

# DEVON & SOMERSET FIRE & RESCUE AUTHORITY

#### S.J. Sharman 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 : DSFRA/CSC/SJS Website : www.dsfire.gov.uk Date : 2 November 2023 Please ask for : Samantha 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)

## Friday, 10th November, 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.

> S.J. Sharman Clerk to the Authority

# <u>A G E N D A</u>

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

1 <u>Apologies</u>

#### 2 <u>Minutes</u> (Pages 1 - 6)

of the previous meeting held on 8 September 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 <u>Review of Key Performance Indicators</u> (Pages 7 - 22)

Report of the Assistant Chief Fire Officer – Service Delivery (CSC/23/12) attached.

# 5 <u>Strategic Priority 1 and 2 Performance Measures: Quarter 2 2023-24</u> (Pages 23 - 40)

Report of the Assistant Chief Fire Officer – Service Delivery (CSC/23/13) attached.

#### 6 <u>His Majesty's Inspectorate of Constabulary & Fire & Rescue Services</u> (HMICFRS) Areas for Improvement Action Plan Update (Pages 41 - 44)

Report of the Chief Fire Officer (CSC/23/14) attached.

## MEMBERS ARE REQUESTED TO SIGN THE ATTENDANCE REGISTER

Membership:-

Councillors Chesterton (Vice-Chair), Brazil, Radford, Hendy (Chair), Kerley, Patel and Power

| NO | TES   |
|----|---|
| 1. | 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:  |
|    | <ul> <li>(i) disclose at that meeting, by no later than commencement of consideration of<br/>the item in which you have the interest or, if later, the time at which the interest<br/>becomes apparent to you, the existence of and – for anything other than a<br/>"sensitive" interest – the nature of that interest; and then</li> </ul>   |
|    | <ul><li>(ii) withdraw from the room or chamber during consideration of the item in which<br/>you have the relevant interest.</li></ul>  |
|    | 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<br>Monitoring Officer in relation to any relevant interest, then you must act in accordance<br>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.  |
| I  |   |

|    | 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)

8 September 2023

#### Present:

Councillors Hendy (Chair), Brazil, Coles (vice Power) and Kerley

#### Apologies:

Councillors Chesterton and Radford

#### \* CSC/23/1 <u>Minutes</u>

**RESOLVED** that the Minutes of the meeting held on 28 April 2023 be signed as a correct record.

#### \* CSC/23/2 Strategic Priority 1 and 2 Performance Measures: Quarter 1 2023-24

The Committee received for information a report of the Director of Service Delivery (CSC/23/8) on performance by the Service in Quarter 1 of the 2023-24 financial year against those Key Performance Indicators (KPIs) associated with the following two Strategic Priorities:

**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  |

Performance in Quarter 1 of 2023-24 was as summarised below:

|            | Succeeding | Near target | Needs<br>improvement |
|------------|------------|-------------|----------------------|
| Priority 1 | 13         | 5           | 1                    |
| Priority 2 | 7          | 6           | 1                    |

The KPIs with a status of "needs improvement" were:

• KPI 1.2.2.2 – Number of non-domestic fire fatalities; and

• KPI 2.1.4.2 – Percentage of operational risk information in date - level 4 tactical plans.

The report identified the main factors behind the ability to deliver the expected level of performance together with actions intended to secure improvement in both areas. Exception reports were also included within the appendix to report CSC/23/8.

In debating the report, the following points were raised:

- KPI 1.2.2.2. fire fatality non-domestic this involved a fire in outbuildings so it was classed as non-domestic but it was an unusual situation;
- KPI 2.1.4.2. it was noted that this was a legacy situation arising from the Covid. Pandemic but that good progress was being made to bring this back on target;
- The Assistant Chief Fire Officer Service Delivery would be submitting details of revised KPIs that had been discussed recently by the Executive Board to the Committee for consideration.

The Committee enquired as to whether there was a full list of KPIs available. The Assistant Chief Fire Officer – Service Delivery - stated there were additional KPIs not listed in this report. As indicated above, a full list of the revised KPIs would be submitted to the Committee at the next meeting.

Reference was made to the targets for Emergency Response (ERS) times and whether issues such as rurality had been factored in. The Assistant Chief Fire Officer – Service Delivery - responded that there used to be national standards for response times which changed in 2005 when such matters were devolved locally for consideration in accordance with risk factors. The University of Exeter had undertaken research on behalf of Devon & Somerset Fire & Rescue Service some years back which indicated that a 10-minute response for urban areas and 15 minutes for rural areas was appropriate. This was being reviewed, however, and the Committee would be apprised of the revised measures being considered. The Committee welcomed the work being undertaken on a review of the ERS. The Assistant Chief Fire Officer -Service Delivery - stated that he hoped to elicit more root level data to inform the response as a result of the work being undertaken that would then be utilised to improve performance. The Committee asked if there could be a comparison with similar rural fire and rescue services when considering response standards. The Assistant Chief Fire Officer - Service Delivery advised that this work had been undertaken and would be shared with the Committee in due course.

#### RESOLVED

- (a). That the work on Emergency Response Standards be considered at a future meeting of the Committee;
- (b). That a report on the revised Key Performance Indicators be submitted to the next meeting of the Committee; and
- (c). Subject to (a). and (b). above, the report be noted.

#### CSC/23/3 Planning and the Role of the Fire & Rescue Service

The Committee received for information a report of the Assistant Chief Fire Officer - Service Delivery (CSC/23/9) on the work that was being undertaken within the Service on Planning and the Role of the Fire & Rescue Service.

The Area Manager – Prevention and Protection - advised the Committee that the Service was not a statutory consultee for planning applications but did provide advice as and when requested. The Service's main concerns on planning applications were access and water supplies on new development. There were mitigations that could be considered though as, in areas where access may be difficult, measures such as the use of domestic sprinklers could be installed in new properties.

The Chair drew attention to the point that developers may agree to install fire safety measures on initial planning applications but may change their agreement at a later stage which could cause fire safety issues. The Area Manager – Protection and Prevention – advised the Committee that the Service was consulted on Building Regulations with 15 days to respond and officers suitably qualified as fire engineers were able to respond and advise on matters pertaining to fire safety. Approximately 1300 consultations were received each year by the Service on Building Regulations applications. Once a property was signed off for Building Regulations and completed, responsibility for fire safety passed to the Service. Any subsequent issues could be pursued under the Fire Safety (Regulatory Reform Order) 2005.

The Committee referred to the large-scale domestic developments being built as extensions to large urban areas in Devon and Somerset together with major commercial developments and he asked how the Service was going to cope with this. The Area Manager – Protection and Prevention – replied that engagement was being undertaken by Assistant Chief Fire Officer Nicky Bottomley to look at new developments and where they were located so opportunities were not missed for new fire stations and associated funding where needed. The Committee welcomed feedback to constituent authorities from the Service on the planning process in place. The Area Manager – Protection and Prevention – responded that local engagement was found to be of assistance in many cases.

#### \* CSC/23/4 Partnerships

The Committee received for information a report of the Assistant Chief Fire Officer - Service Delivery (CSC/23/10) setting out how the Service's Protection and Prevention teams worked with partner agencies to target individuals in high risk groups with fire safety checks.

It was noted that the groups at highest risk of having a fire included households with factors such as age, limited mobility, living alone, disability, now working smoke alarm and alcohol/drugs (amongst others). The Committee sought clarification on how the Service was able to increase the number of referrals so that more basic fire safety checks could be undertaken. The Area Manager – Prevention and Protection - stated that the Service was not short of referrals from partners and had to prioritise the most vulnerable people for fire safety visits. Those classed as being of medium risk could undertake an online fire safety assessment. It was added that the Service also accessed those communities who may not necessarily engage with the Service such as those whose first language was not English.

The Committee sought an assurance that partners were assisting the Service as much as possible given the capacity issues identified. The Area Manager – Protection and Prevention – responded that the Service did as much as possible to educate and train other partners to assist in the fire safety process without a need for a referral to reduce the workload as much as possible.

In response to a question, it was noted that the Service undertook 18,000 home fire safety visits a year currently based on capacity to deliver. More work was required, however, to understand demand in areas such as an increasing, ageing population which may lead to an increase in the number of high risk individuals.

#### \* CSC/23/5 <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 Chief Fire Officer (CSC/23/11) on progress against action plans to address Areas for 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 which were specifically related to the remit of this Committee:

- HMI-1.2-202203 The Service should evaluate its prevention activity so it understands what works; and
- HMI-1.2-202204 Safeguarding training should be provided to all staff.

It was noted that the action under HMI-1.2-202203 - The Service should evaluate its prevention activity so it understands what works – was no longer required. This was due to the point that the Service should evaluate its prevention activity so that it understood what worked but there was no requirement to align to ISO accreditation.

The Committee enquired as to the position overall on the 14 areas for improvement. The Committee was advised that there was good progress being made. The next inspection was now scheduled for April 2024 with HMICFRS requesting documentation to support any evidence in March 2024.

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

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# Agenda Item 4

| REPORT REFERENCE<br>NO.                 | CSC/23/12  |
|---|--|
| MEETING                                 | COMMUNITY SAFETY COMMITTEE   |
| DATE OF MEETING                         | 10 NOVEMBER 2023   |
| SUBJECT OF REPORT                       | REVISED KEY PERFORMANCE INDICATORS   |
| LEAD OFFICER                            | ASSISTANT CHIEF FIRE OFFICER – SERVICE DELIVERY  |
| RECOMMENDATIONS                         | That the report be noted.  |
| EXECUTIVE SUMMARY                       | Periodically, our Key Performance Indicators (KPIs) need to be<br>reviewed to ensure that they are providing the organisation<br>with an appropriate level of oversight and that they continue to<br>align with our Service Priorities and Objectives. |
|   | During August 2023, following extensive review, the Executive Board agreed a revised suite of KPIs.  |
|   | This report provides an overview of the KPIs relevant to the<br>Community Safety Committee. The intention is to enable the<br>Committee to identify those metrics that will support them to<br>appropriately scrutinise performance.                   |
|   | 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."   |
| RESOURCE<br>IMPLICATIONS                | As indicated in the paper.   |
| EQUALITY RISKS AND<br>BENEFITS ANALYSIS | An initial assessment has not identified any equality issues emanating from this report.   |
| APPENDICES                              | A. Community Safety Committee: Key Performance<br>Indicator Review   |
| BACKGROUND<br>PAPERS                    | None.  |

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# Community Safety Committee

Key Performance Indicator Review

During August 2023, following extensive review, the Executive Board agreed a revised suite of KPIs. This report provides an overview of the KPIs relevant to the Community Safety Committee. The intention is to enable the Committee to identify those metrics that will support them to appropriately scrutinise whether the Service is meeting objectives pertinent to community safety and operational response.

Alice Murray, Strategic Analyst

Devon & Somerset Fire & Rescue Service



### DSFRS Community Safety Committee

Key Performance Indicator Review



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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.

Periodically, our key performance indicators (KPIs) need to be reviewed to ensure that they are providing the organisation with an appropriate level of oversight and that they continue to align with our Service Priorities and Objectives.

During August, following extensive review, the Executive Board agreed a revised suite of KPIs.

This report provides an overview of the KPIs relevant to the Community Safety Committee. The intention is to enable the Committee to identify those metrics that will support them to appropriately scrutinise performance.

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."



## **Proposed KPIs**

This section provides a breakdown of the Executive Board KPIs by priority and objective. A description of the KPIs implementation status is also provided:

- Continuation = KPI is carried forward and reported consistently with previous years
- 2) Amendment = KPI has been revised, e.g., changed from a rate to a number or using a different data source
- 3) New = KPI is a new introduction to strategic reporting
- Removed = KPI is no longer deemed appropriate for strategic reporting or is no longer valid

Priority one: our targeted prevention and protection activities reduce the risks in our communities, improving health, safety and wellbeing, and supporting the local economy.

Objective one: we will work proactively to prevent emergencies, protect people and premises from fire, and find and support vulnerable people and at-risk places.

| KPI no. | KPI name  | KPI status   |
|---------|---|--|
| 1.1.01. | Number of fire related deaths in dwellings                    | Continuation.  |
| 1.1.02. | Number of dwelling fire injuries requiring hospital treatment | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Include all injuries, whether<br/>reported as fire-related or not,<br/>to align with national reporting.</li> <li>Assessment: rolling 12-month<br/>vs five-year average.</li> </ul> |
| 1.1.03. | Number of primary dwelling fires attended                     | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Assessment: rolling 12-month<br/>vs five-year average.</li> </ul>   |
| 1.1.04. | Number of home fire safety visits completed                   | Continuation.  |

| KPI no. | KPI name   | KPI status   |
|---------|--|--|
| 1.1.05. | Proportion of targeted home fire<br>safety visits to high-risk<br>households | Continuation.  |
| 1.1.06. | Proportion of dwelling fires resulting in hot strike activity                | <ul> <li>New:</li> <li>Issue raised through<br/>HMICFRS inspection.</li> <li>Monitor for one year and then<br/>reassess inclusion.</li> <li>Assessment: proportion (%) in<br/>period vs set target.</li> </ul>   |
| 1.1.07. | Number of fire-related deaths in non-domestic premises                       | Continuation.  |
| 1.1.08. | Number of non-domestic fire<br>injuries requiring hospital<br>treatment      | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Include all injuries, whether<br/>reported as fire-related or not,<br/>to align with national reporting.</li> <li>Assessment: rolling 12-month<br/>vs five-year average.</li> </ul> |
| 1.1.09. | Number of primary non-<br>domestic fires attended                            | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Assessment: rolling 12-month<br/>vs five-year average with<br/>monthly monitoring using<br/>statistical process control.</li> </ul>   |
| 1.1.10. | Number of fire safety checks completed                                       | Continuation   |
| 1.1.11. | Number of fire safety audits completed                                       | Continuation   |

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| KPI no. | KPI name  | KPI status   |  |
|---------|---|--|--|
| 1.1.12. | Proportion of building regulation<br>and licencing jobs completed in<br>target time | Continuation   |  |
| 1.1.13. | Number of fire-related deaths in vehicles and outdoor locations                     | Continuation   |  |
| 1.1.14. | Number of vehicle and outdoor<br>fire injuries requiring hospital<br>treatment      | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Include all injuries, whether<br/>reported as fire-related or not,<br/>to align with national reporting.</li> <li>Assessment: rolling 12-month<br/>vs five-year average.</li> </ul> |  |
| 1.1.15. | Number of primary fires in vehicles and outdoor locations                           | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Assessment: rolling 12-month<br/>vs five-year average with<br/>monthly monitoring using<br/>statistical process control.</li> </ul>   |  |
| 1.1.16  | Number of secondary fires   | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Assessment: rolling 12-month<br/>vs five-year average with<br/>monthly monitoring using<br/>statistical process control.</li> </ul>   |  |
| 1.1.17  | Number of deliberate fires  | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Assessment: rolling 12-month<br/>vs five-year average with<br/>monthly monitoring using<br/>statistical process control.</li> </ul>   |  |



| KPI no. | KPI name   | KPI status   |
|---------|--|--|
| 1.1.18. | Number of RTCs attended by the fire service  | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Assessment: rolling 12-month<br/>vs five-year average with<br/>monthly monitoring using<br/>statistical process control.</li> </ul> |
| 1.1.19. | Number of persons killed or<br>seriously injured in RTCs<br>attended by the fire service | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Assessment: rolling 12-month<br/>vs five-year average with<br/>monthly monitoring using<br/>statistical process control.</li> </ul> |
| 1.1.20. | Number of false alarms due to apparatus in dwellings                                     | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Assessment: rolling 12-month<br/>vs five-year average with<br/>monthly monitoring using<br/>statistical process control.</li> </ul> |
| 1.1.21. | Number of false alarms due to<br>apparatus in non-domestic<br>premises                   | <ul> <li>Amendment:</li> <li>Change from rate to number.<br/>Rate may still be utilised for<br/>benchmarking.</li> <li>Assessment: rolling 12-month<br/>vs five-year average with<br/>monthly monitoring using<br/>statistical process control.</li> </ul> |
| 1.1.22. | Proportion of level three risk<br>information in date for<br>revalidation                | Continuation.  |
| 1.1.23. | Proportion of level four risk<br>information in date for<br>revalidation                 | Continuation.  |



Objective 2. We will communicate and engage with the public and will value feedback from those who have used our services.

| KPI no. | KPI name  | KPI status                |
|---------|---|---------------------------|
| 1.2.01. | Public survey: proportion of respondents that have trust in the fire service                          | New:<br>Monitor annually. |
| 1.2.02. | Public survey: proportion of<br>respondents that feel the fire<br>service provides value for<br>money | New:<br>Monitor annually. |

Priority two: Our operational resources provide an effective emergency response, to meet the local and national risks identified in our Community Risk Management Plan.

# Objective three: We will respond effectively to emergencies, and efficiently manage the demands upon our services.

| KPI<br>no. | KPI name   | KPI status   |
|------------|--|--|
| 2.3.01     | Fire engine availability: priority appliances          | Amendment:<br>• Change data source from<br>Gartan to Vision. This will<br>align with HMICFRS reporting.  |
| 2.3.02     | Fire engine availability: standard appliances          | <ul> <li>Amendment:</li> <li>Change data source from<br/>Gartan to Vision. This will<br/>align with HMICFRS reporting.</li> <li>Change to exclude risk<br/>dependant appliances which<br/>will be reported in a separate<br/>KPI.</li> </ul> |
| 2.3.03     | Fire engine availability: risk<br>dependant appliances | New:<br>• Previously included within<br>standard appliances due to<br>having same target<br>availability.  |

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| KPI<br>no. | KPI name  | KPI status  |
|------------|---|---|
| 2.3.04     | Proportion of dwelling fires<br>attended within 10 minutes of<br>emergency call answer          | Continuation.   |
| 2.3.05     | Proportion of Road Traffic<br>Collisions attended within 15<br>minutes of emergency call answer | Continuation.   |
| 2.3.06     | Proportion of calls handled within target time  | Continuation.   |
| NA         | Average (median) turnout time for wholetime duty system crews                                   | Removed: deemed to be a tactical indicator that should be monitored at local level. |
| NA         | Average (median) turnout time for on-call duty system crews                                     | Removed: deemed to be a tactical indicator that should be monitored at local level. |
| NA         | Availability of national resilience assets  | Removed: this is monitored nationally.  |
| NA         | Proportion of national resilience personnel in date with competency.                            | Removed: this is monitored nationally.  |
| NA         | Number of local exercises completed   | Removed: deemed to be a tactical indicator that should be monitored at local level. |
| NA         | Number of cross-border exercises completed  | Removed: deemed to be a tactical indicator that should be monitored at local level. |

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#### Appendix A: Data Tables

| KPI number and name                                      | Data               | 2018/19     | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |  |  |
|--|--------------------|-------------|---------|---------|---------|---------|---------|--|--|
| 1.1.01. Number of fire-                                  | 12-month<br>actual | 4           | 8       | 10      | 6       | 6       | 4       |  |  |
| related deaths in dwellings                              | 5-year<br>avg.     | 6           | 6       | 7       | 7       | 7       | 6       |  |  |
| 1.1.02. Number of dwelling fire injuries requiring       | 12-month<br>actual | 88          | 87      | 71      | 76      | 84      | 73      |  |  |
| hospital treatment                                       | 5-year<br>avg.     | 75          | 80      | 78      | 80      | 81      | 79      |  |  |
| 1.1.03. Number of primary                                | 12-month<br>actual | 926         | 933     | 866     | 865     | 879     | 869     |  |  |
| dwelling fires attended                                  | 5-year<br>avg.     | 988         | 979     | 958     | 930     | 894     | 888     |  |  |
| 1.1.04. Number of home<br>fire safety visits completed   | Financial<br>year  |             | 16,696  | 8,525   | 14,781  | 20,139  | 10,498  |  |  |
|  | Target             |             | 19,000  | 19,000  | 18,000  | 18,000  | 9,000   |  |  |
| 1.1.05. Proportion of targeted home fire safety          | Financial<br>year  |             | 47.1%   | 47.9%   | 54.4%   | 57.7%   | 62.1%   |  |  |
| visits to high risk<br>households                        | Target             |             | 60.0%   | 60.0%   | 60.0%   | 60.0%   | 60.0%   |  |  |
| 1.1.06. Proportion dwelling fires resulting in hotstrike | Financial<br>year  | Unavailable |         |         |         |         |         |  |  |
| activity   | Target             |             |         |         |         |         |         |  |  |
| 1.1.07. Number of fire-<br>related deaths in non-        | 12-month<br>actual | 3           | 0       | 1       | 0       | 0       | 1       |  |  |
| domestic premises  | 5-year<br>avg.     | 1           | 1       | 1       | 1       | 1       | 1       |  |  |
| 1.1.08. Number of non-<br>domestic fire injuries         | 12-month<br>actual | 8           | 6       | 8       | 4       | 12      | 14      |  |  |
| requiring hospital treatment                             | 5-year<br>avg.     | 14          | 12      | 10      | 9       | 8       | 7       |  |  |
| 1.1.09. Number of primary non-domestic fires             | 12-month<br>actual | 473         | 489     | 385     | 459     | 438     | 422     |  |  |
| attended   | 5-year<br>avg.     | 493         | 482     | 461     | 452     | 449     | 445     |  |  |
| 1.1.10. Number of fire                                   | Financial<br>year  |             | 4,338   | 1,449   | 3,287   | 3,647   | 1,196   |  |  |
| safety checks completed                                  | Target             |             | 3,700   | 3,700   | 2,000   | 3,000   | 1,500   |  |  |

|  |                    |         |         |         |         |         | []      |
|--|--------------------|---------|---------|---------|---------|---------|---------|
| KPI number and name                                      | Data               | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
| 1.1.11. Number of fire                                   | Financial<br>year  |         | 902     | 318     | 549     | 824     | 416     |
| safety audits completed                                  | Target             |         |         |         | 600     | 720     | 240     |
| 1.1.12. Proportion of building regulation and            | Financial<br>year  | 94.1%   | 97.5%   | 99.5%   | 99.1%   | 98.2%   | 98.7%   |
| licencing jobs completed in target time                  | Target             | 100.0%  | 100.0%  | 100.0%  | 100.0%  | 100.0%  | 100.0%  |
| 1.1.13. Number of fire-<br>related deaths in vehicles    | 12-month<br>actual | 4       | 0       | 1       | 2       | 0       | 1       |
| and outdoor locations                                    | 5-year<br>avg.     | 2       | 2       | 2       | 2       | 1       | 1       |
| 1.1.14. Number of vehicle and outdoor fire injuries      | 12-month<br>actual | 27      | 15      | 14      | 15      | 12      | 16      |
| requiring hospital treatment                             | 5-year<br>avg.     | 19      | 18      | 17      | 18      | 17      | 17      |
| 1.1.15. Number of primary fires in vehicles and          | 12-month<br>actual | 902     | 827     | 691     | 694     | 775     | 707     |
| outdoor locations  | 5-year<br>avg.     | 822     | 822     | 805     | 778     | 778     | 756     |
| 1.1.16. Number of  | 12-month<br>actual | 2,349   | 1,933   | 1,834   | 1,707   | 2,219   | 1,623   |
| secondary fires attended                                 | 5-year<br>avg.     | 1,958   | 1,961   | 1,974   | 1,934   | 2,008   | 1,920   |
| 1.1.17. Number of  | 12-month<br>actual | 1,634   | 1,434   | 1,221   | 1,228   | 1,424   | 1,147   |
| deliberate fires attended                                | 5-year<br>avg.     | 1,431   | 1,447   | 1,443   | 1,391   | 1,388   | 1,336   |
| 1.1.18. Number of RTCs attended by the fire              | 12-month<br>actual | 888     | 928     | 618     | 797     | 826     | 833     |
| service  | 5-year<br>avg.     | 1,248   | 1,148   | 943     | 871     | 811     | 799     |
| 1.1.19. Number of persons killed or seriously injured in | 12-month<br>actual | 454     | 501     | 298     | 494     | 530     | 571     |
| RTCs attended by the fire service                        | 5-year<br>avg.     | 593     | 569     | 491     | 477     | 455     | 462     |
| 1.1.20. Number of false alarms due to apparatus in       | 12-month<br>actual | 2,167   | 2,292   | 2,184   | 2,393   | 2,815   | 2,986   |
| dwellings  | 5-year<br>avg.     | 2,016   | 2,135   | 2,200   | 2,265   | 2,370   | 2,452   |
| 1.1.21. Number of false alarms due to apparatus in       | 12-month<br>actual | 1,808   | 1,981   | 1,899   | 2,207   | 2,139   | 2,332   |
| non-domestic premises                                    | 5-year<br>avg.     | 1,744   | 1,803   | 1,865   | 1,948   | 2,007   | 2,077   |



| KPI number and name                                   | Data              | 2018/19     | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |  |  |  |
|---|-------------------|-------------|---------|---------|---------|---------|---------|--|--|--|
|   | Financial         | 2010/13     | 2019/20 | 2020/21 | 2021/22 | 2022/25 | 2023/24 |  |  |  |
| 1.1.22. Proportion of level three risk information in | year              | 94.2%       | 95.1%   | 90.4%   | 96.7%   | 86.5%   | 90.8%   |  |  |  |
| date for revalidation                                 | Target            | 94.0%       | 94.0%   | 94.0%   | 94.0%   | 94.0%   | 94.0%   |  |  |  |
| 1.1.23. Proportion of level four risk information in  | Financial<br>year |             | 100.0%  | 100.0%  | 100.0%  | 63.0%   | 97.1%   |  |  |  |
| date for revalidation                                 | Target            |             | 98.0%   | 98.0%   | 98.0%   | 98.0%   | 98.0%   |  |  |  |
| 1.2.01. Public survey:<br>proportion of respondents   | Financial<br>year |             |         |         |         |         |         |  |  |  |
| that have trust in the fire service                   | Target            | Unavailable |         |         |         |         |         |  |  |  |
| 1.2.02. Public survey:<br>proportion of respondents   | Financial<br>year | Unavailable |         |         |         |         |         |  |  |  |
| that feel the fire service provides value for money   | Target            |             |         |         |         |         |         |  |  |  |
| 2.1.01. Fire engine<br>availability: priority         | Financial<br>year | 97.2%       | 96.8%   | 98.2%   | 94.9%   | 93.0%   | 97.4%   |  |  |  |
| appliances  | Target            | 98.0%       | 98.0%   | 98.0%   | 98.0%   | 98.0%   | 98.0%   |  |  |  |
| 2.1.02. Fire engine<br>availability: standard         | Financial<br>year | 71.9%       | 76.7%   | 84.8%   | 79.9%   | 79.9%   | 79.4%   |  |  |  |
| appliances  | Target            | 85.0%       | 85.0%   | 85.0%   | 85.0%   | 85.0%   | 85.0%   |  |  |  |
| 2.1.03. Fire engine<br>availability: risk dependant   | Financial<br>year |             |         | 60.9%   | 55.2%   | 60.9%   | 61.2%   |  |  |  |
| appliances  | Target            |             |         | 85.0%   | 85.0%   | 85.0%   | 85.0%   |  |  |  |
| 2.1.04. Proportion of dwelling fires attended         | Financial<br>year | 72.6%       | 71.2%   | 71.3%   | 71.4%   | 69.0%   | 69.3%   |  |  |  |
| within 10 minutes of<br>emergency call answer         | Target            | 75.0%       | 75.0%   | 75.0%   | 75.0%   | 75.0%   | 75.0%   |  |  |  |
| 2.1.05. Proportion of<br>Road Traffic Collisions      | Financial<br>year | 76.1%       | 76.6%   | 75.6%   | 76.3%   | 72.1%   | 73.7%   |  |  |  |
| attended within 15 minutes of emergency call answer   | Target            | 75.0%       | 75.0%   | 75.0%   | 75.0%   | 75.0%   | 75.0%   |  |  |  |
| 2.1.06 Proportion of calls                            | Financial<br>year | 76.1%       | 76.6%   | 75.6%   | 76.3%   | 72.1%   | 73.7%   |  |  |  |
| handled within target time                            | Target            | 75.0%       | 75.0%   | 75.0%   | 75.0%   | 75.0%   | 75.0%   |  |  |  |

<sup>&</sup>lt;sup>1</sup> Availability data currently from Gartan, this will change to Vision once data is available.

## **Appendix B: Glossary**

Most terms and definitions can be found within the Home Office Fire Statistics Definitions document: https://www.gov.uk/government/publications/fire-statisticsguidance/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:** these are fire engines in areas that present higher levels risk <u>or</u> demand which 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:** these fire engines that aim to be available 24-hours a day, located in areas of lower risk or lesser demand. They are key to ensuring that we are keeping our communities safe. These are all crewed by on-call or volunteer firefighters and there is an expectation that each fire engine will be available at least 85% of the time.

**Risk dependent pump:** these fire engines that are required to be available during set periods of the day when risk or demand is deemed greatest, generally during nighttime hours. These are all crewed by on-call firefighters and there is an expectation that each fire engine will be available at least 85% of the required time. The appliances may also be crewed on a voluntary bases during other periods, but these are not included in availability statistics.

**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<br>NO. | CSC/23/13  | CSC/23/13   |                 |                      |  |  |  |
|-------------------------|--|---|-----------------|----------------------|--|--|--|
| MEETING                 | COMMUNITY S  | COMMUNITY SAFETY COMMITTEE  |                 |                      |  |  |  |
| DATE OF MEETING         | 10 NOVEMBER  | 0 NOVEMBER 2023   |                 |                      |  |  |  |
| SUBJECT OF REPORT       |  | STRATEGIC PRIORITY 1 AND 2 PERFORMANCE MEASURES:<br>QUARTER 2 – 2023-24   |                 |                      |  |  |  |
| LEAD OFFICER            | ACFO GERALI  | D TAYLOR, DIRE  | CTOR OF SER     |                      |  |  |  |
| RECOMMENDATIONS         |  | performance in relation to agreed strategic objectives;   |                 |                      |  |  |  |
|                         | (b). That, su  | bject to (a) abov   | e, the report b | e noted and          |  |  |  |
| EXECUTIVE SUMMARY       |  | Appendix 1 of this report presents the Quarter 2 of 2023-24 Key<br>Performance Indicator (KPI) report for Strategic Priorities 1 and 2.   |                 |                      |  |  |  |
|                         | Unless otherwis based on the fo  | se stated, the perfe  | ormance status  | of our KPIs is       |  |  |  |
|                         | Succeeding: the  | e KPI is achieving  | its target.     |                      |  |  |  |
|                         | <u>Near target:</u> the target.  | KPI is less than 2  | 10% away from   | achieving its        |  |  |  |
|                         | Needs improver<br>its target.  | <u>ment:</u> the KPI is a   | t least 10% awa | ay from achieving    |  |  |  |
|                         | Performance o  | overview: top leve  | el              |                      |  |  |  |
|                         | Table 1: perform   | nance status over   | view 2023/24 -  | Quarter 2            |  |  |  |
|                         |  | Succeeding  | Near target     | Needs<br>improvement |  |  |  |
|                         | Priority 1   | 11  | 5               | 3                    |  |  |  |
|                         | Priority 2   | 6   | 8               | 0                    |  |  |  |
|                         | <ul> <li>KPI 1.1.2<br/>report, pa</li> <li>KPI 1.2.4<br/>(exception</li> <li>KPI 1.2.4<br/>apparatu</li> </ul> | <ul> <li>kPIs with a status of "needs improvement" are:</li> <li>KPI 1.1.2.2 – Number of dwelling fire fatalities (exception report, page 7)</li> <li>KPI 1.2.4.1 – Number of fire safety checks completed (exception report, page 9)</li> <li>KPI 1.2.4.1 – Number of non-domestic false alarms due to apparatus per 10,000 rateable premises (exception report, page 11)</li> </ul> |                 |                      |  |  |  |

|   | 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<br>IMPLICATIONS                | Existing budget and staffing is sufficient to deliver the required improvements   |
| EQUALITY RISKS AND<br>BENEFITS ANALYSIS | N/A   |
| APPENDICES                              | A. Community Safety Committee 2023-24 quarter two performance report  |
| BACKGROUND<br>PAPERS                    | DSFRA/21/9 Strategic Policy Objectives 2021-22  |

**APPENDIX A TO REPORT CSC/23/13** 





# Community Safety Committee

# 2023/24 quarter two performance report

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

Alice Murray, Strategic Analyst

Devon & Somerset Fire & Rescue Service



### DSFRS Community Safety Committee

2023/24 Quarter Two Performance Report



2023/24 Quarter Two Performance Report

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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   |
| Objective 2.4: we will support the effective delivery of our frontline services by seeking improvements to our operational resourcing, mobilising and communications functions.14                                  |
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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     | e KPI (key performance indicator) is achieving its target. |
|----------------|---------|--|
| Near target    | The     | e KPI is less than 10% away from achieving its target.     |
| Needs improvem | ent The | e 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 2023/24 Q2

|            | Succeeding | Near target | Needs improvement |
|------------|------------|-------------|-------------------|
| Priority 1 | 11         | 5           | 3                 |
| Priority 2 | 6          | 8           | 0                 |

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 1.2.4.1 Number of fire safety checks completed (exception report, page 9)
- KPI 1.2.4.1 Number of non-domestic false alarms due to apparatus per 10,000 rateable premises (exception report, page 11)

# 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. | Aim                |  |
|---------|---|---------|---|---------|--------------------|--|
|         | Number of dwelling fire fatalities in reporting quarter                   | 1       | 0   | NA      | Lower<br>is better |  |
|         | Number of dwelling fire fatalities in last 12 months vs five-year average | 4       | 6   | -33.3%  | Lower<br>is better |  |
|         |   |         | Requires improvement: in<br>exception due to fire-related death<br>in reporting quarter |         |                    |  |

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

| KPI Ref  | Description  | Current | Target | % Diff. | Aim                |
|----------|--|---------|--------|---------|--------------------|
| 1.1.3.2  | Rate of dwelling fire hospitalisations per 100,000 population                                | 4.32    | 4.21   | 2.7%    | Lower is<br>better |
| 1.1.11.2 | Rate of secondary fires per 100,000 population   | 91.77   | 90.81  | 1.1%    | Lower is<br>better |
| 1.1.14.2 | Rate of people killed or seriously injured in road traffic collisions per 100,000 population | 25.73   | 25.66  | 0.3%    | Lower is<br>better |

Table 4: KPIs that are achieving target

| KPI Ref  | Description   | Current | Target | % Diff. | Aim                 |
|----------|---|---------|--------|---------|---------------------|
| 1.1.1.2  | Rate of dwelling fires attended per 100,000 population  | 49.93   | 52.02  | -4.0%   | Lower<br>is better  |
| 1.1.4.1  | Number of home fire safety visits completed   | 10,498  | 9,000  | 16.6%   | Higher<br>is better |
| 1.1.6.1  | Percentage of targeted home safety visits meeting two or more risk criteria                                       | 62.1%   | 60.0%  | 2.1%    | Higher<br>is better |
| 1.1.8.2  | Rate of other primary fires per 100,000 population (excludes dwellings and non-domestic premises)                 | 43.83   | 46.23  | -5.2%   | Lower<br>is better  |
| 1.1.10.2 | Rate of other primary fire hospitalisations per 100,000 population (excludes dwellings and non-domestic premises) | 0.52    | 0.53   | -3.0%   | Lower<br>is better  |
| 1.1.12.2 | Rate of deliberate fires per 100,000 population   | 74.65   | 80.50  | -7.3%   | Lower<br>is better  |

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



| KPI Ref  | Description  | Current   | Target | % Diff. | Aim                |
|----------|--|---|--------|---------|--------------------|
| 1.1.13.2 | Rate of road traffic collisions per 100,000 population                 | 44.40   | 46.66  | -4.8%   | Lower<br>is better |
| 1.1.9.2  | Number of other fire fatalities in reporting quarter                   | 0   | 0      | NA      | Lower<br>is better |
|          | Number of other fire fatalities in last 12 months vs five-year average | 1   | 1      | NA      | Lower<br>is better |
|          | Other fires fatality performance status                                | Succeeding: both reporting<br>quarter and 12-month<br>performance on target |        |         |                    |

# 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 5: KPIs that are requiring improvement

| KPI Ref | Description  | Current | Target | % Diff. | Aim                 |
|---------|--|---------|--------|---------|---------------------|
| 1.2.4.1 | Number of fire safety checks completed   | 1,196   | 1,500  | -20.3%  | Higher<br>is better |
| 1.2.5.4 | Rate of non-domestic false alarms per 10,000 rateable premises (hereditaments) | 276.89  | 248.27 | 11.5%   | Lower is<br>better  |

Table 6: KPIs that are near to achieving target

| KPI Ref | Description  | Current | Target | % Diff. | Aim                 |
|---------|--|---------|--------|---------|---------------------|
|         | Rate of non-domestic premises fires per 10,000 rateable premises (hereditaments) | 58.61   | 57.54  | 1.8%    | Lower is<br>better  |
| 1.2.6.1 | Percentage of statutory consultations completed to required timescales           | 98.7%   | 100.0% | -1.3%   | Higher<br>is better |

Table 7: KPIs that are achieving target

| KPI Ref | Description  | Current | Target  | % Diff. | Aim                 |
|---------|--|---------|---|---------|---------------------|
| 1.2.2.2 | Number of non-domestic fire fatalities in reporting quarter                                      | 0       | 0   | NA      | Lower<br>is better  |
|         | Number of non-domestic fire fatalities in last 12 months vs five-year average                    | 1       | 1   | 0.0%    | Lower<br>is better  |
|         | Non-domestic fires fatality performance status   | quart   | Succeeding: both reporting<br>quarter and rolling 12-month<br>figures are within target |         |                     |
| 1.2.3.2 | Rate of non-domestic premises fire hospitalisations per 10,000 rateable premises (hereditaments) | 0.94    | 1.14  | -18.1%  | Lower<br>is better  |
| 1.2.4.2 | Number of fire safety audits completed (short and full)  | 416     | 240   | 73.3%   | Higher<br>is better |



# Exception report: number of dwelling fire fatalities

This KPI reports on the number of fire-related fatalities in dwellings located within the Devon and Somerset Fire and Rescue Service area.

#### Analysis

The KPI is in exception due to a fire-fatality being recorded within the reporting quarter. Performance for the 12-month period remains below the five-year average.

Table 8: performance status – number of dwelling fire fatalities

| KPI Ref | Description   | Current   | Target | % Diff. | Aim                |
|---------|---|---|--------|---------|--------------------|
| 1.1.2.2 | Number of dwelling fire fatalities in reporting quarter                   | 1   | 0      | NA      | Lower<br>is better |
|         | Number of dwelling fire fatalities in last 12 months vs five-year average | 4   | 6      | -33.3%  | Lower<br>is better |
|         | Dwelling fires fatality performance status                                | Requires improvement: in<br>exception due to fire-related death<br>in reporting quarter |        |         |                    |

Details of the incident are outlined below.

Incident date and time: 18/09/2023 02:37

Location: Plymouth, Devon

Property type: Purpose built flat in high-rise premises

Victim age and sex: 73 years, female

First response time: 9 mins 20 secs (time of emergency call to time of arrival on scene)

#### **Details:**

Fire control received a call from an alarm monitoring company to a fire alarm sounding at the property. Two fire engines from Greenbank and an aerial ladder platform from Crownhill were mobilised to the incident as the initial response. On arrival, the Incident Commander confirmed a fire within flat on the ninth floor and requested the full pre-determined attendance for a high-rise fire at the address.

Two breathing apparatus wearers were committed to the flat where they located a female occupant in the bedroom. They rescued the female to the lobby area and carried out first aid until the arrival of the ambulance service.

The fire had been extinguished by the sprinkler system that was present in the property. This had operated as intended and had prevented further escalation of the fire, restricting it to the room of origin. Had the sprinkler system not been in place and functional, there is potential that the fire may have developed further, potentially putting more people at risk.



It is believed that the fire began when smoking materials came into contact with clothing and/or bedding. The victim had mobility issues and would have been unable to escape from the fire.

The victim had received a home fire safety visit in June 2017 during which advice was provided and a hard of hearing alarm, fire-retardant bedding and extension leads were offered but declined. At a subsequent visit during August 2018, the victim accepted fire-retardant bedding. During November 2022, another referral was received, initial contact to arrange a home fire safety visit was attempted however this was not successful and a visit was not booked.

#### Actions

A fatal fire review has been conducted. This involved looking into all aspect of the incident and our interaction with the victim. As a result, learnings have been taken away and monthly Quality Assurance continue to take place within the Home Safety Team to ensure the correct action has been taken on cases, alongside refresher training. In addition, procurement is ongoing for a new IT system which will help to better prioritise cases, and additional resource is being considered within the Home Safety area.



# Exception report: number of fire safety checks (FSCs) completed

This KPI reports on the number of FSCs completed. FSCs provide a basic assessment of compliance with fire safety regulations in business premises and are primarily delivered by wholetime crews. If significant issues are identified, an FSC may be escalated to a full fire safety audit (FSA) which is delivered by specialist Fire Safety Officers.

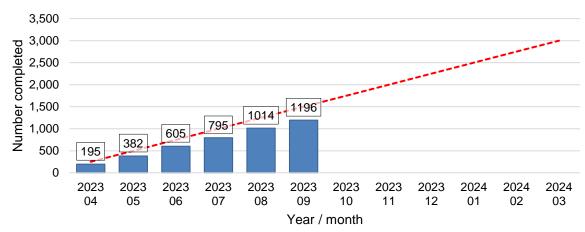
### Analysis

The KPI is in exception due to the number of FSCs completed being more than 10% below target.

 Table 9: performance status – number of fire safety checks completed against target

| KPI Ref | Description                            | Current | Target | % Diff. | Aim                 |
|---------|--|---------|--------|---------|---------------------|
| 1.2.4.1 | Number of fire safety checks completed | 1,196   | 1,500  | -20.3%  | Higher<br>is better |

Table 10: performance status - cumulative count of fire safety checks completed against target by month



FSCs completed ---- Target

Following investigation (based on April to August performance), it has been identified that the deficit is due to two main factors:

 During the 2022/23 financial year, delivery of fire safety checks was supplemented by non-station-based personnel (trainee Fire Safety Inspection Officers). As these personnel have become competent to deliver more complex activity, their time has been utilised to deliver FSAs rather than FSCs.

> April to August 2022/23 634 jobs, 1658 hours April to August 2023/24 143 jobs (-491 jobs), 381 hours (-1277 hours)

2) Stations have also completed fewer FSCs compared to the same period last year.

April to August 2022/23 982 jobs, 995 hours April to August 2023/24 864 jobs (-118 jobs), 856 hours (-139 hours)

#### Actions

The reason for the drop in delivery of fire safety checks by operational personnel is being explored to identify where improvements may be made.

Previously, Fire Risk Event Data was used to identify premises that required an FSC. As the premises within the FRED data was exhausted, a process of self-referral was introduced. This methodology is being reviewed and may be amended if it is found that it is not effective.



# Exception report: number of non-domestic false alarms due to apparatus per 10,000 rateable premises

This KPI reports on the number of false alarms due to fire or smoke detections apparatus in nondomestic premises located within the Devon and Somerset Fire and Rescue Service area. False alarms can occur for a number of reasons but are most commonly related to system faults, dust or insects entering the equipment or human error.

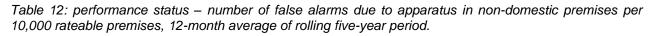
### Analysis

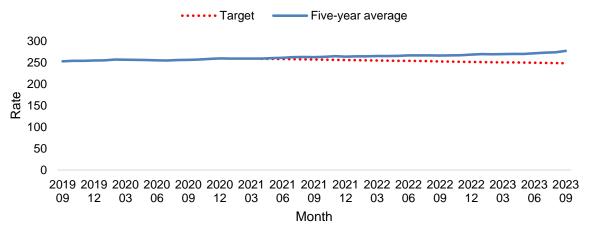
The KPI is in exception due to the rate of incidents being more than 10% above target.

Table 11: Performance status – rate of non-domestic false alarms due to apparatus per 10,000 rateable premises

| KPI Ref | Description  | Current | Target | % Diff. | Aim                |
|---------|--|---------|--------|---------|--------------------|
| 1.2.5.4 | Rate of non-domestic false alarms per 10,000 rateable premises (hereditaments) | 276.89  | 248.27 | 11.5%   | Lower is<br>better |

There has been an upward trend in number of false alarms in non-domestic premises over the past five-years. While the duration of these incidents is generally short, there is still a cost implication to the service, particularly where on-call resources are utilised. Additionally, wholetime crews can be drawn away from delivery of essential community safety activities and attendance at genuine emergencies.





The increase is most evident during the past three years; however, it is likely that the COVID-19 pandemic influenced a decrease in the number of incidents during the first lockdown (26<sup>th</sup> March 2020 to 15<sup>th</sup> June 2020 - the date at which non-essential shops were allowed to reopen).

Table 13 shows the annual number and rate of false alarm incidents that were attended for years ending September. There has been an 18% increase in incidents between September 2019 and September 2023.



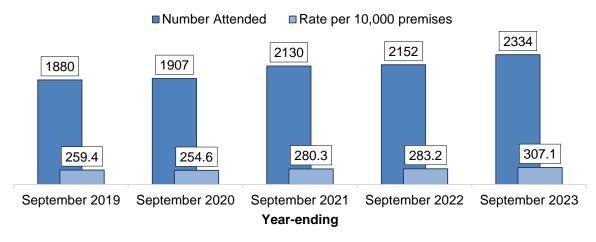


Table 13: Number and rate of false alarms due to apparatus in non-domestic premises by year-ending September

The cause of the increase is being investigated however it has been identified that processes that were in place to engage with premises that had repeat false alarms had not been followed. This was partially due to a breakdown in the provision of data to support the identification of these premises.

While this may have had some impact, it is likely that there are other factors at play. Nationally, when considering all false alarms due to apparatus<sup>2</sup>, the pattern<sup>3</sup> in attendances at these incidents has been similar to that of DSFRS. This supports the notion that failure to follow policy is not the sole cause of the increase.

# Actions

Work is being undertaken to review our approach to repeat actuations with a focus on educating responsible parties. There is also potential to charge for attendances at premises that have repeat false alarms. Data provision to support call reduction work has been improved which will support more effective engagement.

Additionally, work is ongoing to review our attendance policy with a view to extending the nonattendance periods at non-residential premises.

<sup>&</sup>lt;sup>2</sup> Including those in both non-domestic and residential premises

<sup>&</sup>lt;sup>3</sup> Based on financial years 2018/19 to 2022/23.

# 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 14: KPIs that are requiring improvement

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

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

| KPI Ref  | Description   | Current | Target | % Diff. | Aim              |
|----------|---|---------|--------|---------|------------------|
| M2.1.4.1 | Percentage of operational risk information in date - level 3<br>SSRI        | 88.7%   | 94.0%  | -5.3%   | Higher is better |
| M2.1.4.2 | Percentage of operational risk information in date - level 4 tactical plans | 97.1%   | 98.0%  | -0.9%   | Higher is better |

#### Table 16: KPIs that are achieving target

| KPI Ref  | Description                               | Current | Target | % Diff. | Aim              |
|----------|---|---------|--------|---------|------------------|
| M2.1.1.1 | Number of local exercises completed       | 72      | 36     | 100.0%  | Higher is better |
| M2.1.1.2 | Number of crossborder exercises completed | 16      | 12     | 33.3%   | Higher is better |
| M2.1.1.3 | Number of national exercises completed    | 15      | 1      | 1400.0% | Higher is better |

# 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 17: KPIs that are requiring improvement

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

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

| KPI Ref  | Description   | Current | Target | % Diff. | Aim              |
|----------|---|---------|--------|---------|------------------|
| M2.2.3.1 | Percentage of dwelling fires attended within 10 minutes of call answer          | 69.3%   | 75.0%  | -5.7%   | Higher is better |
| M2.2.3.2 | Percentage of road traffic collisions attended within 15 minutes of call answer | 73.7%   | 75.0%  | -1.3%   | Higher is better |

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#### Table 18: KPIs that are achieving target

| KPI Re | f Description                           | Current | Target | % Diff. | Aim |
|--------|---|---------|--------|---------|-----|
|        | 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 19: KPIs that are requiring improvement

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

#### Table 20: KPIs that are near to achieving target

| KPI Ref  | Description   | Current | Target | % Diff. | Aim                 |
|----------|---|---------|--------|---------|---------------------|
| M2.4.1.1 | Risk prioritised pump availability (percentage)                                       | 97.4%   | 98.0%  | -0.6%   | Higher is<br>better |
| M2.4.1.2 | Standard pump availability (percentage)   | 77.8%   | 85.0%  | -7.2%   | Higher is better    |
| M2.4.3.1 | Percentage of calls handled within target time (call answer to resource mobilisation) | 87.4%   | 90.0%  | -2.6%   | Higher is better    |
| M2.4.3.3 | Average turnout time for emergency incidents - on-call duty system (median)           | 315     | 300    | 5.0%    | Lower is better     |

Table 21: KPIs that are achieving target

| _        | Description   | Current | Target | % Diff. | Aim             |
|----------|---|---------|--------|---------|-----------------|
| M2.4.3.2 | Average turnout time for emergency incidents - wholetime duty system (median) | 83      | 90     | -7.8%   | Lower is better |

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

Table 22: KPIs that are requiring improvement

| KPI Re | f Description                                | Current | Target | % Diff. | Aim |
|--------|--|---------|--------|---------|-----|
|        | No KPIs are currently requiring improvement. |         |        |         |     |



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#### Table 23: KPIs that are near to achieving target

| KPI Re | Description                                     | Current | Target | %<br>Diff. | Aim |
|--------|---|---------|--------|------------|-----|
|        | No KPIs are currently near to achieving target. |         |        |            |     |

#### Table 24: KPIs that are achieving target

| KPI Ref | Description   | Current | Target | % Diff. | Aim                 |
|---------|---|---------|--------|---------|---------------------|
| 2.8.1.1 | Availability of national resilience assets (percentage) | 100.0%  | 100.0% | 0.0%    | Higher is<br>better |
| 2.8.1.2 | National resilience competencies in date                | 100.0%  | 100.0% | 0.0%    | Higher is<br>better |

# 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 33 priority fire engines in areas that present higher levels risk <u>or</u> demand which 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 89 fire engines located in areas of lower risk or lesser demand, but which are still key to ensuring that we are keeping our communities safe. These are all crewed by on-call or volunteer firefighters and there is an expectation that each fire engine 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.



| REPORT REFERENCE NO.                    | CSC/23/14   |  |  |  |
|---|---|--|--|--|
| MEETING                                 | COMMUNITY SAFETY COMMITTEE  |  |  |  |
| DATE OF MEETING                         | 10 NOVEMBER 2023  |  |  |  |
| SUBJECT OF REPORT                       | HIS MAJESTY'S INSPECTORATE OF CONSTABULARY &<br>FIRE & RESCUE SERVICES (HMICFRS) AREAS FOR<br>IMPROVEMENT ACTION PLAN UPDATE  |  |  |  |
| LEAD OFFICER                            | 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<br>been made against the HMICFRS Areas for Improvement action<br>plan since the last update in September 2023. The key highlights<br>are that:                                   |  |  |  |
|   | <ul> <li>One area for improvement (HMI-1.2-202204 –<br/>Safeguarding Training) is currently marked as 'In Progress<br/>– Off Track'. This is due to the following factors:</li> </ul>   |  |  |  |
|   | <ul> <li>The initial training and competency framework have<br/>been completed and are awaiting upload via the ICT<br/>team and the Academy.</li> </ul>   |  |  |  |
| RESOURCE<br>IMPLICATIONS                | Considered within the Action Plan where appropriate.  |  |  |  |
| EQUALITY RISKS AND<br>BENEFITS ANALYSIS | Considered within the Action Plan where appropriate.  |  |  |  |
| APPENDICES                              | A. HMI Community Safety Committee Update  |  |  |  |
| BACKGROUND<br>PAPERS                    | None  |  |  |  |

# **APPENDIX A TO REPORT CSC/23/14**

# HMICFRS ACTION PLAN – COMMUNITY SAFETY COMMITTEE UPDATE

# 1. INTRODUCTION

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

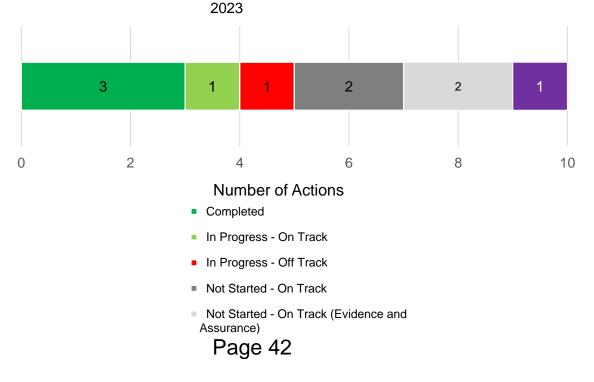
2.1. Table 1 lists the Areas For Improvement linked to the Community Safety Committee and their individual implementation status.

### Table 1:

| Reference          | Description   | Target<br>Completion | Status                     |
|--------------------|---|----------------------|----------------------------|
| HMI-1.2-<br>202203 | The service should evaluate its prevention activity so it understands what works. | 29/02/2024           | In Progress<br>(On Track)  |
| HMI-1.2-<br>202204 | Safeguarding training should be provided to all staff.                            | 30/04/2024           | In Progress<br>(Off 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 - November



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

| Table 2   | Table 2: Summary of progress against the individual actions |                           |                            |                 |               |                          |
|---|---|---------------------------|----------------------------|-----------------|---------------|--------------------------|
| Areas F   | Areas For Improvement (Community Safety Committee)          |                           |                            |                 |               |                          |
| Not<br>started<br>(on<br>track)                                 | Not started<br>(off track)                                  | In progress<br>(on track) | In progress<br>(off track) | Completed       | Closed        | No<br>Longer<br>Required |
| $ \begin{array}{c} 4\\(\rightarrow \text{ at}\\4) \end{array} $ | 0<br>(→ at 0)   | 1<br>(↓ from 3)           | 1<br>(↑ from 0)            | 3<br>(↑ from 2) | 0<br>(→ at 0) | 1<br>(→ at 1)            |

\* 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.

# 3. AREAS FOR IMPROVEMENT WHICH ARE 'OFF-TRACK'

3.1. Table 3 below outlines the areas for improvement which are currently marked as 'In Progress – Off Track'.

# Table 3:

| Area for Improvement  | Status                     |  |  |  |
|---|----------------------------|--|--|--|
| HMI-1.2-202204 – Safeguarding Training  | In Progress – Off<br>Track |  |  |  |
| Factors impacting delivery  |                            |  |  |  |
| The initial training and competency framework have been completed and are awaiting upload via the ICT team and the Academy. |                            |  |  |  |

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