



Performance Report

Audit and Performance Review
Committee: Quarter 2 - 2016



About this report

In this performance report for Devon & Somerset Fire & Rescue Service we examine the dataset for the full year October 2016 to September 2016.

The report will focus on performance against the three service priorities; Public Safety, Staff Safety and Efficiency and Effectiveness.

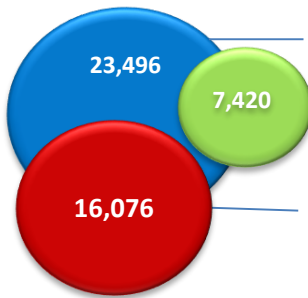
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Executive Summary

Priority: Public Safety - Response

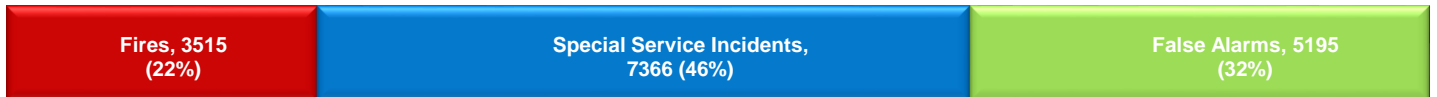


Emergency Calls Handled - in the 12 month period from Oct-15 to Sep-16 Devon and Somerset Fire and Rescue Service handled 23,496 emergency calls in the DSFRS area.

Emergency Calls Not Attended - of these calls 7,420 (32%) did not result in attendance at an incident. For example, a call may be challenged if it is thought to be malicious or a response may be stood down as it is no longer deemed necessary.

Emergency Calls Attended - of these calls 16,076 (68%) resulted in attendance at an incident.

The information below gives some context around emergency response activities.



Incidents Attended - Fires



- Primary, 2256 (14%)
- Chimney, 306 (2%)
- Secondary, 953 (6%)

Fire incidents are broken down into three high level categories:

Primary fires include all fires in non-derelict buildings (excluding where confined to a chimney), outdoor structures, non-abandoned vehicles or any fire involving death, injury, rescue or more than five appliances.

Secondary fires include the majority of outdoor fires such as grassland or refuse (unless involving death, injury or rescue), derelict buildings and abandoned vehicles.

Chimney fires include all fires in chimneys that did not extend beyond the chimney itself.

Incidents Attended - Special Service



- RTC, 1402 (9%)
- Medical Emergency, 2998 (19%)
- Other, 2966 (18%)

Special service incidents are broken down into three high level categories:

Road Traffic Collisions (RTCs) include all collisions attended by DSFRS which did not result in a fire. DSFRS does not attend all RTC incidents and figures only represent those which were attended by the Service.

Medical emergencies include **Co-responder incidents** for which DSFRS provide first response on behalf of the South West Ambulance Service Trust (SWAST). There are 19 co-responder stations in DSFRS which use specialist vehicles and equipment. NB due to the Control Room changes in April 2016 these incidents are recorded differently

Other incidents include flooding, rescue from height / confined space, animal rescue

Incidents Attended - False Alarms



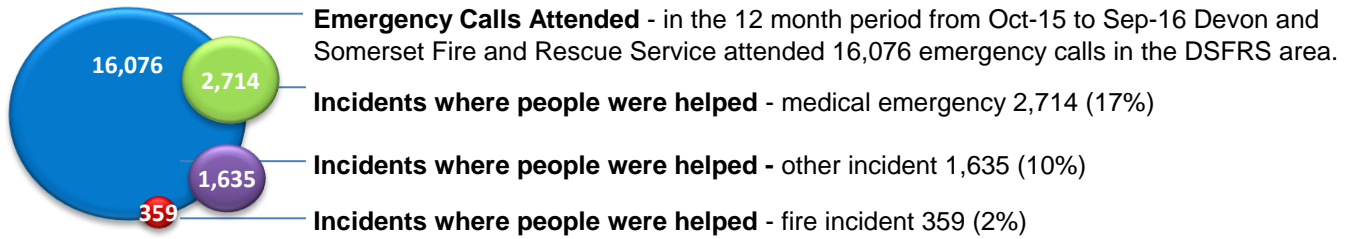
- Malicious, 104 (1%)
- Good Intent, 1449 (9%)
- Apparatus, 3642 (22%)

False alarm incidents are broken down into three high level categories:

Malicious False Alarms (MFAs) are calls made with the intention of getting the Service to respond to a non-existent incident.

False Alarm Good Intent (FAGIs) are calls made in the belief that the Service would attend an emergency incident. For example, smoke in the distance may be a bonfire that is under control.

Automatic Fire Alarm (AFAs) are calls initiated by fire alarm or fire-fighting equipment operating, this includes accidental initiation of alarm equipment.



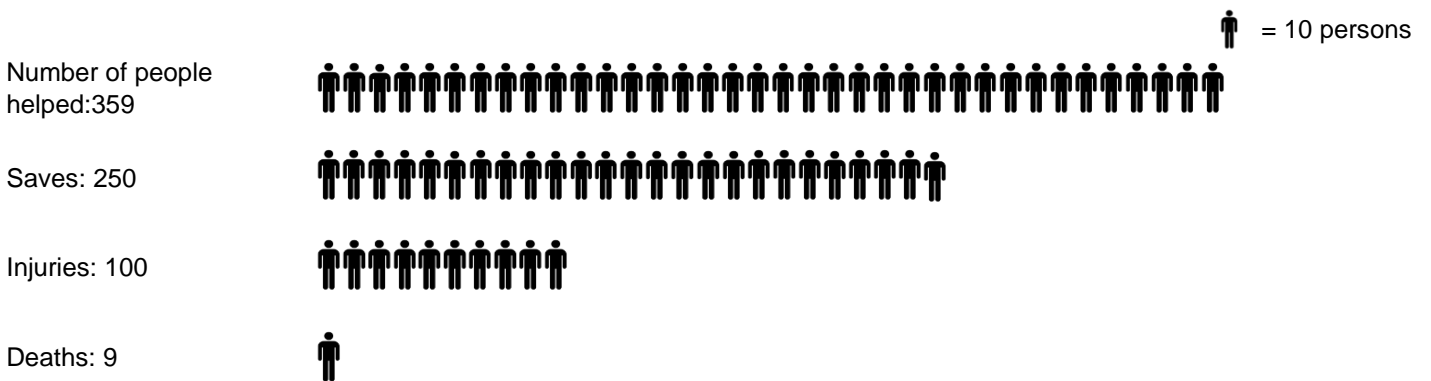
The information below gives some context around the number of people the Service directly helps at emergencies by incident type.

Fire Related Saves, Injuries and Deaths

How often does the Service have to help people at fire incidents?



What happened to those who needed help at the 359 fire incidents?



What is the Service doing to reduce fire incidents, injuries and deaths?

Prevention Activities

Between October 2015 and September 2016 the Service conducted more than 10,000 targeted Home Safety Visits to those identified as having the most to benefit from our expert guidance and support. We work closely with our colleagues in other agencies and third sector organisations to build partnerships that enable us to ensure that our resources are used to provide maximum benefit to the community.

We engage with our communities in a variety of ways including educating children and young people through schools talks and structured programmes such as Fire Cadets, Phoenix and FireSetters. Between October 2015 and September 2016 the Service undertook over 4,000 activities to improve public safety.

Protection Activities

DSFRS has a statutory obligation to ensure that non-domestic premises and public events are compliant with fire safety regulations. Between October 2015 and September 2016 the Service conducted over 3,000 fire safety checks, over 600 fire safety audits and over 6,500 other protection activities to ensure public safety.

The Quarter 2 2016 Performance Report is a mid-year report and provides an opportunity to review the performance of the Service over the past 12 months. The 8 primary measures have all held steady or improved, except the number of fires where people work and visit. More detail is given on the possible reasons for this increase elsewhere in the report.

Fire Deaths

The first two quarters of 2016/17 have shown no significant reduction in fire deaths, though it is noted that we have seen an increase in fire-related deaths where people work and visit and a decrease in fire related deaths in the home. These deaths are reviewed to ensure that lessons can be learnt, and our understanding of why these tragedies occurred improved, so that activity can be targeted to prevent future incidents. This information links directly with our Community Safety strategy.

Fire Injuries

There is a continued focus on ensuring that a true picture of fire injuries is understood. In the previous performance reports, we described how the number of fire injuries may have increased following the introduction of First Person On Scene (FPOS) training, which directs staff to ensure that people attend hospital for a check-up, even if their symptoms appear minor. A pilot is now being carried out in the Service to make follow-up visits to people who have been injured in fires to improve customer care after the event, to check our data on the causes of both their fire and the associated injuries, to identify positive and negative aspects of our Service Delivery and to further promote the uptake of home fire safety visits. The outcomes of this pilot will be reviewed and acted upon.

Incident Data Capture

Previous performance reports indicated that the ICT department would be embarking on a development with Service Delivery staff aiming to reduce staff time spent on data entry and improving data consistency with a single streamlined process to capture incident data. This project has now been fully scoped and a strategic outline case for the project prepared. It is anticipated that this will commence in the near future.

Sickness Update

Sickness continues to be a focus for the organisation with varied performance in different staff groups. A new sickness reporting tool (introduced Sept 2016) provides managers with better information on their teams sickness absence. Vocational firefighter fitness testing has now been approved and we are investing in the required equipment to allow these tests to be carried out at various locations throughout the Service to relieve the burden of our staff travelling long distances.

Co-responding

This report confirms the trend of increasing medical emergency incidents compared to decreasing primary fire incidents that was noted in the previous quarter. Further collaboration work with our NHS partners is being investigated. In addition we are undertaking a pilot where fire crews are assisting ambulance crews and the police with gaining entry to premises where there is a concern for the occupier's welfare.

The communities we serve and our role within them

Devon & Somerset Fire & Rescue Service is the largest non-metropolitan fire and rescue service in England. We provide prevention, protection and response services across the counties of Devon and Somerset (including Torbay and Plymouth), an area of over 10,000 sq km.

We have 85 fire stations, the second largest number in England and 1,983 staff who work to protect the 1.7 million people who live in our service area. This alongside the additional 400,000 people who visit this wonderful part of the country every year.



Making our communities safer is not just about responding to emergencies. The Service undertakes a variety of proactive activities to reduce the risk to our communities in order to prevent them from being in a situation where they require an emergency response.

Our community safety prevention activities are designed to educate the public to make them safer. There are a range of initiatives delivered by the Service and are targeted towards those in our community who will benefit most from our support. These include Home Safety Visits, Road Traffic Collision (RTC) programmes such as The Honest Truth and Schools Visits.

Understanding our communities is key to enabling our prevention activities to be targeted effectively and the Service works with partner agencies and third sector organisations to ensure that our resources are directed to the places where they are needed most.

Our community safety protection activities are designed to ensure that businesses and events comply with the legislation outlined in the Regulators Code (2015). This includes fire safety checks and audits of commercial premises, building regulation consultations and enforcement activities.

The incident related data that are used in this section of the report are sourced from the Incident Recording System (IRS). The data was sourced on the 21/10/2016.

Measure 1: Deaths as a result of fires where people live

A fire related death is recorded if the cause of death is directly as a result of fire, even if death occurs after the incident. This is a critical to quality measure and will show as amber or red in the "Against Expected" section if a death has occurred.

Measure Breakdown	3 month (previous)	12 month (previous)	Trend (months)			Against Expected																	
			12	36	60	Oct-15 Sep-16																	
Deaths - All Fires	1 (1)	6 (10)	↓	↓	↓	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Deaths - Accidental Fires	1 (0)	5 (8)	↓	↓	↓	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Deaths - Deliberate Fires	0 (1)	1 (2)	↓	↓	↓	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green

Measure 2: Injuries as a result of fires where people live

A fire injury is recorded if the cause of injury is directly as a result of fire and required hospital treatment. This includes where an injury has occurred as a result of attempts to escape such as falls resulting in injury.

Measure Breakdown	3 month (previous)	12 month (previous)	Trend (months)			Against Expected																	
			12	36	60	Oct-15 Sep-16																	
Injuries - All Fires	15 (8)	67 (82)	↓	↓	↓	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Injuries - Accidental Fires	10 (6)	59 (72)	↓	↓	↓	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Injuries - Deliberate Fires	5 (2)	8 (10)	↓	↑	↑	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green

Measure 3: Fires where people live

All primary fire incidents occurring at domestic premises (does not include sheltered accommodation, hotels etc).

Measure Breakdown	3 month (previous)	12 month (previous)	Trend (months)			Against Expected																	
			12	36	60	Oct-15 Sep-16																	
All Fires	241 (238)	985 (989)	↓	↓	↓	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Accidental Fires	228 (216)	920 (930)	↓	↓	↓	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Deliberate Fires	13 (22)	65 (59)	↑	↓	↓	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green

Measure 4: Fire related deaths where people work, visit and in vehicles

A fire related death is recorded if the cause of death is directly as a result of fire, even if death occurs after the incident. This is a critical to quality measure and will show as amber or red in the "Against Expected" section if a death has occurred.

Measure Breakdown	3 month (previous)	12 month (previous)	Trend (months)			Against Expected																	
			12	36	60	Oct-15 Sep-16																	
Deaths - All Fires	2 (1)	3 (0)	↑	↑	↑	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Deaths - Accidental Fires	2 (0)	2 (0)	↑	↑	↑	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Deaths - Deliberate Fires	0 (1)	1 (0)	↑	↓	↓	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green

Measure 5: Fire related injures where people work, visit and in vehicles

A fire injury is recorded if the cause of injury is directly as a result of fire and required hospital treatment. This includes where an injury has occurred as a result of attempts to escape such as falls resulting in injury.

Measure Breakdown	3 month (previous)	12 month (previous)	Trend (months)			Against Expected																	
			12	36	60	Oct-15 Sep-16																	
Injuries - All Fires	8 (11)	33 (37)	↓	↓	↑	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Injuries - Accidental Fires	7 (10)	28 (30)	↓	↑	↑	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Injuries - Deliberate Fires	1 (1)	5 (7)	↓	↓	↓	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green

Measure 6: Fires where people work, visit and in vehicles

All primary fire incidents in non-domestic premises such as hotels, shops, schools, outdoor structures and in vehicles (including where a fire has occurred as a result of a collision).

Measure Breakdown	3 month (vs previous)	12 month (vs previous)	Trend (months)			Against Expected																	
			12	36	60	Oct-15 Sep-16																	
All Fires	387 (335)	1271 (1286)	↓	↑	↑	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Accidental Fires	274 (243)	923 (1004)	↓	↑	↑	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Deliberate Fires	113 (92)	348 (282)	↑	↑	↑	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green

Measure 1: Deaths as a result of fires where people live

There have been 6 fire-related deaths where people live in the 12 month reporting period from Oct-15 to Sep-16, a -40% change compared to the previous 12 month period (10 deaths). There has been 1 fire-related deaths where people live in the current quarter (Jul-16 to Sep-16), a 0% change compared to the previous quarter (1 deaths).

In the current quarter there have been 2 months within normal range, 1 within monitor range, 0 within action range.
Trends: long-term (60 months) - DOWN; medium-term (36 months) - DOWN; short-term (12 months) - DOWN

Measure 2: Injuries as a result of fires where people live

There have been 67 injuries at fires where people live in the 12 month reporting period from Oct-15 to Sep-16, a -18.3% change compared to the previous 12 month period (82 injuries). There have been 15 injuries at fires where people live in the current quarter (Jul-16 to Sep-16), a +87.5% change compared to the previous quarter (8 injuries).

In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range.
Trends: long-term (60 months) - DOWN; medium-term (36 months) - DOWN; short-term (12 months) - DOWN

Measure 3: Fire where people live

There have been 985 fires where people live in the 12 month reporting period from Oct-15 to Sep-16, a -1.1% change compared to the previous 12 month period (989 fires). There have been 241 fires where people live in the current quarter (Jul-16 to Sep-16), a +1% change compared to the previous quarter (238 fires).

In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range.
Trends: long-term (60 months) - DOWN; medium-term (36 months) - DOWN; short-term (12 months) - DOWN

Measure 5: Fire related injures where people work, visit and in vehicles

There have been 33 injuries at fires where people work and visit and in vehicles in the 12 month reporting period from Oct-15 to Sep-16, a -10.8% change compared to the previous 12 month period (37 injuries). There have been 8 injuries at fires where people work and visit and in vehicles in the current quarter (Jul-16 to Sep-16), a -27.3% change compared to the previous quarter (11 injuries).

In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range.
Trends: long-term (60 months) - UP; medium-term (36 months) - UP; short-term (12 months) - DOWN

Measure 6: Fires where people work, visit and in vehicles

There have been 1271 fires where people work and visit and in vehicles in the 12 month reporting period from Oct-15 to Sep-16, a -1.2% change compared to the previous 12 month period (1286 fires). There have been 387 fires where people work and visit and in vehicles in the current quarter (Jul-16 to Sep-16), a +15.5% change compared to the previous quarter (335 fires).

In the current quarter there have been 2 months within normal range, 0 within monitor range, 1 within action range.
Trends: long-term (60 months) - UP; medium-term (36 months) - UP; short-term (12 months) - DOWN

Measure 4: Fire related deaths where people work, visit and in vehicles

There have been 3 fire-related deaths where people work and visit and in vehicles in the 12 month reporting period from Oct-15 to Sep-16, a +100% change compared to the previous 12 month period (0 deaths). There have been 2 fire-related deaths where people work and visit and in vehicles in the current quarter (Jul-16 to Sep-16), a +100% change compared to the previous quarter (1 deaths).

In the current quarter there have been 2 months within normal range, 0 within monitor range, 1 within action range.
Trends: long-term (60 months) - UP; medium-term (36 months) - UP; short-term (12 months) - UP

How is DSFRS improving performance?

Reducing fires in the home and related injuries and deaths

Related headlines:

- One fire-related deaths where people live in Q2 2016
- Slight Increase in fires injuries where people live in Q2 2016
- Decrease in fires where people live in Q2 2016

What we are doing to improve performance:

Home safety visits

A business case has been taken to and agreed by the Senior Leadership team following the Home Safety Pilot. This new approach will allow for a continued increase in the number of visits carried out and the quality of those visits. This approach is underpinned with data provided by DSFRS Business Intelligence team to allow targeting of those households most at risk from fire. Recruitment is being progressed seeking a Home Safety Manager and admin assistant to take the project forward across the service.

In East Devon co-responders are being used to identify a vulnerable person/s and generate home safety referrals as appropriate. Those staff responding to an incident will use their discretion to return back to a location if they feel a referral would be appropriate.

The project in North Devon for non-operational fire officers undertaking home safety visits has now been running for 6 months, staff have been working partnership with local housing officers to reach hard to reach vulnerable groups who have previously been hard to engage with, this has resulted in advice given and significant benefits of sign posting follow up inspections. TTVS (The Council for Voluntary Services for the Torridge District) has been funded to undertake a certain number of home safety visits in hard to reach rural areas that have previously not been visited. Funding is based on meeting specified performance figures.

In South Devon the Rogue Landlords initiative is ongoing and officers are working through the caseload. West Devon have experienced issues with automated fire alarms and minor incidents at warden controlled premises owned by Plymouth Community Homes. A series of talks with Age Concern to the clients in these premises have been undertaken. West Devon are working on a Post Brexit hate crime initiative with Polish advocates. They are also working on a Unite student accommodation initiative on prevention campaigns, this is mainly centred on cooking fires; this was identified by operational crew.

In East Somerset a pilot is being established with a leading housing provider, for DSFRS to provide training to their staff to identify risks and hazards in the home, and either conduct low level home fire safety checks on our behalf, or make referrals for DSFRS staff to complete. The housing providers are also distributing DSFRS safety leaflets with all induction packs for their tenants. These housing providers are aware of our 'at risk' groups and prioritise them.

Partnership Working

Across the authority partnership working is a key part of the prevention activity undertaken. The partnership register continues to grow with new groups now on board. The data sharing message is being taken to strategic partnerships which in turn is opening up opportunities with sharing resources with other services.

East Devon group has celebrated its 65th partnership agreement and received the 1000th home safety referral from partner agencies. The partnership with Hospice in Exeter was graded "Outstanding" by the Care Quality Commission; this has given evidence to forge ahead with other organisations that have been identified as gold standard.

North Devon are working with partners to design a multi-agency protocol which will bring together agencies, share understanding and direct and coordinate action to improve partnership working in support of hoarders. In North Devon engagement activity has been undertaken with town and parish councils that are further away from our resources, North Devon now actively feed information relating to prevention and protection activity on a monthly basis into council publications.

South Devon continue partnership working and are an active partner in the revised and reinvigorated Community Safety Partnership. There is some concern that Torbay Council budget reduction may compromise ability to continue some partnership working however DSFRS is working positively and continuing dialogue with the council.

Reducing fires in the home and related injuries and deaths continued...

Partnership Working (cont)

West Devon have created a new partnership with the Hospital Discharge team at Mount Gould Hospital in Plymouth to provide support to patients at the point at which they are discharged.

Somerset East have been working with Avon & Somerset Police and sharing intelligence to undertake home fire safety visits at properties which are known to house vulnerable people who have interactions with the Police. Joint Partnership arrangements have been reached with Mendip, Chard and Yeovil one teams to enhance and target activity. A pilot is being established with East Somerset District nursing to identify people returning from hospital treatment and that fall within DSFRS 'at risk' groups. Again, training will be provided to allow the team to undertake low level checks before referring to East Somerset Group.

West Somerset have started a rolling 2 year program of training for 600 mental health workers across Somerset, after a partnership agreement was put in place following fatal fires in Somerset.

West Somerset are also working with GP federations to enable 'GP Champions' at each practice to generate referrals.

Other Prevention Work

At an authority level, the DSFRS Safeguarding team works with adult and children's safeguarding boards with the aim to provide organisational consistency, maintaining links with local groups but also providing higher subject matter expertise. The clear vision is for safety in respect of the organisation, firefighters/staff and members of the public.

For the first time DSFRS education team have received a full years' worth of returns from key stages 1 & 2 schools talks.

East Somerset are recruiting councillors from each Town and Parish Council within the group area to become a Community Safety Champion on behalf of DSFRS. This involves promoting fire and home safety to residents within the council areas, signposting those in need to us allowing our teams to provide additional safety and support

Reducing fires where people work, visit and in vehicles and related injuries and deaths

Related headlines:

- Increase in deaths where people work, visit and in vehicles in Q2 2016
- Increase in fires where people work, visit and vehicles in Q2 2016
- Slight decrease in fire-related injuries where people work, visit and in vehicles in Q2 in 2016

What we are doing to improve performance:

DSFRS are working closely with regional services, through Chief Fire Officers Association, and looking at policy and procedures with a view to developing contacts within the Southern region to prevent duplication of effort and share best practice.

The Business Safety team at Service Headquarters hold regular meetings with Business Safety leads in groups to share best practice and run regular CPD events to give messages and expectations of the service to front line staff.

The service is using new datasets to better develop a better targeting strategy so that those premises that need more assistance can be given help and advice to reduce their risk of fire.

A campaign helping support owners of heritage buildings with Fire Safety advice and guidance following the recent serious fire in Exeter is being run and its effects should be felt in the next quarter.

Local teams across Devon & Somerset continue to provide planning and event management advice and support for events in the area; such as 'Radio One's Big Weekend' (nr Exeter), 'MTV Crashes Plymouth', Rod Stewart's concert at Home Park, Plymouth and the National Firework Championship.

Sample of Local Initiatives

Two officers from North Devon Group recently visited Lundy island and carried out fire safety audits on the business premises as well as deliver fire safety advice to the population of the island to reduce the risk from fire on the island. They are now working towards a memorandum of understanding to improve the capability of delivering a fire service to the island in case of emergency.

In West Devon work continues with the Community Healthcare Partnership and also with landlords and tenants. West Devon also have a good working relationship with Mount Gould Hospital, they are using existing links with Health premises to give further advice with the emphasis on working together rather than enforcement.

West Devon group have targeted Fire Safety Checks through stations identifying local risk. Call reduction work has seen a reduction in false alarm calls from Automated Fire Alarms within the group area.

East Somerset's operational crews are undertaking Fire Safety inspections to identify areas of concern within local businesses. East Somerset's inspecting officers are targeting licensed premises, and premises identified through organisational data. Looking to the future in 2017 they will look to target sleeping risk premises such as Bed & Breakfasts.

East Somerset have also conducted a variety of compliance events, providing attendees with advice and guidance by working with Residential care homes, charity shops, boarding schools and local groups such as town councils and chambers of commerce.

East Devon group have worked with guest houses and bed and breakfasts to give advice. The team spent considerable time at each visit providing valuable Business Safety information regarding Fire Risk Assessments, Fire Warning System requirements and Emergency Evacuation procedures. This support in managing fire safety within their premises also ensures they are complying with the law. Generally most owners were very receptive, where no detection was found radio inter linked detection was installed that day if possible.

West Somerset have held seminars to assist residential and care homes in improving their fire safety. West Somerset have also worked with other licencing agencies and taken a joint approach to target licenced premises.

Enforcement Action

West Devon have had a successful prosecution and another in the pipeline. West Devon are also working closely with building control teams to ensure new developments meet fire safety standards.

Partnership work with Avon and Somerset Police and Social Services have identified landlords who are providing unfit living conditions for vagrants and homeless in East Somerset resulting in assisting police with the closure of premises under the Fire Safety Order.

South Devon recently prohibited sleeping at the Sherwood Hotel due to breaches of fire safety regulations.

Key Messages

Measure 7: The Service has achieved first response to fire incidents where people live within 10 mins for 72% of eligible incidents during the 12 month reporting period from Oct-15 to Sep-16, a +3.4%pt change compared to the previous 12 month period (68.6% achieved). For the current quarter (Jul-16 to Sep-16) achievement stands at 70.9%, a +2.7%pt change compared to the previous quarter (68.2% achieved).

In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range.
Trends: long-term (60 months) - DOWN; medium-term (36 months) - DOWN; short-term (12 months) - UP

Measure 7a: The Service has achieved first response to fire incidents where people live within 10 mins for 83.9% of eligible incidents within the 10 min response zone during the 12 month reporting period from Oct-15 to Sep-16, a +3.4%pt change compared to the previous 12 month period (80.5% achieved). For the current quarter (Jul-16 to Sep-16) achievement stands at 83.3%, a -2.6%pt change compared to the previous quarter (85.9% achieved).

In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range.

Measure 7b: The Service has achieved full response response to fire incidents where people live within 13 mins for 55.2% of eligible incidents during the 12 month reporting period from Oct-15 to Sep-16, a -1.8%pt change compared to the previous 12 month period (57% achieved). For the current quarter (Jul-16 to Sep-16) achievement stands at 49.6%, a -5.3%pt change compared to the previous quarter (54.9% achieved).

In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range.

Measure 8: The Service has achieved first response to RTC incidents within 15 mins for 75.3% of eligible incidents during the 12 month reporting period from Oct-15 to Sep-16, a -1.4%pt change compared to the previous 12 month period (76.7% achieved). For the current quarter (Jul-16 to Sep-16) achievement stands at 72.9%, a -3.9%pt change compared to the previous quarter (76.7% achieved).

In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range.
Trends: long-term (60 months) - DOWN; medium-term (36 months) - DOWN; short-term (12 months) - UP

Achieving our emergency response standards (ERS)

Related headlines:

- Attendance within 10 minutes to fires where people live up compared to previous quarter
- Full attendance in 13 minutes to fires where people live - slight decrease in achievement of standard
- Attendance within 15 minutes to road traffic collisions (RTCs) down compared to previous quarter

What we are doing to improve performance:

The service has adopted a number of initiatives to improve availability of on-call crews and support DSFRS meeting its response targets. The Community Firefighter initiative has been rolled out service wide following a successful pilot in Somerset. Community Firefighters provide extra resource for stations where required as well as undertaking prevention activities. The use of newly created crewing coordinators/availability resource managers ensures that resources can be directed where they are most needed.

The on-call availability pilot, reflecting a new system for paying Firefighters with the focus on providing greater reliability of cover for stations, continues to be monitored at the stations it is being piloted at.

Sample of Local Initiatives

East Devon are offering greater support for those staff that are due to undertake Incident Command System training; this use of resource will aim to improve pass rates for this course and in turn improve availability.

West Devon Group ran a technical assessment to increase the number of firefighters with Command and Control competencies and thus improve availability of crews. The group are also continuing work to support the on-call watches in the Plymouth fire stations. West Devon have also worked closely with partners to ensure that following the adoption of a new road scheme at Derriford hospital response times to the hospital can be maintained and improved.

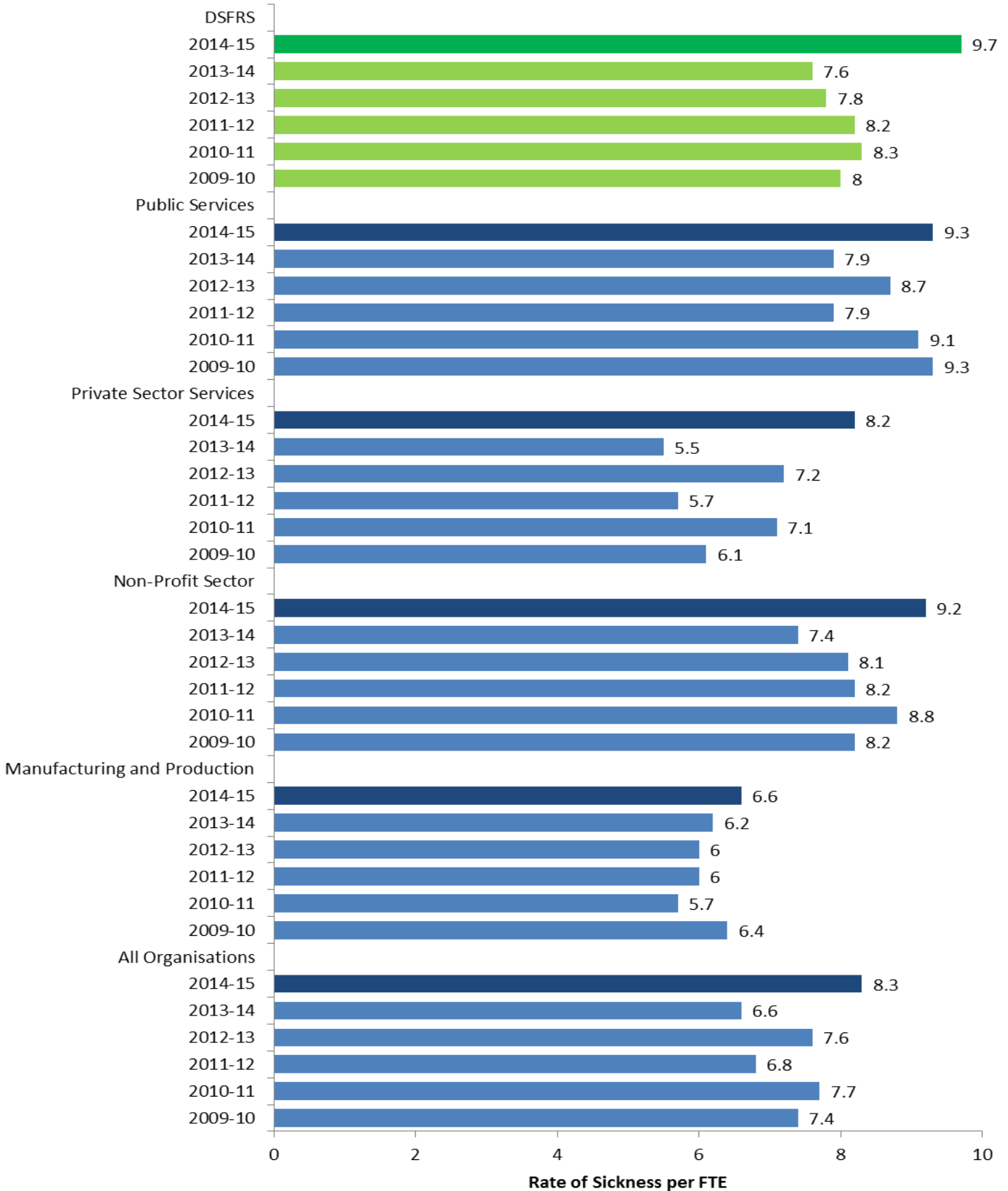
South Devon have seen 8 of their 13 stations improve availability. They are also trying new initiatives to improve recruitment including a door to door campaign within 5 minutes drive of the station.

West Somerset group have monitored their emergency response standards and are actioning local solutions to local problems, for example in response to major roadworks in Bridgwater. Additionally members of the group support team are supporting the community firefighter project by working from on-call stations as well as improved availability and response times this also helps these staff to maintain competencies etc.

Somerset East have had significant success in providing improved cover which in turn improves Emergency response standards across the group. This is continuing with an increasing number of stations boasting 100% cover on the first appliance.

Benchmarking: how we compare to other sectors (2014/15 Annual CIPD Absence Report)

The graph below shows the year end industry data which is sourced from the 2015 Chartered Institute of Personnel and Development (CIPD) annual survey report, compared to DSFRS.



The sickness rate for all staff stands at 8.9 shifts lost per full time equivalent member of staff for the 12 month reporting period from Oct-15 to Sep-16, a -7.7% change compared to the previous 12 month period (9.64 shifts lost). For the current quarter (Jul-16 to Sep-16) the sickness rate stands at 1.85 shifts lost per fte, a -13.9% change compared to previous quarter (2.14 shifts lost). In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range. Trends: long-term (60 months) - UP; medium-term (36 months) - UP; short-term (12 months) - DOWN

The long-term sickness rate for all staff stands at 5.01 shifts lost per full time equivalent member of staff for the 12 month reporting period from Oct-15 to Sep-16, a -14.8% change compared to the previous 12 month period (5.88 shifts lost). For the current quarter (Jul-16 to Sep-16) the sickness rate stands at 0.94 shifts lost per fte, a -30.7% change compared to previous quarter (1.36 shifts lost). In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range. Trends: long-term (60 months) - UP; medium-term (36 months) - UP; short-term (12 months) - DOWN

The sickness rate for uniformed station based staff stands at 6.74 shifts lost per full time equivalent member of staff for the 12 month reporting period from Oct-15 to Sep-16, a -33.9% change compared to the previous 12 month period (10.2 shifts lost). For the current quarter (Jul-16 to Sep-16) the sickness rate stands at 1.49 shifts lost per fte, a -32.3% change compared to previous quarter (2.2 shifts lost). In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range. Trends: long-term (60 months) - UP; medium-term (36 months) - DOWN; short-term (12 months) - DOWN

The short-term uncertified sickness rate for all staff stands at 2.35 shifts lost per full time equivalent member of staff for the 12 month reporting period from Oct-15 to Sep-16, a +1.6% change compared to the previous 12 month period (2.32 shifts lost). For the current quarter (Jul-16 to Sep-16) the sickness rate stands at 0.52 shifts lost per fte, a +2.5% change compared to previous quarter (0.51 shifts lost). In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range. Trends: long-term (60 months) - UP; medium-term (36 months) - UP; short-term (12 months) - DOWN

The short-term certified sickness rate for all staff stands at 1.54 shifts lost per full time equivalent member of staff for the 12 month reporting period from Oct-15 to Sep-16, a +6.4% change compared to the previous 12 month period (1.44 shifts lost). For the current quarter (Jul-16 to Sep-16) the sickness rate stands at 0.38 shifts lost per fte, a +39% change compared to previous quarter (0.28 shifts lost). In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range. Trends: long-term (60 months) - UP; medium-term (36 months) - UP; short-term (12 months) - DOWN

The sickness rate for Control staff stands at 15.34 shifts lost per full time equivalent member of staff for the 12 month reporting period from Oct-15 to Sep-16, a +27.1% change compared to the previous 12 month period (12.07 shifts lost). For the current quarter (Jul-16 to Sep-16) the sickness rate stands at 3.09 shifts lost per fte, a +3.7% change compared to previous quarter (2.98 shifts lost). In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range. Trends: long-term (60 months) - UP; medium-term (36 months) - LEVEL; short-term (12 months) - DOWN

The sickness rate for non-uniformed staff stands at 7.93 shifts lost per full time equivalent member of staff for the 12 month reporting period from Oct-15 to Sep-16, a +0.4% change compared to the previous 12 month period (7.9 shifts lost). For the current quarter (Jul-16 to Sep-16) the sickness rate stands at 1.81 shifts lost per fte, a +29.1% change compared to previous quarter (1.4 shifts lost). In the current quarter there have been 3 months within normal range, 0 within monitor range, 0 within action range. Trends: long-term (60 months) - LEVEL; medium-term (36 months) - LEVEL; short-term (12 months) - DOWN

The sickness rate for uniformed non-station based staff stands at 11.78 shifts lost per full time equivalent member of staff for the 12 month reporting period from Oct-15 to Sep-16, a +15.6% change compared to the previous 12 month period (10.19 shifts lost). For the current quarter (Jul-16 to Sep-16) the sickness rate stands at 2.35 shifts lost per fte, a -19.6% change compared to previous quarter (2.92 shifts lost). In the current quarter there have been 2 months within normal range, 1 within monitor range, 0 within action range. Trends: long-term (60 months) - UP; medium-term (36 months) - UP; short-term (12 months) - DOWN

How is DSFRS improving performance?

Sickness Absence**Related headlines:**

- Rate for all staff down 7.7% vs previous year, all months in Q2 in normal range
- Long-term rate for all staff down 14.8% vs previous year, all months in Q2 in normal range
- Rate for uniformed station staff down 33.9% vs previous year, all months in Q2 in normal range
- Short-term uncertified rate all staff up 1.6% vs previous year, all months in Q2 in normal range
- Short-term certified rate for all staff up 6.4% vs previous year, all months in Q2 in normal range
- Rate for Control staff up 27.1% vs previous year, all months in Q2 in normal range
- Rate for non-uniformed staff up 0.4% vs previous year, all months in Q2 in normal range
- Rate for uniformed non-station based staff up 15.6% vs previous year, 2 months in Q2 in normal range, 1 monitor

What we are doing to improve performance:

Devon and Somerset Fire and Rescue Service takes seriously the health, safety and wellbeing of employees and provides a wide range of initiatives, interventions and policies to ensure that employees enjoy a safe and supportive working environment. However, the Service recognises that employee absence has a significant cost to the organisation and is therefore something that needs to be measured, understood and addressed. A reasonable balance needs to be struck between the genuine needs of employees to take occasional periods of time off work because of ill-health and the Service's ability to fulfil its role in serving local communities.

Absence levels are a key measure as they affect the efficiency and the effectiveness of the Service. During discussions at recent HRMD Committee meetings there has been a desire to broaden the considerations to the 'Health of the Organisation'.

The 'Health of the Organisation' relates to the wider health of the organisation as a means of monitoring people aspects which could be inextricably linked. The health of the organisation encompasses the 'psychological' safety of the organisation. A psychologically safe workplace can be defined as one that does not permit the harm to employees' mental health in a careless, negligent, reckless or intentional way. There are critical reasons as to why employers should address the psychological safety of their workplace and work to minimise the risk factors. These are:

- Ensuring that we meet our legal and moral responsibility for our staff.
- The financial impact of enhancing psychological health in the workplace.
- The impact of workplace factors on employee mental health.

The HRMD Committee have therefore considered key aspects for the Health of the Organisation including sickness levels, ill-health retirements, the number of discipline and grievances cases, any trends in bullying and harassment, the turnover of staff, the levels of stress and referrals to counselling, the number of mediation cases, and the number and type of cases being dealt with by the Welfare Officer.

It is also important that sickness data is presented in a form which meets the requirements of the audience and following feedback the Service is seeking to provide new ways of presenting the sickness data to include how many staff are off at any one time and any lost time as a result of workplace injuries. To achieve this, the Service is developing a sickness absence dashboard app which will use data from our new Absence Reporting tool, which is an ICT application within our newly created 'Workbench'. The data available will be in real-time, allowing managers to access up-to-date sickness data. The dashboard data will be at a top level and therefore include the figures but not personal sensitive data associated with sickness. Therefore, once complete the app will be available for Members who will then have the choice of being able to check on performance at any time they choose or alternatively to receive information through the normal reporting routes.