 stations are designated as Risk Priority Pumps.
- 1.3. This designation has been in place for a number of years and the risk profiling to support it was based on the previous Home Office toolkit known as Fire Service Emergency Cover (FSEC).
- 1.4. Following the implementation of the Service Delivery Operating Model (SDOM) and the new Community Risk Management Plan (CRMP) for 2022 2027 the number and location of required Risk Priority Pumps has been reviewed. The results of this review and a subsequent recommendation have been approved by the Executive Board and this is now presented to the Community Safety Committee for information.

2. <u>BACKGROUND</u>

- 2.1. Devon & Somerset Fire & Rescue Service (the Service) has an objective to match resources to risk in relation to providing incident response across Devon and Somerset.
- 2.2. This objective was at the heart of the Service Delivery Operating Model approved by the Devon & Somerset Fire & Rescue Authority (the Authority) on 10 January 2020 (Minute DSFRA/32 refers) and culminated in a reduction in number of fire stations and fire engines required by the Service.
- 2.3. The current profile of fire engines in operation is as follows:

Cover Profile	P1 Fire Engine	P2 Fire Engine
Wholetime 24/7	12	1
On Call 24/7	71	17
On Call Night Only		11
TOTAL	83	29

- 2.4. Prior to the implementation of SDOM, the Service recognised that certain locations across both counties presented a higher risk than others. As such these locations required an incident response that was prioritised.
- 2.5. The assessment of this risk priority was carried out using the FSEC toolkit that was based on the likelihood of a dwelling fire occurring using historical and socio-economic data as the primary predictors.
- 2.6. The result of this work provided for 56 fire engines located at 55 stations to be designated as risk priority. A full list of these can be found at Appendix A.

- 2.7. In order to maintain the priority of these fire engines the Service also set a target of 98% availability for Risk Priority Pumps which is reported regularly to the Executive Board and the Authority's Community Safety Committee.
- 2.8. The implementation of SDOM included the introduction of a new On Call duty system for the Service known as Pay for Availability (P4A). This has been rolled out over an 18-month period and the majority of On Call Firefighters now work this duty system.
- 2.9. In April 2022, the Authority approved a new CRMP with a lifespan of 5 years until 2027.
- 2.10. It was anticipated that these changes impacted on the risk profile of the Service and therefore, a full review of the Risk Priority Pumps and the modelling used to determine risk was commissioned in May 2022.
- 2.11. During this period of analysis, the Service also undertook a business continuity planning process in regard to potential industrial action which would see a reduced number of fire engines being available.
- 2.12. The Home Office through the National Fire Chiefs Council's (NFCC) National Resilience requested that all Fire and Rescue Services model their business continuity to an absolute minimum of 25% of their fire engine resource.
- 2.13. On this basis, the Executive Board requested that the review and modelling of risk priority pumps be undertaken to reflect a business continuity baseline of 25% capability whilst being cognisant of risk mitigation and the geographical spread of cover.

3. RISK PRIORITY MODELLING

- 3.1. A range of operating models have been analysed using the CadCorp risk modelling tool. These include options based on our current operating model, our current list of risk critical appliances, a refreshed community risk profile and the locations at which Medium Rescue Pumps (MRPs) will be deployed in future.
- 3.2. The analysis was carried out using the Cadcorp workload modeller software to analyse five years of the Service's incidents (from Jan 2017 to Dec 2021) including all appliance attendances. This equates to 116,248 appliance callouts to 83,084 incidents.
- 3.3. Road speeds are calculated using the DSFRS Road network as per the national Ordnance Survey Highways data.
- 3.4. There are several possible limiting factors to the analysis:
- 3.5. The analysis does not consider call handling time so to calculate the performance of the emergency response standards the target arrival times have been reduced by the target call handling times, 90 seconds for dwelling fires (and non-domestic incidents) and 120 seconds for RTCs.

- 3.6. Performance figures for the emergency response standards are likely to be overstated as Cadcorp models the most likely road speed and therefore exceptional external factors (such as traffic or navigation issues) which could affect the travel time of an appliance on a particular callout are not taken into account.
- 3.7. The modelling evaluates attendances at incidents only and does not account for appliances that are mobilised to an incident but turned back before arrival.
- 3.8. The model is only as accurate as our travel time calculations and due to the size and complexity of the road network within Devon & Somerset it is almost impossible to assure the whole network is completely accurate.
- 3.9. The analysis is modelled on previous incident data which not necessarily a true reflection of the risk in the communities served by DSFRS. This is mitigated by using a five-year dataset and increasing the number of incidents in the sample.
- 3.10. It is unlikely we would ever operate with as few pumps on the run as are modelled in some of the scenarios in this report any sustained period, so performance is always likely to be in between the SDOM models and the models with restricted numbers of pumps.
- 3.11. Over the border appliances and incidents are excluded from the modelling. This may affect the demand and performance for some stations near the service boundaries.
- 3.12. The risk modelling methodology used the following parameters:
 - a. The Service currently operates a fleet of 112 front line pumps. All of these are available at night and 101 available in the day. This reflects the diurnal risk across Devon and Somerset which is higher for dwelling fires overnight.
 - b. On this basis to ensure highest risk is considered the Home Office requirement to model business continuity at 25% of pump capability means that the 112 overnight number of pumps has been used resulting 29 pumps being the 25% capability.
 - c. Whilst considering the business continuity plans for the Service consideration has also been made of the Incident Response Plans which determine the number and type of resources needed to deal with different incident types. As the number of fire engines available reduces then the ability to mobilise the ideal number of resources reduces and Fire Control will invoke business continuity rules. These rules provide some support when considering the geographical spread of pumps.
 - d. The baseline for initiating this work uses the highest risk areas in Devon and Somerset by way of actual incidents based on historical data. On this basis there are 17 pumps in the service which in normal operating conditions would make just over half of all attendances by pumping appliances within Devon and Somerset.

- e. Locations were added to this scenario to build up the other models based on geography, risk and where the service was predicted to be failing to meet its response targets most often these were then tested, compared and refined through modelling to identify the most effective way to provide some cover to the risk within Devon and Somerset with very limited numbers of resources.
- f. The recommended approach is to group stations into bands to help prioritise which locations should be maintained as a priority.
- g. The stations are grouped into four bands, with the addition of each subsequent band building up a more complete set of resources. These bands do not include every station with Devon & Somerset and there are some locations outside the 4th band these could be considered lower priority. Note: Some stations are paired below (matching symbols) these pairs could be interchanged if required.

4. <u>MODELLING OUTCOMES</u>

Highest priority

- 4.1. These stations are the 17 busiest pumps within our normal operating conditions.
 - i. Barnstaple, Exmouth, Danes Castle, Middlemoor, Camels Head Crownhill, Greenbank (both pumps), Taunton, Bridgwater, Yeovil, Newton Abbot, Frome, Burnham on Sea, Bideford
 - ii. Important Note: Given the low numbers of appliances in these models the second appliance at Greenbank could be located at Plympton to improve cover along the A38. In all the models below this it is assumed that this is the case.

29 pump model

- 4.2. As per the model above but with the addition of pumps at:
 - i. Chard, Honiton, Okehampton, Tavistock, Kingsbridge+, South Molton*, Teignmouth, Tiverton, Minehead, Street^, Shepton Mallet, Wellington.

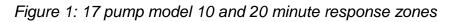
34 pump model

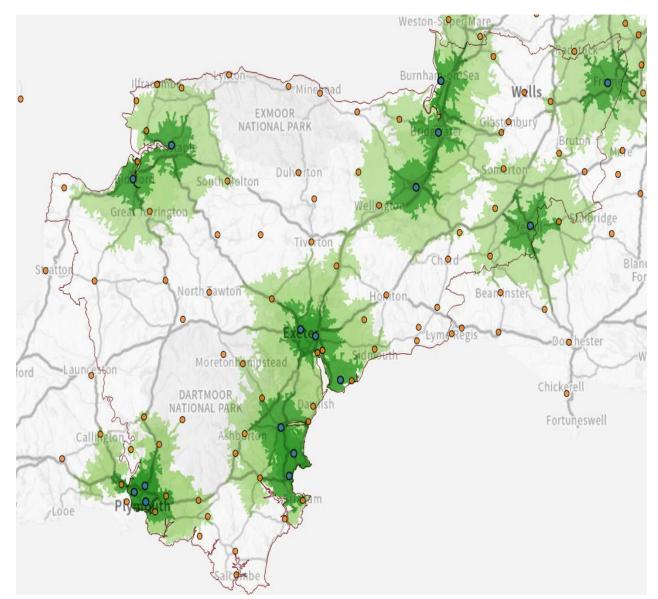
- 4.3. As per the model above but with the addition of pumps at:
 - i. Totnes+, Ilfracombe*, Seaton, Wells, Williton
- 4.4. The comparison of options is as set out in the table below:

	Dwelling fire 1 st pump ERS	Dwelling fire 1 st pump mean arrival time	RTC 1 st pump ERS	RTC 1 st pump mean arrival time
Normal conditions (Base case)	75.80%	07:23	80.10%	09:39
Current 56 pumps	69.00%	08:21	74.7%	10:29
17 pump model	51.00%	14:30	41.80%	18:02
29 pump model	60.00%	10:11	55.40%	13:09
34 pump model	63.40%	09:27	59.50%	12:23

Model Response Zones

4.6 The maps overleaf show the areas within 10 or 20 minutes response time for each of the selected station locations in the models. These travel times are based on 90 seconds call handling time and the crew being on station (i.e. an equivalent to a WDS response).





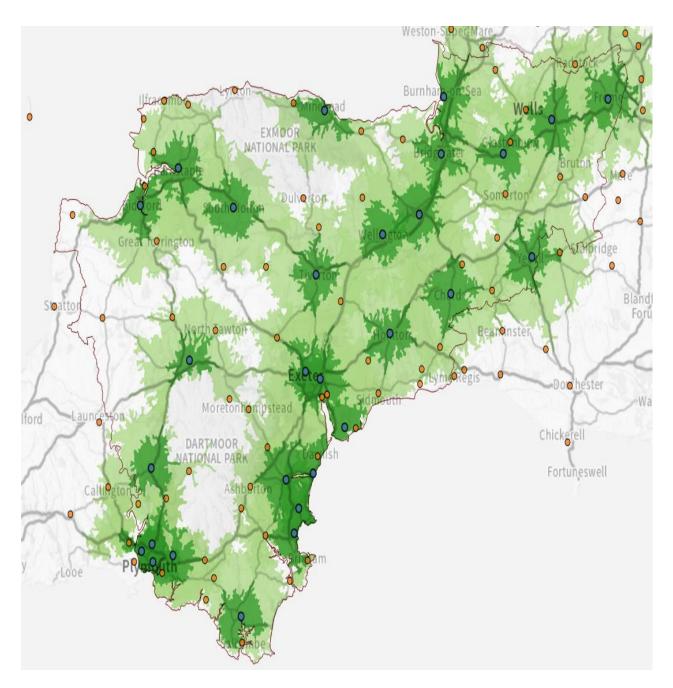
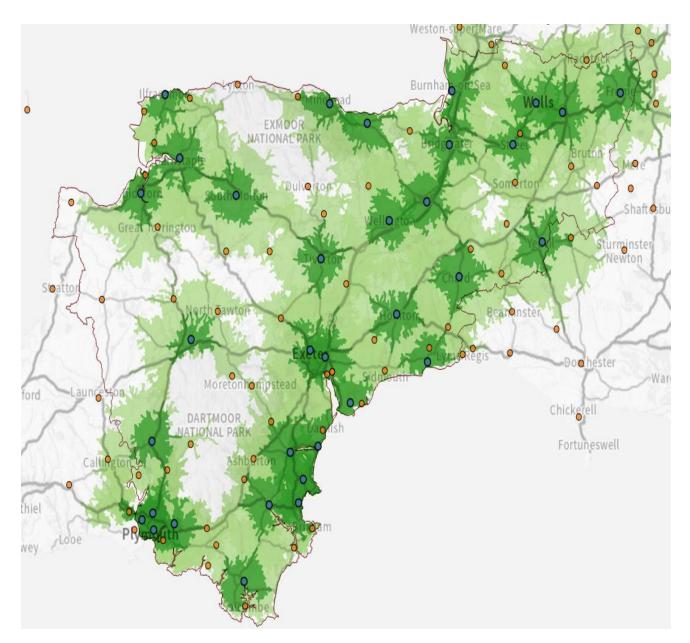
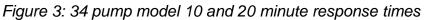


Figure 2: 29 pump model 10 and 20 minute response zones





5. <u>CONCLUSION</u>

- 5.1. The results of the further analysis and subsequent modelling based on risk, historical data and geography indicate that over 50% of the Service response capability is delivered by 17 pumps.
- 5.2. In order to meet Home Office business continuity criteria a minimum of 29 pumps is required from the current full fleet of 112 (i.e. 25%) and this represents a significant improvement on ERS and attendance times based on the risk profile for the Service beyond the 17 pumps.

- 5.3. Due to the geographical area of the Service an increased number of pumps will provide an increase in performance up to the current level of 56 risk priority pumps. However, the further modelling carried out indicates that a satisfactory level of performance can be achieved with 34 pumps (see comparison table at paragraph 4.5).
- 5.4. On this basis, the Executive Board has approved a change in the Key Performance Indicator for Risk Priority Pumps in order to achieve:
 - The minimum Home Office business continuity requirements;
 - The highest level of risk mitigation; and
 - The best geographical spread to remain within 15% of the ERS and achieve a mean first attendance of less than 10 minutes for a dwelling fire and 15 minutes for a road traffic collision.
- 5.5. Therefore, the 34 pump Risk Priority Pump model will be implemented from 1st April 2023.

ACFO PETER BOND Director of Service Improvement

APPENDIX A TO REPORT CSC/23/2

CURRENT LIST OF RISK PRIORITY PUMPS

Station	Pump	Callsign
Barnstaple	P1	KV01P1
Bideford	P1	KV04P1
Chulmleigh	P1	KV06P1
Hatherleigh	P1	KV09P1
Holsworthy	P1	KV10P1
Lynton	P1	KV11P1
North Tawton	P1	KV12P1
Okehampton	P1	KV13P1
South Molton	P1	KV14P1
Torrington	P1	KV15P1
Torquay	P1	KV17P1
Paignton	P1	KV18P1
Bovey Tracey	P1	KV20P1
Chagford	P1	KV23P1
Dartmouth	P1	KV24P1
Newton Abbot	P1	KV28P1
Teignmouth	P1	KV30P1
Totnes	P1	KV31P1
Danes Castle	P1	KV32P1
Exmouth	P1	KV33P1
Axminster	P1	KV34P1
Crediton	P1	KV38P1
Cullompton	P1	KV39P1
Honiton	P1	KV40P1
Ottery St Mary	P1	KV41P1
Sidmouth	P1	KV43P1
Tiverton	P1	KV44P1
Plympton	P1	KV47P1
Camels Head	P1	KV48P1
Crownhill	P1	KV49P1
Greenbank	P1	KV50P1
Greenbank	P2	KV50P2
Plymstock	P1	KV51P1
lvybridge	P1	KV53P1
Tavistock	P1	KV57P1
Middlemoor	P1	KV59P1
Taunton	P1	KV61P1
Bridgwater	P1	KV62P1
Burnham on Sea	P1	KV63P1

Glastonbury	P1	KV65P1
Minehead	P1	KV66P1
Street	P1	KV69P1
Wellington	P1	KV70P1
Williton	P1	KV71P1
Yeovil	P1	KV73P1
Castle Cary	P1	KV74P1
Chard	P1	KV75P1
Cheddar	P1	KV76P1
Crewkerne	P1	KV77P1
Frome	P1	KV78P1
Ilminster	P1	KV79P1
Martock	P1	KV80P1
Shepton Mallet	P1	KV81P1
Somerton	P1	KV82P1
Wells	P1	KV83P1
Wincanton	P1	KV84P1

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Agenda Item 6

REPORT REFERENCE NO.	CSC/23/3
MEETING	COMMUNITY SAFETY COMMITTEE
DATE OF MEETING	31 JANUARY 2023
SUBJECT OF REPORT	HIS MAJESTY'S INSPECTORATE OF CONSTABULARY & FIRE & RESCUE SERVICES (HMICFRS) AREAS FOR IMPROVEMENT ACTION PLAN UPDATE
LEAD OFFICER	Deputy Chief Fire Officer
RECOMMENDATIONS	That the Committee reviews progress in delivery of the action plan.
EXECUTIVE SUMMARY	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.
	The paper appended to this report outlines the progress that has been made against the HMICFRS Areas for Improvement action plan since the last update in November 2022. The key highlights are that:
	 Delivery of the Areas for Improvement action plan is on track.
RESOURCE IMPLICATIONS	Considered within the Action Plan where appropriate.
EQUALITY RISKS AND BENEFITS ANALYSIS	Considered within the Action Plan where appropriate.
APPENDICES	A. HMI Community Safety Committee Update
BACKGROUND PAPERS	None

HMICFRS ACTION PLAN – COMMUNITY SAFETY COMMITTEE UPDATE

1. **INTRODUCTION**

- 1.1. On Wednesday 27July 2022, HMICFRS published the Devon & Somerset Fire& Rescue Service 2022 inspection report. The inspection report identified one Cause of Concern and 14 Areas for Improvement (AFIs).
- 1.2. 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

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

Table 2:

Reference	Description	Target Completion	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.	30/11/2023	In Progress (On Track)

2.2. 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: Sum	Table 3: Summary of progress against the 10 individual actions						
Areas For Im	Areas For Improvement (Community Safety Committee)						
Not started (on track)Not started (off track)In progress (on track)In progress (off track)CompletedClosed							
5 (↓ from 6)	0 (→ at 0)	5 (↑ from 4)	0 (→ at 0)	0 (→ at 0)	0 (→ at 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.

REPORT REFERENCE NO.	CSC/23/4
MEETING	COMMUNITY SAFETY COMMITTEE
DATE OF MEETING	31 JANUARY 2023
SUBJECT OF REPORT	NATIONAL RESILIENCE EXERCISE REQUIREMENTS
LEAD OFFICER	ACFO Gerald Taylor, Director of Service delivery
RECOMMENDATIONS	That the report be noted.
EXECUTIVE SUMMARY	This paper explains how the Services National Resilience (NR) teams integrate the exercise requirements, as identified by NR into its training, and how Learning is captured and disseminated locally and nationally
RESOURCE IMPLICATIONS	Business as usual. No resource request
EQUALITY RISKS AND BENEFITS ANALYSIS	Complete
APPENDICES	None
BACKGROUND PAPERS	None

1. INTRODUCTION

- 1.1. National Resilience (NR) consists of Urban Search and Rescue (USAR), Mass Decontamination (MD), High Volume Pumping (HVP), Enhanced Logistic Support (ELS) and lately Marauding Terrorist attack specialist response teams *(MTA). *Note MTA moved into NR in late 2022 and has not yet been aligned to the NR exercise program
- 1.2. The overall Lead Fire and Rescue Service for NR is Merseyside FRS (Lead Authority), they liaise with Government departments to ensure the NR capabilities are funded and fit for purposes to provide a capability to manage the risks identified on the national risk register.
- 1.3. The equipment, training, Personal Protective Equipment (PPE), risk assessments and standard operating procedures are agreed via the Lead Authority. This enables total interoperability of teams and equipment.
- 1.4. Training is delivered by hosting Fire & Rescue Service (FRS) teams across England (the Service delivers national training in USAR, HVP & ELS)
- 1.5. The Lead Authorities role is to provide National Resilience assurance to Government. This is managed by the National Resilience Assurance Teams (NRAT). Their role is to set the required Key Performance indicators (KPIs) for the different capabilities.
- 1.6. The NRAT team set the requirements for training, exercising and asset refresh for the 5 capabilities.
- 1.7. They test and assure these requirements on a rolling basis and feed this information back to Government in the form of an annual assurance report.
- 1.8. Any learning identified via incidents, exercises/training, accidents or debriefs is captured via the NR portal (a separate website hosted via the Lead Authority) this identifies trends which are used to develop KPIs, update exercise requirements, update equipment or risk assessments or operating procedures.
- 1.9. To ensure that the NR hosting FRS's can successfully deliver an effective response, the NRAT have developed a rigorous assurance process. This is designed around a 3 year framework.

Year 1: FRS USAR team self-	
assessment	
Completion of a self-assessment against the KPI's and other elements of the Concept of Operations. FRS's are required to self-evaluate against a range of statements and submit evidence in support	Assurance visits Will be carried out with all NR hosting FRS over the course of the cycle.

Year 2: Zonal practical assurance	
exercises	
Practical assurance events, planned and facilitated by each of the zones and the FRS within, assessed by officers from the Capability Team supported by national tactical advisors. The programme is based upon a series of question sets and practical scenarios designed to allow teams to demonstrate technical and procedural competence against a range of areas, which may include areas of specific focus identified by the Capability Team following the outcomes of year 1. The year 2 assurance process will also include evaluation of the Capability Team of continuous zonal collaboration	Assurance visits Will be carried out with all NR hosting FRS over the course of the cycle
Year 3: Participation in national exercise	
Operational assurance of a response group, designed to test phases of the concept of operations. This will be assured by the NRAT and supported by National tactical advisors.	Assurance visits Will be carried out with all NR hosting FRS over the course of the cycle

2. <u>EXERCISE REQUIREMENTS PER CAPABILIILTY</u>

2.1. Aligned to the 3 yearly exercise cycle, the following number of exercises have been identified via the Lead Authority (Note USAR and ELS are in Year 3, HVP and MD is in year 1)

NR	Local	Yr 1	Yr 2	Yr 3
capability	exercise	(self	(Zonal	(National
	requirements	assess)	exercise)	exercise)
USAR	3 local	1	1	1
MD	3 local	1	1	1
HVP	3 local	1	1	1
ELS	3 local	1	1	1
MTA	NA	NA	NA	NA

2.2. The Service's target (identified within the Service exercise strategy) is linked directly to the risks held locally and cross border and encompasses the national requirements.

2.3. The data in Table 1 below shows the number of NR exercises completed in 2022

Table 1

Jan	Feb	March	April	May	June	July	Aug	Sep	Oct	Nov	Dec
3	1	0	1	1	0	1	0	2	1	1	1

2.4. The Service has recently been assured via NRAT within the ELS capability, the assurance report identifies 'outstanding' practice.

3. OBJECTIVES TESTED FROM RECENT EXERCISES

- 3.1. The following objectives have been tested:
 - A. Cross capability (working with ELS, HVP MTA, MD)
 - B. Interoperability (working with other agencies)
 - C. Testing National resilience arrangements.
 - D. Testing NR policies and procedures
 - E. Testing operations and response
 - F. Testing preparedness
- 3.2. This work has identified several areas of learning on a national level such as the ND2 review which will impact on NR resilience arrangements, preparedness, and response.

4. <u>CONCLUSION</u>

- 4.1. National Resilience within the Service is delivering successfully against the Nationally agreed Exercise schedule.
- 4.2. It is demonstrating regularly that it is testing its preparedness and operational competence against real life scenarios.
- 4.3. The NR assurance mechanism is proving successful, and the assurance reports are demonstrating the NR capabilities within DSFRS are fit for purpose. The training and exercising program identified by the Service within the NR context is providing vital data to support changes within this area. This is ensuring that NR can deal with the risks on the national risk register and provide support to the communities within England.

ACFO GERALD TAYLOR Director of Service Delivery

REPORT REFERENCE NO.	CSC/23/5
MEETING	COMMUNITY SAFETY COMMITTEE
DATE OF MEETING	31 JANUARY 2023
SUBJECT OF REPORT	PROTECTION ENFORCEMENT
LEAD OFFICER	ACFO Gerald Taylor, Director of Service Delivery
RECOMMENDATIONS	That the report be noted.
EXECUTIVE SUMMARY	Devon and Somerset Fire and Rescue Service are the enforcing body for fire safety within the Authority area. The Service's fire safety teams and operational crews carry out the risk- based inspection programme. Where possible, the Service will assist owners and responsible persons to comply with the legislation and keep people safe. The Service will, however, also enforce through legal notices, prohibitions and prosecutions where necessary.
RESOURCE IMPLICATIONS	Business as usual. No resource request
EQUALITY RISKS AND BENEFITS ANALYSIS	N/A
APPENDICES	A. Examples of Fire Safety Prosecutions
BACKGROUND PAPERS	None

1. INTRODUCTION TO LEGISLATION

- 1.1. The Regulatory Reform (Fire Safety) Order 2005 applies in England and Wales and requires 'responsible persons' (employers, building owners, managers etc) to take measures to protect people. The law does not allow the Service to enforce in order to protect property.
- 1.2. If responsible people do not comply with the requirements of the Fire Safety Order, they could be fined and/or go to prison.

2. WHERE THE SERVICE CAN ENFORCE

- 2.1. The Regulatory Reform (Fire Safety) Order 2005 (RRO) applies to almost all premises excluding single dwellings such as individual flats and houses where other legislation is more suited.
- 2.2. There are around 170,000 premises in Devon and Somerset to which the RRO applies.
- 2.3. The Service's Risk Based Inspection Plan identifies which of these premises present the highest risk. This information is utilised to target resources in order to have the biggest impact on public safety.
- 2.4. The legislation requires the Fire and Rescue Authority to enforce the provisions of the RRO.

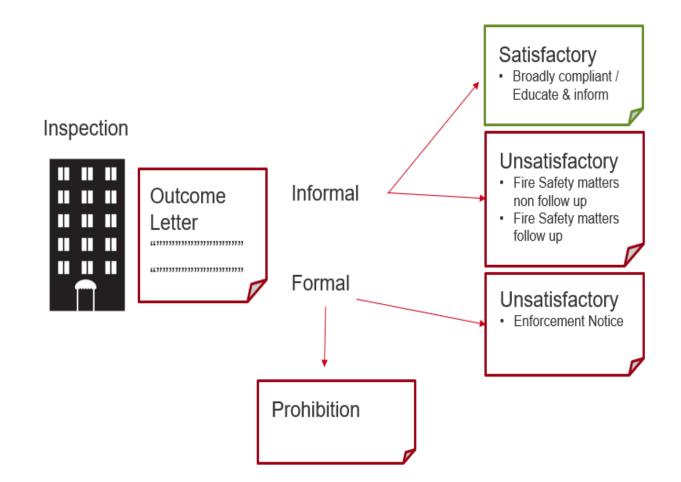
3. RECENT AND IMMINENT LEGISLATIVE CHANGES

- 3.1. There have been some changes to fire safety legislation following the devastating Grenfell Tower Fire in 2017.
- 3.2. The Fire Safety Act 2021 (the Act) makes it clearer where the Fire Safety Order applies in certain types of buildings. This change came into force on 16 May 2022.
- 3.3. The Fire Safety (England) Regulations 2022 have been introduced to meet the majority of the recommendations made in the Phase 1 report of the Grenfell Tower Enquiry and introduce new duties for the owners or managers (responsible persons) of high-rise flats and multi-occupied buildings. The Regulations will come into force on 23 January 2023.

4. HOW THE SERVICE ENFORCES

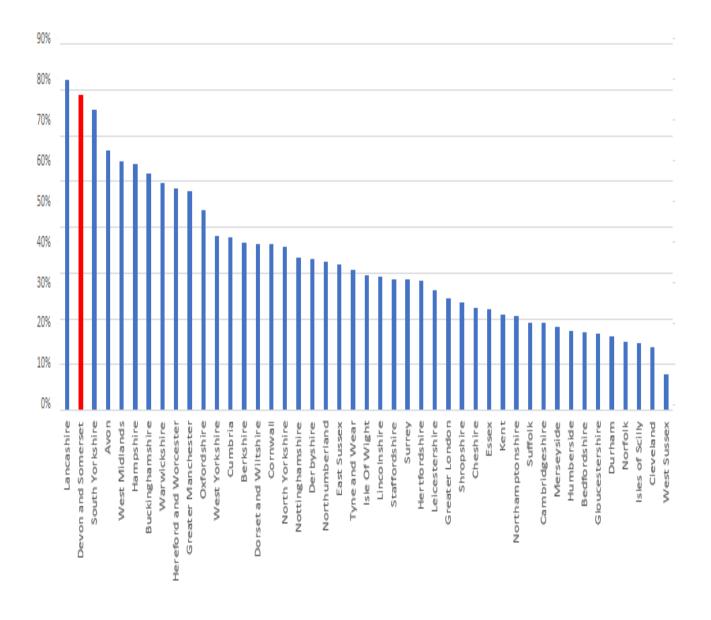
- 4.1. The Service carries out over 4000 inspections of various levels annually across Devon and Somerset.
- 4.2. A fire safety helpdesk is in place to ensure that advice is easily available for those who need it. This also allows the Service's own, dedicated inspectors and operation staff to have a single point of contact to help them when inspecting and attending incidents. This is extended for all staff by an out of hours team who can provide the same advice during evenings and weekends.

- 4.3. A proportional approach is taken (in line with the 'Better Regulators' Code) when carrying out inspections, so in some smaller premises officers carry out simpler visits know as Fire Safety Checks, and in more complex premises a more indepth visit known as an Audit is undertaken. The officers carrying out these checks and audits have different competency qualifications. At the end of a visit,, an outcome is issued which clearly tells people what they need to do to comply in order to keep people safe from fire.
- 4.4. The Service always tries to work with businesses to keep people safe. This is undertaken predominantly with informal letters/action plans. These give clear steps to achieve compliance without legal penalty. However, in some cases, the risk is so high that a formal notice is served, failure to comply with tthis is a criminal offense.
- 4.5. Inspection outcome action fall into one of two categories: -

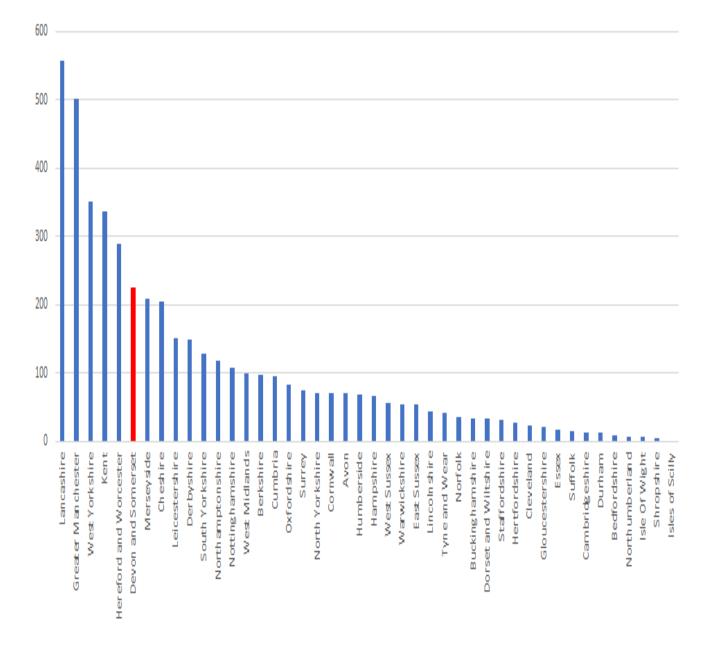


5. HOW DSFRS INSPECTION OUTCOMES COMPARE 2016 – 2021 PERIOD

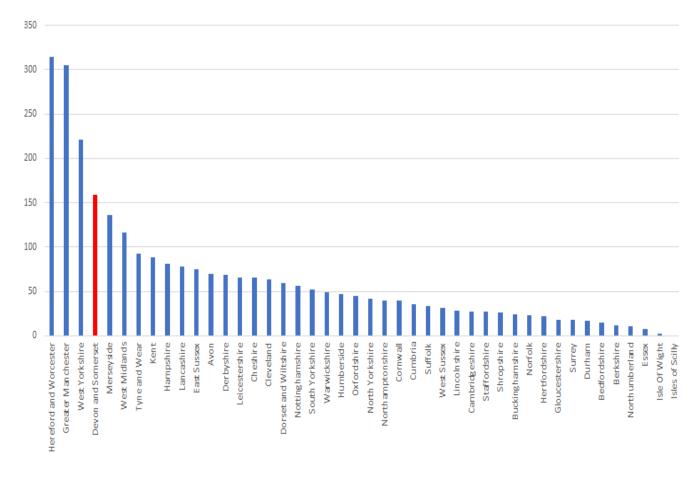
5.1. The comparisons for inspection outcomes are shown in the following graphs:



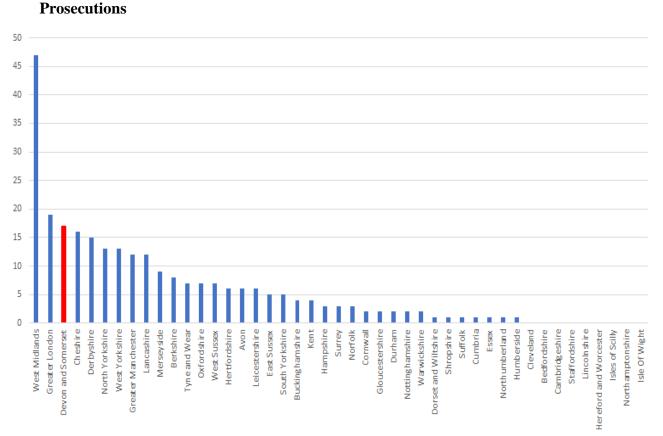
Fire Safety Audits – Unsatisfactory Outcome Percentage



Enforcement Notices issued (excludes LFB)



Prohibitions & Restriction Notices Served (Dangerous Conditions – Consider Legal Action)



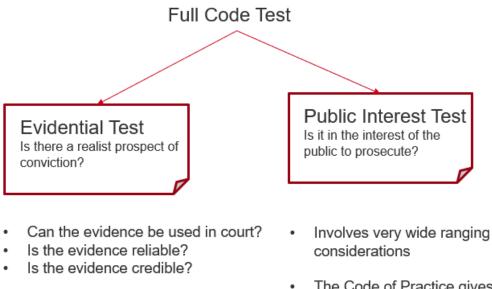
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6. LEGAL ACTION – PROSECUTIONS

- 6.1. Key examples where prosecutions are considered: -
 - people have been put at risk of death or serious injury from fire
 - failure to comply with a formal notice,

7. INVESTIGATIONS & LEGAL ACTION CASES

- 7.1. Where people have been placed at risk of death or serious injury, specialist protection and enforcement officers will carry out a full investigation including interviews under 'Caution' complying with the Police and Criminal Evidence Act (PACE).
- 7.2. Investigations are extremely technical and resource heavy. However, it is a critical function of being an effective regulator and holding those who would put people at risk of death or injury to account.
- 7.3. In the same way as the Crown Prosecution Service acts for the police, the Service will apply the Crown Prosecutors Test to confirm whether a prosecution should be brought. A prosecution may result in an unlimited fine and/or a custodial sentence. The Service also retains a Barrister with specialist knowledge of this legislative to provide advice and assistance as required.



- The Code of Practice gives questions that need to be considered when deciding whether a prosecutions should be brought
- 7.4. The Service has a 100% success rate in taking legal action and is regarded as one of the leading Fire and Rescue Services in this area.

8. **KEY CHALLENGES**

- 8.1. The primary challenge is the availability of competent and qualified inspecting officers. On average it takes 3-5 years to develop a competent inspecting officer who can inspect all types of building.
- 8.2. The qualifications required by the National Fire Chief's Council's National Framework also come at a significant financial cost for both the qualification and the study time to obtain and maintain competence.
- 8.3. In addition to fire safety sector competence, those officers able to carry out legal action prosecutions will also hold a BTECH Level 7 Advanced Professional Certificate in Legal Skills in Investigation (APCIL).
- 8.4. Examples of fire safety prosecutions undertaken in 2022 are set out at Appendix A of this report for reference.

9. CONCLUSION

- 9.1. Enforcement action is necessary to maintain a high standard of fire safety in businesses such as hotels, care homes, leased accommodation and other property types. As the enforcing body, the Service has a responsibility to take proportionate enforcement action. This action is always weighed up against the public interest. Our teams, where possible, try to educate and assist in the first instance unless the breach is so serious, or the responsible person continues to ignore the risk despite being given reasonable time to comply with the legislation.
- 9.2. The Service's website provides guidance for business owners and responsible persons to assist in compliance. This along with the fire safety helpdesk and compliance events helps the majority of businesses to stay safe, legal and compliant with fire safety law.

GERALD TAYLOR Director of Service Delivery

Examples- Prosecutions cases-2022

A Dawlish Property management agent fined £10,000.

Officers raised concerns with a property management agent in Dawlish, relating to a property used for commercial purposes with a rented flat above. Unsafe practices were identified such as a lack of suitable means of escape in case of fire, structural failures and the absence of a fire risk assessment.

The officers took the decision that the premises were dangerous to the person who lived in the flat, and with immediate effect, they couldn't stay there anymore. This was because if a fire were to occur on the ground floor the person in the flat above would not be able to make their escape safely. The person in the flat was also considered to be vulnerable as they were elderly with additional disabilities.

Following the investigation, the fire service made the decision to take the property agent to court. The Service determined that the conditions found at the premises in 2021 were so far below an acceptable standard that they had put people at risk of death or serious injury in the event of a fire occurring.

The investigation found that the property manager had known that the premises did not have adequate means of escape in case of fire from a previous inspection. Despite being told what was required to make the property safe he had never made an application for the works. Despite this, he continued to take rent from a vulnerable person for a number of years despite knowing that the flat was unsafe to occupy.

Company director fined £12800 + costs following Torquay flat fire

A fire broke out in a four-storey property comprising of separate leased flats.

On our arrival, crews discovered a fire on the first floor and the Service was informed that people may still be inside. Firefighters tackled the blaze and searched for missing people. Smoke and debris from the fire entered the stairway, that was the means of escape in case of fire. The crew dealt with a fire in the kitchen and supported one occupant to escape. The occupant required oxygen therapy due to smoke inhalation.

At the scene, the firefighters noted that despite a large amount of smoke, the fire alarm never sounded. Also, the door to the flat was not fitted with any type of self-closing device which would have prevented the rapid spread of the fire and smoke.

Following a successful prosecution, in summing up, Judge Linford said:

"No basic steps have been taken to ensure that the occupants would be reasonably safe in the event of a fire. There was no testing of the fire alarm, emergency lighting and no fire risk assessment had been done".

"There was scant regard paid to anything that was needed. If this fire had happened at night, then there would likely have been fatalities".

The director knew that he was not able to manage the fire safety but did nothing. It was not the responsibility of the leaseholders to make the premises safe, it was the company director's".

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