M. Pearson
CLERK TO THE AUTHORITY

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

(see below)

SERVICE HEADQUARTERS
THE KNOWLE
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COMMUNITY SAFETY COMMITTEE
(Devon & Somerset Fire & Rescue Authority)

Friday, 28th April, 2023

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 31 January 2023 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: Quarter 4 2022-23 (Pages 5 - 24)**

   Report of the Director of Service Delivery (CSC/23/6) attached.

5   **His Majesty's Inspectorate of Constabulary & Fire & Rescue Services (HMICFRS) Areas for Improvement Action Plan Update (Pages 25 - 28)**

   Report of the Deputy Chief Fire Officer (CSC/23/7) attached.

   MEMBERS ARE REQUESTED TO SIGN THE ATTENDANCE REGISTER

   Membership:-

   Councillors Chesterton (Chair), Biederman (Vice-Chair), Brazil, Drean, McGeough, 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.

	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)

31 January 2023

Present:

Councillors Biederman (Vice-Chair) (in the Chair), Coles (vice Chesterton), Drean, Randall-Johnson (vice McGeough) and Sully.

Apologies:

Councillors Brazil and Chesterton.

* **CSC/22/7**   **Minutes**

RESOLVED that the Minutes of the meeting held on 11 November 2022 be signed as a correct record.

* **CSC/22/8**   **Strategic Priority 1 and 2 Performance Measures: Quarter 3 2022-23**

The Committee received for information a report of the Director of Service Delivery (CSC/23/1) on performance by the Service during Quarter 3 of the current (2022-23) financial year against those Key Performance Indicators (KPIs) associated with the following two Strategic Priorities as approved by the Authority for 2022-23 (Minute DSFRA/21/36 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

The report identified the following in relation to Quarter 3 performance against the 21 KPIs associated with Strategic Priority 1 and the 14 KPIs associated with Strategic Priority 2:

	Succeeding	Near Target	Needs Improvement
Priority 1	13	6	2
Priority 2	7	6	1

In relation to the two Priority 1 (number of dwelling fire fatalities; rate of hospitalisations in other primary fires per 100,000 population) and one Priority 2 (percentage of operational risk information in date – level 4 tactical plans) KPIs requiring improvement, exception reports were provided giving an analysis of the performance and actions either proposed or in-train to address the issues. It was also noted that:

- The exception for dwelling fire fatalities stemmed from two fatal fires where, although the emergency response standard had not been met, this would not have had resulted in a different outcome;

- The exception report for the rate of hospitalisations in other primary fires per 100,000 population was dealing with very low numbers, making the rate subject to significant fluctuations. More meaningful monitoring could be ensured by assessing the rate of injuries within expected ranges, based on historical performance, with exception reports generated only where performance fell outside the upper limit;

- The exception report on the percentage of operational risk information in date – level 4 tactical plans related to refreshing existing plans rather than the requirement for new plans. Measures were in place to address fully the backlog by early in 2023.

The Committee welcomed the considerable improvements recorded for the number of home fire safety visits completed, the number of fire safety checks completed and the number of fire safety audits completed and asked to have placed on record its thanks and appreciation for the work of staff involved in securing these improvements.

(See also Minute *CSC/22/9 below).

* **CSC/22/9**   <u>**Change to Key Performance Indicator for Risk Priority Pumps**</u>

The Committee received for information a report of the Director of Service Improvement (CSC/23/2) on a change, to be effective from 1 April 2023, to the Key Performance Indicator for risk-priority pumps.

At present, there were some 56 appliances based at 55 stations designated as risk-priority pumps, based on risk profiling from the former Fire Service Emergency Cover (FSEC) toolkit.

Following implementation of the Service Delivery Operating Model (SDOM), adoption of the new Community Risk Management Plan and utilisation of new risk modelling tools, the number of risk-priority pumps had been reviewed and an optimum number of 34 risk-priority pumps determined which would achieve:

- Compliance with Home Office minimum business continuity requirements;

- The highest level of risk mitigation; and

- The best geographical spread to remain within 15% of the emergency response standards and achieve a mean first attendance of less than 10 minutes for a dwelling fire and 15 minutes for a road traffic collision.

(See also Minute *CSC/22/8 above).

* CSC/22/10   <u>**His Majesty's Inspectorate of Constabulary & Fire & Rescue Services (HMICFRS) Areas for Improvement Action Plan Update**</u>

The Committee received for information a report of the Deputy Chief Fire Officer (CSC/23/3) on progress against action plans to address Areas of Improvement within the remit of this Committee and stemming from His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) 2022 inspection report of the Devon & Somerset Fire & Rescue Service (the Service).

Action plans had been developed to address the following two Areas for Improvement:

1. The Service should evaluate its prevention activity so it understands what works; and

2. Safeguarding training should be provided to all staff.

The report indicated that progress against each of the action plans was on track to secure completion by the relevant target dates.

* CSC/22/11   <u>**National Resilience Exercising Requirements**</u>

The Committee received, for information, a report of the Director of Service Delivery (CSC/23/4) on involvement by the Devon & Somerset Fire & Rescue Service (the Service) in the delivery of national resilience capability (Urban Search and Rescue (USAR); mass decontamination; high-volume pumping; enhanced logistic support; and marauding terrorist attack specialist response teams).

The report identified that training was provided by the hosting fire and rescue service, with an overall Lead Authority (currently, Merseyside Fire and Rescue Service) providing assurance to the government that the capability was fit for purpose to address the risks identified on the national risk register and liaising with the government to ensure that national resilience capabilities were appropriately funded.

The assurance process involved a three-year cycle of:

- Year 1 – self-assessment;

- Year 2 – Zonal practice assurance exercise; and

- Year 3 – national exercise.

supported by a number of local exercises.

To date, this assurance mechanism was proving successful in demonstrating that the Service national resilience capabilities were fit for purpose.

* CSC/22/12   <u>**Protection Enforcement**</u>

The Committee received for information a report of the Director of Service Delivery (CSC/23/5) on activities by the Devon & Somerset Fire & Rescue Service in discharging responsibilities under the Regulatory Reform (Fire Safety) Order 2005.

The Service operated a risk-based inspection programme covering some 170,000 premises in Devon and Somerset, with resources targeted to have the biggest impact on public safety.

Where possible, the Service would assist responsible persons (as defined in the Order) in complying with the legislation to keep people safe. The Service could, however, enforce the provisions of the Order as necessary through legal notices, prohibitions and prosecutions.

* DENOTES DELEGATED MATTER WITH POWER TO ACT

The Meeting started at 2.00 pm and finished at 3.35 pm

REPORT REFERENCE NO.	CSC/23/6
MEETING	COMMUNITY SAFETY COMMITTEE
DATE OF MEETING	28 APRIL 2023
SUBJECT OF REPORT	STRATEGIC PRIORITY 1 AND 2 PERFORMANCE MEASURES: QUARTER 4 - 2022/23
LEAD OFFICER	ACFO GERALD TAYLOR, DIRECTOR OF SERVICE DELIVERY
RECOMMENDATIONS	*(a)* *That the Committee requests reports on areas of performance in relation to agreed strategic objectives; and* *(b)* *That, subject to (a) above, the report be noted and*
EXECUTIVE SUMMARY	Appendix 1 of this report presents the Quarter 4 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: 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** Table 1: performance status overview 2022/23 Quarter 4 <table><tr><td></td><td>Succeeding</td><td>Near target</td><td>Needs improvement</td></tr><tr><td>Priority 1</td><td>13</td><td>6</td><td>2</td></tr><tr><td>Priority 2</td><td>7</td><td>6</td><td>1</td></tr></table> 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)

	All have been subject to review, with exception reports included as appropriate. 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 four performance report
BACKGROUND PAPERS	DSFRA/21/9 Strategic Policy Objectives 2021-22

Community Safety Committee

2022/23 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

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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 Q4

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

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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	6	7	-14.3%
	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)	0.61	0.56	10.2%

Table 3: KPIs that are near to achieving target[1]

KPI Ref	Description	Current	Target	% Diff.
1.1.3.2	Rate of dwelling fire hospitalisations per 100,000 population	4.45	4.23	5.2%
1.1.6.1	Percentage of targeted home safety visits meeting two or more risk criteria	57.7%	60.0%	-2.3%
1.1.11.2	Rate of secondary fires per 100,000 population	97.30	91.23	6.6%

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	NA
	Other fires fatality performance status	Succeeding: both quarter and 12-month average on target		

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[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.

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KPI Ref	Description	Current	Target	% Diff.
1.1.1.2	Rate of dwelling fires attended per 100,000 population	50.61	52.55	-3.7%
1.1.4.1	Number of home fire safety visits completed	20,147	18,000	11.9%
1.1.8.2	Rate of other primary fires per 100,000 population (excludes dwellings and non-domestic premises)	45.42	46.50	-2.3%
1.1.9.2	Rate of other primary fire fatalities per 100,000 population (excludes dwellings and non-domestic premises)	0.08	0.10	-20.1%
1.1.12.2	Rate of deliberate fires per 100,000 population	78.19	80.83	-3.3%
1.1.13.2	Rate of road traffic collisions per 100,000 population	45.48	48.45	-6.1%
1.1.14.2	Rate of people killed or seriously injured in road traffic collisions per 100,000 population	25.64	26.13	-1.9%

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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 one fire-related fatality 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	1	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: fatality reported in quarter		

The 2022/23 financial year saw the annual level of performance for fire-related fatalities at dwelling fires stand at six deaths, one below the five-year average. Our aim is for there to be zero fire-related deaths in dwelling fires during each month. During March 2023, one fatality was recorded therefore the KPI is reported as "requires improvement".

Incident number: VV041657-01032023
Date and time of incident: 1st March 2023 at 1:04am
Location: Plymouth
Property type: Three-storey mid-terrace, HiMO
ERS met: Yes
Victim sex and age: Male, 54 years old

At 1:04am on Wednesday 1st March, Fire Control received a report of 'Fire Domestic Persons Reported' at a flat in Plymouth. Three pumps (V50P1, V50P2 & V48P1) were initially mobilised with the first pump (V50P1) in attendance at 1:10am.

The initial IC committed a breathing apparatus team of two and sent a Crew Manager to the rear of the property. The Crew Manager reported that there was a well-developed fire on the first floor, visible from the rear. A second breathing apparatus team was also committed. A 'make pumps 4' and then a 'make pumps 5' message was also sent.

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Upon entry into a flat on the first floor the first breathing apparatus team discovered the room was totally involved in fire which they promptly tackled. Once they had suppressed the fire enough to make entry, they discovered a male casualty within the toilet area. He was carried out of the property and first aid/CPR was commenced.

It is believed that the fire started accidentally, however due to the severity of the fire an exact cause could not be determined. It is thought likely that it started either due to an overloaded extension lead or fan heaters igniting combustible materials that were placed to close to the units. The fire developed quickly due to the relatively small size of the flat and a significant level of hoarding.

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.

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.

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 10.2% above target (actual = 0.61 hospitalisations per 100,000 population, target = 0.56).

Table 6: performance status - rate of hospitalisations in other primary fires per 100,000 population
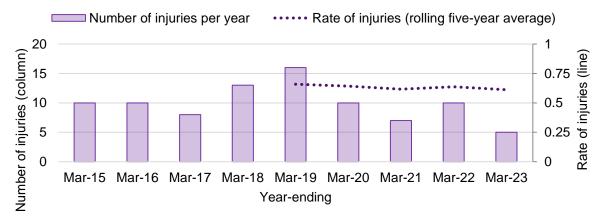
KPI Ref	Description	Current	Target	% Diff.
1.1.10.2	Rate of other primary fire hospitalisations per 100,000 population (excludes dwellings and non-domestic premises)	0.61	0.56	10.2%

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 (April 2022 to March 2023), five 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

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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.

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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)	60.46	58.94	2.6%
1.2.5.4	Rate of non-domestic false alarms per 10,000 rateable premises (hereditaments)	269.48	250.35	7.6%
1.2.6.1	Percentage of statutory consultations completed to required timescales	97.9%	100.0%	-2.1%

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	NA
	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	-17.4%
1.2.3.2	Rate of non-domestic premises fire hospitalisations per 10,000 rateable premises (hereditaments)	1.02	1.21	-15.6%
1.2.4.1	Number of fire safety checks completed	3,634	3,000	21.1%
1.2.4.2	Number of fire safety audits completed (short and full)	825	720	14.6%

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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	63.0%	98.0%	-35.0%

Table 11: 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	86.5%	94.0%	-7.5%

Table 12: KPIs that are achieving target

KPI Ref	Description	Current	Target	% Diff.
M2.1.1.1	Number of local exercises completed	140	36	288.9%
M2.1.1.2	Number of crossborder exercises completed	29	12	141.7%
M2.1.1.3	Number of national exercises completed	27	1	2600.0%

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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 63.0% (17 of 27) of level 4 sites in date for revalidation, 35.0% below the 98.0% target.

Table 13: 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	63.0%	98.0%	-35.0%

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.

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 embedded that enable increased output and improved resilience.

However, capacity remains limited and has been exacerbated by the loss of three experienced Inspectors (not replaced) that had the sole remit of Tactical Plans.

Performance levels will improve over coming months, with five tactical plans complete and awaiting final sign-off.

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.

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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	69.0%	75.0%	-6.0%
M2.2.3.2	Percentage of road traffic collisions attended within 15 minutes of call answer	72.1%	75.0%	-2.9%

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)	93.0%	98.0%	-5.0%
M2.4.1.2	Standard pump availability (percentage)	77.5%	85.0%	-7.5%
M2.4.3.1	Percentage of calls handled within target time (call answer to resource mobilisation)	89.6%	90.0%	-0.4%
M2.4.3.3	Average turnout time for emergency incidents - on-call duty system (median)	301	300	0.3%

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)	81	90	-10.0%

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

Table 207: 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%

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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/23/7**
MEETING	**COMMUNITY SAFETY COMMITTEE**
DATE OF MEETING	**28 APRIL 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 report outlines the progress that has been made against the HMICFRS Areas for Improvement action plan since the last update in January 2023. 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	None.
BACKGROUND PAPERS	None

1.   INTRODUCTION

1.1.   On Wednesday 27th July 2022 His Majesty's Inspectorate of Constabulary & Fire & Rescue Services (HMICFRS) published the Devon & Somerset Fire & Rescue Service (DSFRS) 2022 inspection report. The inspection report identified one Cause of Concern and 14 Areas for Improvement (AFIs).

1.2.   This report provides an update for this Committee 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 1 lists the Areas For Improvement linked to the Community Safety Committee and their individual implementation status.

Table 1:

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.   Figure 1 below outlines the completion status of all actions designed to address the Areas For Improvement linked to the Community Safety Committee, as outlined above.

Figure 1: Community Safety Committee Action Status - April 2023

Number of Actions

■ In Progress - On Track

■ Not Started - On Track

■ Not Started - On Track (Evidence and Assurance)

2.3. Table 2 below outlines the completion status of these actions in table view.

Table 2: Summary of progress against the 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
4 (↓ from 5)	0 (→ at 0)	6 (↑ from 5)	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.

GAVIN ELLIS
Deputy Chief Fire Officer

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