

COMMUNITY SAFETY COMMITTEE
(Devon & Somerset Fire & Rescue Authority)

4 September 2024

Present:

Councillors Hendy (Chair), Brazil, Fellows, Kerley, Radford and Coles (vice Best)

* **CSC/24/1** **Minutes**

RESOLVED that the Minutes of the meeting held on the 26 April 2024 be signed as a correct record.

* **CSC/24/2** **Strategic Priority 1 and 2 Performance Measures: Quarter 1 - 2024-25**

The Committee received for information a report of the Director of Service Delivery (CSC/24/10) to which was appended a revised performance monitoring report for the first quarter of the current (2024-25) financial year against those Key Performance Indicators (KPIs) falling within the remit of this Committee for scrutiny purposes and aligned to Authority-approved Strategic Priorities 1 and 2.

In summary, the KPI performance was:

	Succeeding	Near target	Needs improvement
Priority 1	14 (-)	4 (-)	2 (-)
Priority 2	1 (-)	5 (-)	2 (-)

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

- KPI 1.4. Number of home fire safety visits completed
- KPI 1.10. Number of fire safety checks completed
- KPI 2.2. Percentage of level four operational risk sites in date for revalidation
- KPI 2.8. Percentage availability of risk dependant pumping appliances

The report provided a detailed exception report for the four KPIs requiring improvement, explaining the reasons for the exceptions and measures to remediate the performance.

In terms of KPI 1.4. relating to the number of fire safety checks completed, the target of which had been 4,500 the reported had been 3,947. The target had not been met due to the resourcing levels of the administrative team, impacting the ability to assign visits, these resourcing issues had since been resolved.

KPI 1.10 relating to the number of fire safety checks, had entered exception the previous year, this had been due to an upskilling of Protection Officers who had undertaken a higher number of Fire Safety Audits in place of checks. The target for checks reported had not been met due to an administration review which had resulted in two of the geographical operational groups, Taunton and Bridgwater, not being issued, in error, with Fire Safety Checks. In response to a query from the Committee, the Service advised the monitoring of the KPI on a monthly basis had allowed for the identifications of the lower level of checks in the two groups. This had since been resolved and the Committee noted the figures were now progressing towards target.

In terms of KPI 2.2, the Service noted disappointment in having not met the target for revalidation of level four operational risk sites. A legacy issue remained outstanding from the COVID-19 pandemic as visits could not be completed during lockdown which had led to a number of locations having their revalidation dates reset to the same day, and not staggered. These therefore all became due for visit on the same date. The Service also reported a change of leadership in the function and expressed confidence in achieving the target.

KPI 2.8, relating to risk dependant pumping appliances had been in exception due to an actual figure of 61.5% being recorded against a target of 85%. The Committee queried if any instances had occurred whereby a risk dependant pump had been requested and subsequently not available. ACFO Taylor would provide a response to the Committee after the meeting.

The Committee challenged the setting of the target for KPI 2.8 if not achievable, the Service advised that at a local level improvement targets could be considered, however the Service level target would remain the same. The Service would be undertaking a Fire Cover Review which would include a revaluation of the assets responding to risk, this would inform the target, and figures presented.

* **CSC/24/3** **Performance Measures Target Setting**

The Committee received for information a report of the Director of Service Delivery (CSC/24/11) to which was appended a paper reviewing the agreed Key Performance Indicators for the 2024-25 financial year. A rationale was provided for each KPI that described why the target has been proposed and the thresholds for the measurements. The report looked to provide assurance to the Committee that the Service was challenging itself appropriately. The Service hoped to make the report more widely accessible to allow for continued reference.

The Committee highlighted a minor grammatical error within section KPI 1.3.

The Committee commented on the usefulness of the report and thanked the Service for its presentation.

* **CSC/24/4** **Home Fire Safety Visits Backlog**

The Committee received for information a report of the Assistant Chief Fire Officer (CSC/24/12) on HFSV backlogs, relating to KPI 1.1.4 'Number of home fire safety visits completed'. The item was presented to the Committee by Area Manager Mike Porter on behalf of the Director of Service Delivery. The report acted as a follow-up to previous report (CSC/24/5).

As of Monday 02 September, the referral process had left special measures for this area. AM Porter advised the Committee of the present backlog figure of 787, recognising tidal numbers fluctuated between 800 and 1,200. In response to this, the Committee requested a six-monthly report to provide a detailed update on activity.

The Committee asked if the Service had seen an impact from private companies undertaking home fire safety visits, an impact had not been identified by the Service. This was understood in part to be due the focus assigned by the Service on vulnerable members of the community, whereas it was anticipated those deemed not vulnerable would be considering using the privatised Service. The Service explained that they were unaware of any private companies delivering domestic fire prevention advice but speculated that these companies may be the ones who provide fire safety services to commercial organisations.

The Committee queried the Services experiences post COVID compared to that of other Authorities nationally, the Service advised that experiences would differ nationally due to the differing levels of delivery and geographical spread and size.

* **CSC/24/5** **Automatic Fire Alarms Project Update**

The Committee received for information a report of the Assistant Chief Fire Officer (CSC/24/13) on the Services automatic fire alarms project. The Head of Communication and Engagement, Paul Compton, presented the item to the Committee.

The Automatic Fire Alarm project acted as one of the four main projects the Service had been exploring to improve efficiency and to reduce costs. The Committee noted that in the last five years, automatic fire alarms had alerted the Service almost 48,000 times, with on average 1.7% of those attended classes as emergencies. The Service confirmed that cost recovery could be undertaken when thresholds were met, this would be alongside the additional measures as outlined at 2.7 of the report. The Committee asked of the impact of charging, the Service confirmed a preceding report (CSC/24/6) would provide further detail of this.

* **CSC/24/6** **HMICFRS Areas for Improvement Action Plan Update**

The Committee received for information a report of the Chief Fire Officer (CSC/24/14) on the Service’s Areas for Improvement Action Plan. Group Manager, Matthew Herdman, presented the report on behalf of the Chief Fire Officer.

In summary, the areas for improvement action plan completion status had been:

Reference	Description	Target Completion	Status
HMI-1.2-202203	The service should evaluate its prevention activity so it understands what works.	29/02/2024 31/10/2024	In Progress (On Track)
HMI-1.2-202204	Safeguarding training should be provided to all staff.	30/04/2024 30/06/2024	Closed
HMI-1.3-202205	The service should make sure it has an effective quality assurance process, so staff carry out audits and fire safety checks to an appropriate standard.	30/09/2023 30/11/2023 31/08/2024	Closed

Area HMI-1.2-220203, referring to prevention activity was noted to the Committee as ‘In Progress (on track)’. This remained the only open action under the remit of the Committee.

Area HMI-1.2-202204, referring to the completion of Safeguarding was reported to the Committee as having been closed. In addition, area HMI-1.3-220205, referring to assurance on prevention activity was reported as closed.

The Committee’s attention was drawn to the change in reporting for Areas for Improvement (AFIs) from the 2021/22 inspection report. This had been to align the actions from each AFI with the relevant Fire Standards criteria, this change would support the Services wider assurance model.

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