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24 February 2022

Fire & Rescue Service Scrutiny Committee

A meeting of the Committee will be held at 10.30 am on Friday, 4 March 2022 at County Hall, Chichester, PO19 1RQ.

Note: In response to the continuing public health measures, there will be limited public access to the meeting. Admission is by ticket only, bookable in advance via: democratic.services@westsussex.gov.uk).

The meeting will be available to watch live via the Internet at this address:

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Tony Kershaw

Director of Law and Assurance

Agenda

10.30 am 1. **Declarations of Interest**

Committee members and officers must declare any pecuniary or personal interest in any business on the agenda. They should also make declarations at any stage such an interest becomes apparent during the meeting. Consideration should be given to leaving the meeting if the nature of the interest warrants it. If in doubt please contact Democratic Services before the meeting.

2. **Minutes of the last meeting of the Committee** (Pages 5 - 8)

The Committee is asked to agree the minutes of the meeting held on 13 January 2022 (cream paper).

3. **Urgent Matters**

Items not on the agenda which the Chairman of the meeting is of the opinion should be considered as a matter of urgency by reason of special circumstances, including cases where the Committee needs to be informed of budgetary or performance issues affecting matters within its terms of reference, which have emerged since the publication of the agenda.

4. **Responses to Recommendations** (Pages 9 - 10)

The Committee is asked to note the responses to recommendations made at the 13 January 2022 meeting.

10.35 am 5. **Performance Report Quarter 3**

(a) Fire and Rescue Service Strategic Performance Report Quarter 3 2021/22 (Pages 11 - 40)

Report by the Chief Fire Officer.

The report provides a context to the Performance and Assurance Framework for the purpose of future scrutiny of the Executive's approach to performance.

(b) End of December 2021 (Quarter 3) Quarterly Performance and Resources Report (Pages 41 - 58)

A report by the Director of Law and Assurance, setting out the finance and performance position as at the end of December 2021.

The Committee is asked to examine the data and supporting commentary for the performance and resources report and make any recommendations for action to the Cabinet Member for Community Support, Fire and Rescue.

11.55 am 6. **Priority Programme Update** (Pages 59 - 64)

Report by the Deputy Chief Fire Officer.

The report provides an overview of the priority programme of work during Quarter 3 of 2021/2022 including progress against the People Action Plan, the Improvement Plan and the Community Risk Management Plan Action Plan.

12.30 pm 7. **Joint Fire Control Centre Update** (Pages 65 - 72)

Report by the Deputy Chief Fire Officer.

The report provides an update to the Committee on the developments since the Task and Finish Group report over the last 12 months.

1.00 pm 8. **Work Programme Planning and Possible Items for Future Scrutiny**

The Committee is asked to review its current draft work programme taking into account the Forward Plan of Key Decisions and any suggestions from its members for possible items for future scrutiny.

(a) Forward Plan of Key Decisions (Pages 73 - 76)

Extract from the Forward Plan dated 15 February 2022 – attached.

An extract from any Forward Plan published between the date of despatch of the agenda and the date of the meeting will be tabled at the meeting.

The Committee is asked to consider whether it wishes to enquire into any of the forthcoming decisions within its portfolio.

(b) Work Programme (Pages 77 - 80)

The Committee to review its draft work programme for the year ahead taking into consideration the checklist at Appendix A.

(c) The Retained Duty System Task and Finish Group Draft Terms of Reference (Pages 81 - 82)

The Committee is asked to agree the draft Terms of Reference for the Retained Duty System Task & Finish Group.

1.10 pm 9. **Requests for Call-in**

There have been no requests for call-in to the Scrutiny Committee and within its constitutional remit since the date of the last meeting. The Director of Law and Assurance will report any requests since the publication of the agenda papers.

10. **Date of Next Meeting**

The next meeting of the Committee will be held on 13 June 2022 at 10.30 am at County Hall, Chichester. Probable agenda items include:

- Fire and Rescue Service Strategic Performance Report
- Priority Programme Update
- Statement of Assurance

Any member wishing to place an item on the agenda for the meeting must notify the Director of Law and Assurance by 25 May 2022.

To all members of the Fire & Rescue Service Scrutiny Committee

Webcasting

Please note: this meeting is being filmed for live and subsequent broadcast via the County Council's website on the internet. The images and sound recording may be used for training purposes by the Council.

Generally the public gallery is not filmed. However, by entering the meeting room and using the public seating area you are consenting to being filmed and to the possible use of those images and sound recordings for webcasting and/or training purposes.

Fire & Rescue Service Scrutiny Committee

13 January 2022 – At a meeting of the Fire & Rescue Service Scrutiny Committee held at 10.30 am at Virtual meeting with restricted public access.

Present: Cllr Boram (Chairman)

Cllr Chowdhury, Cllr Dunn, Cllr Milne and Cllr Richardson

Apologies were received from Cllr Pendleton and Cllr Charles

Also in attendance: Cllr Crow, Sabrina Cohen-Hatton (Chief Fire Officer), Mark Andrews (Deputy Chief Fire Officer), Peter Rickard (Assistant Chief Fire Officer) and Jon Simpson (Area Manager, West Sussex Fire & Rescue Service)

25. Declarations of Interest

25.1 There were no declarations.

26. Minutes of the last meeting of the Committee

26.1 Resolved – that the Committee agrees the minutes of the meeting held on 23 November 2021.

27. Responses to Recommendations

27.1 Resolved – that the Committee notes the responses to the recommendations.

28. Priority Programme Update

- 28.1 The Committee scrutinised a report by the Deputy Chief Fire Officer (copy appended to the signed minutes).
- 28.2 Summary of responses to members questions and comments: -
 - The activity associated with addressing the first two causes of concern have been completed, updates on the remaining two will come to the next meeting
 - People-related themes applied to all fire services and were tied into National Fire Chiefs Council workstreams
 - Recruitment advertising began six months ago
 - There were almost 1,000 applicants (16% female) for 24 positions, which have been filled
 - The Service has a pool of applicants (20% female) who are suitable and can be called upon if vacancies arise
 - The Service has all the volunteers it needs, but is always ready to accept more
 - The Service is trying to improve the representation of the workforce in order to better reflect the communities served
 - In Crawley the Cabinet Member for Community Support, Fire & Rescue ensured the recruitment campaign had high visibility

- including talking to community groups and the Crawley Observer to help publicise the recruitment campaign to diverse groups
- The Service had specific personal protective equipment for male and female firefighters
- The Service and manufacturers carried out impact assessments on all new equipment, so it was suitable for all firefighters
- The Service was working with three other fire services to replace breathing apparatus so that each had the same equipment – this would bring about cost efficiencies and help with joint training

28.3 Resolved - that the Committee: -

- i. Welcomes the steps being taken by the Fire & Rescue Service regarding increasing diversity of staff and the steps being taken towards mitigating the other key areas of concern
- ii. Requests better financial data looking at the Budget and any key variations from it

29. Fire and Rescue Service Strategic Performance Report Quarter 2

- 29.1 The Committee scrutinised a report by the Chief Fire Officer (copy appended to the signed minutes).
- 29.1 Summary of responses to members questions and comments: -
 - Covid had been a factor in performance and the 'new normal' had not yet been established as people were still having to isolate
 - The Service was working hard to maintain its statutory duty which meant some other duties could not be carried out as well as they were before the pandemic
 - The Service prioritised home fire safety visits for the most vulnerable and worked with partners that went into peoples' homes who could then make referrals on fire safety issues to the Service, which then gave telephone advice, following-up in person when possible
 - Despite difficult circumstances, the Service had continued with large projects such as the new Horsham Fire Station and the Joint Fire Control Centre (JFCC)
 - Fire crews had been very resilient throughout the pandemic with the Service providing additional wellbeing support
 - Clear degradation plans existed in case of staff shortages, but these had not yet been needed during the pandemic
 - Covid restrictions remained in workplaces for the protection of staff
 - The Service was aware of the national Public Emergency Call Service (PECS) code of practice measure, but delayed adopting it till East Sussex joined the JFCC so all partners would have the same performance targets and reporting - this won't change the recording of how quickly calls are answered
 - A lot of work went into making sure emergency services worked well together although locating some incidents can be difficult for callers who may not know their exact location to pass to JFCC
 - The JFCC has extra staff with East Sussex joining, which should help improve response times, dealing with major incidents, efficiency and be better for the public and fire fighters

 The ability of the Merseyside call centre to cover in event of failure of the JFCC was part of a risk assessment undertaken. There is also a fall-back control centre in Surrey that the JFCC can move to if necessary

29.3 Resolved - that the Committee

- Requests further analysis of the performance recording of retained firefighters
- ii. Notes the alignment with the Public Emergency Call Service standard and that the Fire and Rescue Service will continue to respond as quickly as possible
- iii. Notes that discussions are taking place to improve the way information is handed over from the Police and Ambulance Service to the Fire & Rescue Service

30. Community Risk Management Plan Consultation Briefing

- 30.1 The Committee scrutinised a report by the Deputy Chief Fire Officer (copy appended to the signed minutes).
- 30.2 Summary of responses to members questions and comments: -
 - The Service has an engagement strategy to make businesses aware that they need to keep their fire alarms maintained to reduce the risk of unwanted false alarms
 - There would be a staged introduction in the new way the Service would respond to automated alarm calls from businesses
 - The Service prosecutes businesses that don't meet fire safety standards - false alarms could be an indication of standards not being met
 - The Service can charge for callouts to false alarms
 - The review of emergency response standards recognises national work and how the Service responds – it is important be aligned with national standards that might affect what the Service does
 - If a change in national policy meant changes locally, public consultation would take place before implementation

30.3 Resolved - that the Committee: -

- i. Note the issues in respect of retained firefighters and the real important service that they provide particularly in rural locations
- ii. Notes the impact of false alarms on the Fire Service welcomes the engagement strategy to make businesses aware of the change in policy
- iii. Notes the national changes in community risk methodology that may lead to proposed changes in performance measures and
- iv. Requests that the Chairman be updated on the results of the consultation before the next Cabinet meeting

31. Work Programme Planning and Possible Items for Future Scrutiny

31.1 The Committee considered its work programme and decided that it wanted to look at the Covid-19 Recovery Plan for the Fire & Rescue Service separate to the Council's overall Covid-19 Recovery Plan and schedule a visit for the members of the Committee and Cabinet Member to the Joint Fire Control Centre ahead of the next meeting of the Committee, if appropriate due to the current health guidance.

32. Date of Next Meeting

32.1 The next meeting of the Committee will take place on 4 March 2022.

The meeting ended at 1.03 pm

Chairman

Priority Programme Update

Request	Responder	Response
The Committee requests better financial data looking at the Budget and any key variations from it	Cabinet Member for Community Support, Fire & Rescue	The Fire & Rescue Service is liaising with colleagues in finance to understand how the financial information can better represent variances. This includes a program of devolving budget management to middle managers to help scrutiny and financial performance management at station and team level. We will provide financial data in future
		reports where appropriate.

Fire and Rescue Service Strategic Performance Report Quarter 2

Request	Responder	Response
The Committee requests further analysis of the performance recording of retained firefighters	Cabinet Member for Community Support, Fire & Rescue	A Task & Finish Group (TFG) has now been arranged to consider this analysis in more detail. The TFG will report its findings into the FRSSC at a future meeting. This work will also help inform the planning work to support the proposed CRMP.

Community Risk Management Plan Consultation Briefing

Request	Responder	Response
The Committee requests that the Chairman be	Cabinet Member for	A meeting has been set up to provide the
updated on the results of the consultation before	Community Support,	Chairman with the relevant detail of the
the next Cabinet meeting	Fire & Rescue	results of the CRMP consultation.

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Fire and Rescue Service Scrutiny Committee

4 March 2022

Fire and Rescue Service Strategic Performance Report Q3 2021/22

Report by Chief Fire Officer

Summary

In March 2020, West Sussex Fire & Rescue Service (WSFRS) formally adopted a new Performance and Assurance Framework (PAF) which was supported by the Elected Member for WSFRS and Fire and Rescue Service Scrutiny Committee (FRSSC).

The PAF includes monitoring of service performance against 30 core measures that provide strong indication of organisational performance directly aligned to the delivery of the Strategic Commitments i.e. Integrated Risk Management Plan. This ensures the service is intelligence and evidence led and enables the service to react early when performance is not to the required level.

Appendix A of the report is the Quarter Three Strategic Performance Report for the purpose of scrutiny of the Executive's approach to performance. This report covers data from the period of 1st October 2021 – 31st December 2021.

Focus for Scrutiny

Members of the Committee are invited to consider and comment on the Core Measures/Indicators detailed in Appendix A, designed to provide assurance concerning the delivery of the statutory functions of the Fire Authority.

Proposal

1 Background and context

- 1.1 West Sussex County Council is the Fire Authority and is responsible for making sure West Sussex Fire & Rescue Service (WSFRS) performs efficiently and in the best interest of the public and communities it serves.
- 1.2 WSFRS was inspected in November 2018 by Her Majesty's Inspector of Constabulary Fire and Rescue Services (HMICFRS). The full Inspection Report for the service was published on 20 June 2019. The report found that effectiveness of WSFRS "requires improvement", efficiency "requires improvement" and the way it looks after its people is "inadequate".
- 1.3 New scrutiny governance arrangements are now in place through the Fire and Rescue Service Scrutiny Committee.

- 1.4 On behalf of residents, Members are responsible for ensuring that WSFRS delivers excellent services and achieves outcomes as efficiently and effectively as possible. This involves the West Sussex County Council Fire Authority (WSCCFA):
 - setting a high-level policy agenda (Strategic Objectives) for what the WSFRS should do and the outcomes it should achieve
 - setting a budget to fund delivery of the policy agenda
 - securing assurance that the budget is being spent wisely on delivering the policy agenda set by the authority.
- 1.5 In order to secure assurance, it is necessary for effective scrutiny to be an integral component of WSCCFA governance arrangements. Scrutiny is there to hold the Cabinet to account concerning the decisions taken relating to WSFRS.
- 1.6 The role of scrutiny is also to contribute to the development of solutions and ideas to support continuous service improvement. The Fire and Rescue Service Scrutiny Committee may need to be flexible in the way it scrutinises the service and the Executive's decisions. On occasions, Members may wish to 'drill down' on certain specific issues but still at a strategic level with the focus being the interests of all West Sussex residents and businesses.

2 Proposal details

2.1 The proposal information for this item for scrutiny is set out in the attached appendix (listed below). As it is a report dealing with performance management the assessments and implications are not required.

Sabrina Cohen-Hatton **Chief Fire Officer**

Contact Officer: Sabrina Cohen-Hatton, Chief Fire Officer

Appendices

Appendix A FRS Scrutiny PAF Core Measures Report Q3 2021-22

Background papers

None

West Sussex Fire and Rescue Service Performance Report Quarter 3

Deputy Chief Fire Officer

Mark Andrews

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Strategic Performance Board Quarterly Report Quarter 3 2021-2022

- The aim of this Quarterly Performance Report is to summarise how West Sussex Fire & Rescue Service/Directorate has performed over the previous three months, and to capture how performance contributes cumulatively to the year-end performance outcomes.
- The report retrospectively presents information from the Performance and Assurance Framework (PAF) including the core measures and targets for the year which are current at the time of publishing. The report contains performance across the four elements of the PAF Quadrant namely:

Service	Corporate
Provision	Health
Priority Programmes	Risk

- The explanations, mitigations and actions contained within this report are those endorsed by the Service Executive and leave t
- This report covers data from the period of 1^{st} October $2021 31^{st}$ December 2021.

Cabinet Member Summary



The performance information contained within this report for WSFRS is for the third quarter of 2021/2022, a period which has continued to see the effects and impacts of COVID 19 on service delivery of WSFRS and wider county council services. Therefore, it is with great credit to all the teams that make up WSFRS that the impact of COVID 19 has not significantly affected the Service's performance in the delivery of its critical services to our residents.

Officers continue to focus on the areas in this report where improvement still needs to be made and as the pandemic begins to ease we will be focussed on how we can support economic and community recovery whilst maintaining the well-being and support to all our staff.

Chief Fire Officer Summary



After a period of brief respite from the major impacts of COVID 19, the Government announced the Winter Plan B to protect essential services which ultimately came into effect in December with the onset of the Omicron variant and the increase in cases across the UK. Our business continuity arrangements continued through this period supporting with advice on vaccines, lateral flow testing and protecting staff and our statutory duty with sickness remaining low through this reporting period.

This quarter also saw the saw the return of Her Majesty's Inspectorate for Constabularies & Fire and Rescue Services for the second full inspection of our service. The eight-week inspection involved almost every part of the organisation in a blended approach that saw the Inspectorate use virtual and face to face sessions with staff to gather their information before presenting their initial findings that feed into the report which is due in spring 2022.

In addition, the new tri-service Joint Fire Control opened in November, the same week that work finally began on site for the new Service Training Centre and Fire Station at Horsham.

Performance Summary

At the end of Quarter 3 2021-22, 15 of the 30 measures had a GREEN status, 4 were AMBER and 11 were RED.

Of the 15 comparable measures that were RED or AMBER last quarter:

- 12 measures showed improvements in performance and 3 a decline.
- 3 measures moved from AMBER to GREEN
- 2 measures moved from RED to GREEN

Of the 7 comparable measures that were GREEN last quarter:

- 3 measure showed a decline in performance
- 1 measure moved to RED status and 1 measure moved to AMBER status.

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Performance Summary for all core measures at the end of Quarter 3 (2 of 2):



Areas of Significant Improvement and Success

Quarter 3

(1st October 2021 – 31st December 2021)

Areas of Significant Improvement and Success

The Performance and Assurance Framework of which this report is a part of has continued to demonstrate fire and rescue service performance and provide assurance to members and the public.

Whilst it has been another challenging quarter for performance, the following corporate measures showed notable success in Quarter 3:

- CM 1: Accidental Dwelling Fires
- CM 3: Accidental Dwelling Fire Casualties
- CM 4: Deliberate Primary Fires
- CM 5: Deliberate Secondary Fires

All instances of fires remain low. Accidental Dwelling Fires (ADFs) and related casualties remain low. ADFs form a key focus of our prevention activity and these continued low numbers reflect the sustained work of our teams to ensure that the most vulnerable are kept safe from fire.

Other successes include:

- CM 8: Very High Risk Safe and Well Visit referrals contacted within 1 working day
- CM 11: Proportion of Unsatisfactory Fire Safety Inspections
- CM 12: Percentage of Successful Prosecutions
- CM 15: Percentage of Site Specific Risk Information (SSRI) that are currently in date

Core Measure 1: Accidental Dwelling Fires in West Sussex over a year period starting from April

281 fires at the end of Q3 2021-22

Current RAG
Status
GREEN

Total number of accidental dwelling fires in West Sussex over a year period starting from April

Annual Target: <400 Green 400-425 Amber >425 Red Service Owner:
Nicki Peddle
Area:
Incidents



Commentary

90 Accidental Dwelling Fires in this quarter. The majority involving cooking, with only 2 in the fortnight that included Christmas and New Year. A key element of our Safe and Well Visits relates to kitchen safety, with recommendations on how to cook more safely, we also offer information about the meals on wheels service where appropriate. This figure is 3% below the same period last year and reflects a trend showing an ongoing annual reduction.

Actions

Treat: We will continue to deliver annual campaigns that are directed at the maio causes of accidental fires in people's homes to raise awareness of the causes approvide preventative advice, specifically cooking related fires. This activity will be take place at a targeted local level through the delivery of the local station's Local Risk Management action plan supported by the Prevention Team with the aim of driving this figure down further.

Core Measure 3: Accidental Dwelling Fire casualties in West Sussex over a year period starting from April

The total number of casualties resulting from an accidental dwelling fire in West Sussex over a year period starting in April. This is limited to a person who's injury is fire related and was severe enough to require hospital attendance.

12 casualties at the end of Q3 2021-22

Annual Target: <26 Green 26 – 39 Amber >39 Red Status
GREEN
Appenda Item
Nicki Peddle
Area:



Commentary

Two casualties in Q3, one with slight injuries and one with serious injuries. The cumulative figures are the same as last year but show a 50% reduction on 2019/20. One of these injuries was as a result of cooking and the other a result of combustible material close to a heat source.

Actions

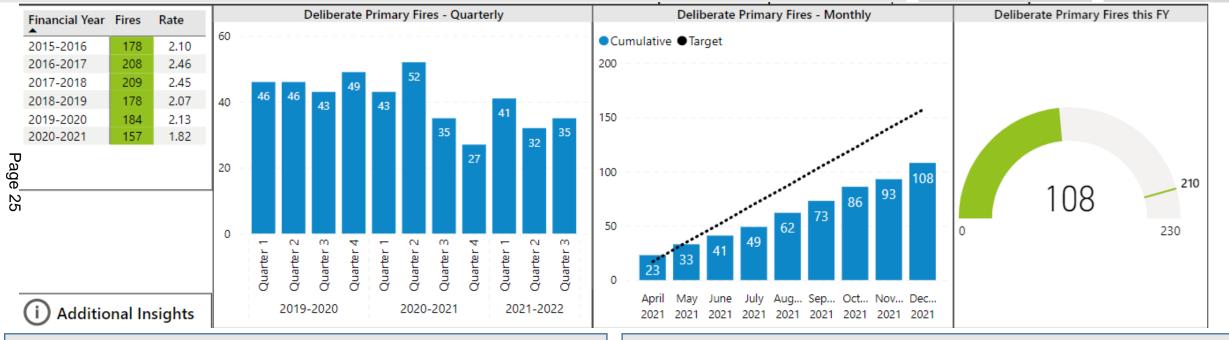
Treat: Continue to monitor and identify trends, delivering appropriate fire safety messages through our Comms Team and delivery of the local community safety activity.

Core Measure 4: The number of deliberate primary fires in West Sussex over a year period starting from April

108 fires at the end of Q3 2021-22 Current RAG
Status
GREEN

Primary fires involve property such as buildings and vehicles. This is the total number of primary fires, where the cause has been identified that the fire was started deliberately through the criminal act of arson.

Target: <210 Green 210-230 Amber >230 Red Service Owner: Nicki Peddle Area: Incidents



Commentary

This measure is showing an 18% reduction on the same period of the previous year. There were 34 deliberate primary fires in Q3, which reflects a continued downward trend in the last 3 years for Q3. Crawley remains the station ground with the highest number of deliberate primary and secondary fires, closely followed by Worthing. Chichester and Bognor have the next highest figure for primary fires. Local prevention work takes place in partnership where a pattern is identified.

Actions

Treat: Stations with spikes in deliberate fires are developing activity to address them, forming part of their local risk reduction activity. The Targeted Education activity to address them, forming part of their local risk reduction activity. The Targeted Education activity to address them, forming part of their local risk reduction activity. The Targeted Education activity and work directly with young people who play with fire inappropriately and work with local schools where the fire is believed to involved young people.

Core Measure 5: The number of deliberate secondary fires in West Sussex over a year period starting from April

end of Q3 2021-22

207 fires at the

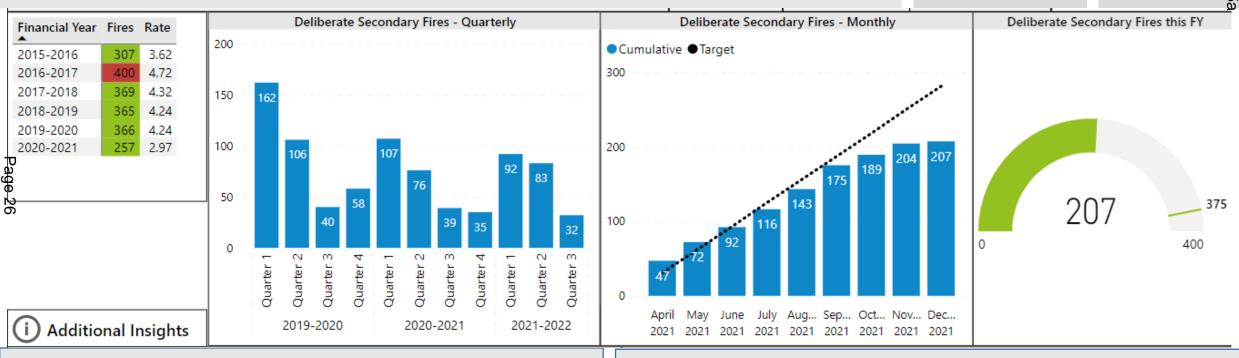
Current RAG
Status
GREEN
Appenda It
Service Owner:endi

Area:

Incidents

Rubbish and grass are examples of secondary fires. This is the total number of secondary fires where the cause has been identified that the fire was started deliberately through the criminal act of arson.

Annual Target: <375 Green 375 – 400 Amber >400 Red



Commentary

This measure is showing a 20% reduction on the same period last year and an ongoing downward trend. Crawley and Worthing have the highest proportion of deliberate secondary fires, the majority of which took place outside, but overall the numbers are gradually decreasing.

Actions

Treat: The data reflects hotspots and peak times of the day and days of the week. Where a pattern is identified locally, stations put in place measures to tackle it through their local partnerships, Joint Action Groups and through their Local Risk Management plans.

Core Measure 8: Very High Risk Safe and Well Visit referrals contacted within 1 working day

100% in Q3 2021-22 Current RAG
Status
GREEN

The percentage of safe and well visit referrals for individuals assessed as very high risk (including where there has been a threat or incidence of arson) contacted within 1 working day.

Target: 100% Green, <100% Red Service Owner: Nicki Peddle Area: Prevention



Commentary

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There were 37 customers who were assessed as having a very high level of fire risk in Q3, all were contacted within 1 day and offered a visit. We have seen a 40% increase in the number of high-risk visits on the previous two quarters. This is evidence that we are reaching some of the most vulnerable people with the highest levels of fire risk and reflects the enhanced data capture provided by Farynor.

Actions

Treat: We will continue to seek out and prioritise those with the highest levels of fire risk as they are individuals who are most likely be seriously injured to die in a fatal fire review. Our fatal fire review process identifies that those who are over the age of 85, live alone and have either physical or mental impairments are our target group, smokers and emollient users are particularly vulnerable.

Core Measure 11: Proportion of Unsatisfactory Fire Safety Inspections

51.4% in Q3 2021-22

Target:

<30% Red

>50% Green

30%-50% Amber

Current RAG
Status
GREEN

Service Owner: enda tem

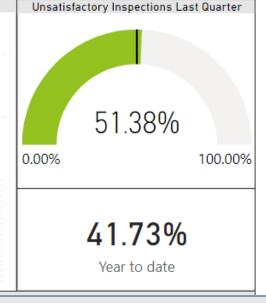
Garry Collins

Area: Protection

The percentage of fire safety inspections in which the inspector found a deficiency in the fire safety arrangements of that premises. Inspectors aim to focus inspections only on those premises which have inadequate fire safety arrangements.

90.32%	3.23%	6.45%	100.00%
71.00%	17.00%	12.00%	100.00%





Commentary

Page

This measure is designed to ensure our fire safety activity is focussed on non-compliant (high risk) buildings. We continue to improve performance in this area which is testimony that we are effectively targeting audit inspections within our RBIP. Ongoing active monitoring is now more effective through the Farynor system, and a more detailed performance dashboard has been created. Protection service measures and indicators are shared across all team members which helps to inform inspecting officers of progress and allows managers greater scope to monitor and quality assure daily activity levels.

Actions

Treat: Work will continue to ensure Farynor data is transposed into the Protection dashboard so that performance against targets are shared with all staff. We have also reset expectations on reporting and recording defects, to ensure a common and consistent approach to recording fire safety deficiencies and remediation requirements for improved consistency and clarity. This helps to better inform Responsible Persons of the management and maintenance requirements to ensure premises are kept satisfactory, without Fire Service intervention.

Core Measure 12: Percentage of Successful Prosecutions

100% in Q3 2021-22

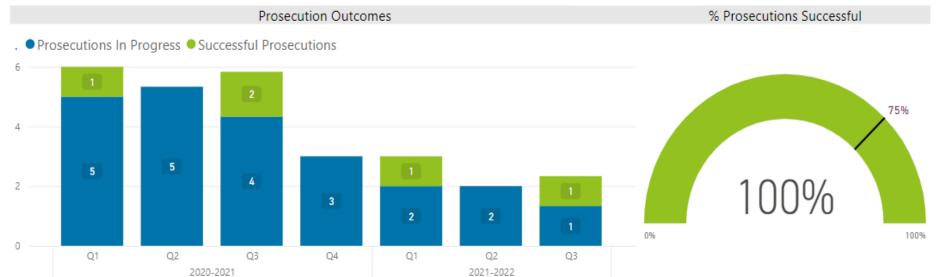
Current RAG Status **GREEN**

The percentage of successful prosecutions made under the Regulatory Reform (Fire Safety) Order 2005.

Target: 75% Green, <75% Red

Service Owner: **Garry Collins** Area: **Protection**





Commentary

Two ongoing prosecution files were managed to conclusion this quarter. For one of those, following PACE interviews we failed to identify strong enough credible evidence to pass our evidence test to proceed to a formal prosecution and no further action was taken. However, we did manage to remediate all outstanding concerns identified and complete a case file review before closing the prosecution file. The second case was concluded with a caution for a number of Fire Safety deficiencies identified via a referral to us from a fellow regulator. A Fire Safety audit was completed, and an enforcement notice served. Following a case review, the caution sanction was successfully served in Dec 2021.

Actions

Treat: Ongoing prosecution meetings are scheduled monthly to ensure appropriate proportionate action continues to be managed, as detailed above, sharing the learning with all protection staff and also operational staff who are also a key partner in flagging such deficiencies at the earliest opportunity.

Appendation of the learning with all protection staff and also operational staff who are also a key partner in flagging such deficiencies at the earliest opportunity.

Core Measure 15: % of SSRIs that are currently in date (High Risk last 12 months, Medium risk last 36 months)

Premises that are identified as having specific risks to the community and to the firefighter are included in a regular programme of inspections to make sure that relevant information is made available to the firefighter prior to any call or visit. High Risk premises are inspected at least every 12 months and Medium risk every 36 months to ensure that risk information remains current and complete.

100% in Q3 2021-22

Target: >90% Green 60% - 90% Amber <60% Red



			Performance in Previ	ous Quarters	Figures updated on	<u>Target</u>		% of SSRIs in Date	
	FY Qt		% of SSRIs in date	Number of SSRIs out of date	31/12/2021.	>90% Green			
	2021/22	1	66.2%	177		60% - 90% <mark>Amber</mark> <60% Red			
	2021/22	2	80.3%	101		10070 NCG			
age	2021/22	3	100.0%	0	Out of Date SSRIs	Year End Forecast			
9 30			0	GREEN	100.0%	90%			

Commentary

All SSRI data has been cleansed and fully migrated into the Farynor system with inspection schedules spread more equally over the calendar year. As a result of this process review, the system no longer shows any outstanding visits. Those SSRIs that were outstanding as out of date have been scheduled within the first few months to be completed by response crews. Staff also have a higher level of support and training to manage the restructured work schedules. Full Business as usual (BAU) is almost complete, however we will always have further risk premises information to input from new developments, change of use and alterations.

Staff feedback engagement has been very positive as we continue to implement new systems, processes and revised Farynor database structure.

Actions

Treat: Embedding of the Farynor system and it's associated process improvements is ongoing, with station based operational risk training now 70% complete (47 training sessions have been delivered to response stations over the last 2 months). All stations will have completed this training by the end of January 2022. This will ensure new ways of working are mainstreamed as BAU.

Agenda Item 5a Appendix A

Selected Measures (Red and Amber Status)

Quarter 3

(1st October 2021 – 31st December 2021)

Selected Measures (Red and Amber Status)

The following red and amber measures have been selected for examination by the Scrutiny Committee:

- CM 2: Accidental Dwelling Fire deaths in West Sussex over a year period starting from April
- CM 9: % of High Risk Safe and Well referrals contacted within 7 working days
- CM 10: Number of FSO regulated buildings having received an audit over a year period starting from April
- CM 19: Critical Fires 1st Appliance Attendance
- CM 20: Critical Fires 2nd Appliance Attendance
- CM 21: Critical Special Services 1st Appliance Attendance
- CM 27: % of Eligible operational staff in qualification

Core Measure 2: Accidental Dwelling Fire deaths in West Sussex over a year period starting from April

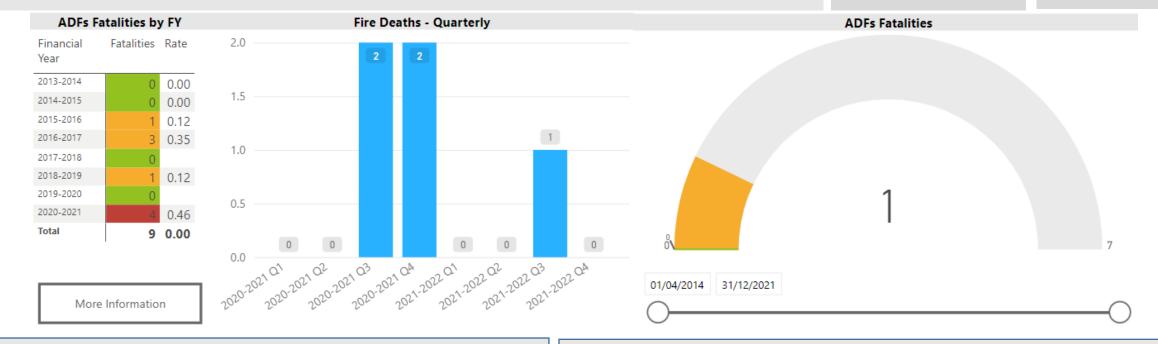
1 death in Q3 2021-22

Current RAG
Status
AMBER

The total number of deaths that occur as a result of a Accidental Dwelling Fire. This includes a person whose death is attributed to a fire, even when the death occurs weeks or months later.

Annual Target:

0 Green 0-3 Amber >3 Red Service Owner:
Nicki Peddle
Area:
Incidents



Commentary

Page 33

There was 1 fatal fire in Quarter 3. Extensive community fire safety activity has taken place immediately afterwards to reassure residents living close by and to provide fire safety advice and install smoke detection. There has been a fatal fire review of this incident to identify any hidden risk factors that we can use to further target our prevention work in our communities.

Actions

Treat: We will continue to apply the learning identified from serious and fatal fire incidents, using it to offer specific fire safety advice to prevent such incidents occurring. We continue to build relationship with partner organisations who can refer people to us when they identify a fire risk.

21

Core Measure 9: % of High Risk Safe and Well referrals contacted within 7 working days

99.3% in Q3 2021-22 Current RAG
Status
RED

The percentage of Safe and Well Visit referrals for individuals assessed as high risk of dying or being injured in the event of a dwelling fire contacted within 7 working days

Target: 100% Green <100% Red Service Owner: Area:
Incidents



Commentary

In Q3, there were 548 customers who were assessed as having a high level of fire risk, 99% of these were contacted within our 7 day target to arrange a visit. 2 customers were contacted half a day late, which was addressed through training and additional support.

The systems we now have in place allow us to quickly identify and address issues, whereas previously those not contacted within the agreed timescale may not have been easily identified.

Actions

Treat: Continue to monitor, using the additional measures put in place having identified the shortcomings at the end of quarter 3.

22

Core Measure 10: Number of FSO regulated buildings having received an audit over a year period starting from April

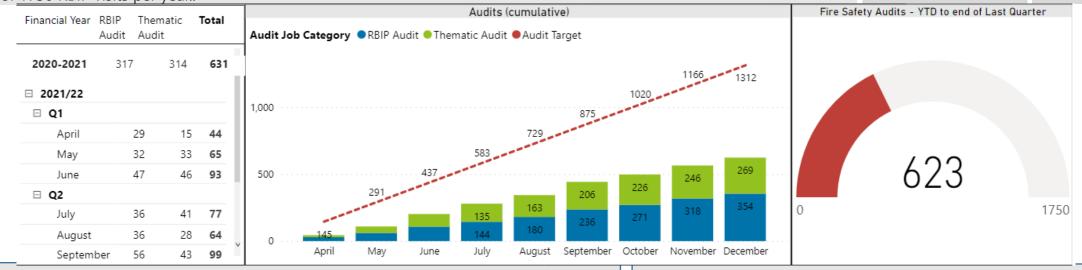
623 at the end of Q3 2021-22

Current RAG Status RED

There are approximately 35,000 Fire Safety Order (FSO) regulated buildings in West Sussex. This measure examines the total number of audits of these buildings undertaken in a year starting in April under the Risk Based Inspection Programme (RBIP). The RBIP is a combination of the activities on specific risk premises, thematic risks and IRMP work and at the core of the RBIP is a regular inspection programme for known sleeping risks. In order to ensure that we are effectively enforcing the FSO our target is to achieve an average of 1750 RBIP visits per year..

Target:1750 Green
1400 - 1749 Amber
<1400 red

Service Owner: Garry Collins Area: Protection



Commentary

Page

The target of 1750 visits per year is based on a full department staffing model at which we continue to operate approximately 30% below. This is recognised as a sector wide issue. Reduced staffing levels and the pandemic have continued to impact the type of work that is possible, with inspecting officers carrying out remote and tabletop audits where premises remain inaccessible. Reviews are being undertaken to maximise desktop audits to ensure that the highest levels of risk continue to receive a comprehensive audit visit, which includes notifying the Responsible Person of any deficiencies and remedial actions required to make the building safe.

Covid restrictions continue to be an influencing factor due to increases in the recent variant, particularly with premises occupied by vulnerable occupants. Responsible Persons have expressed anxiety in this area, which we recognise and acknowledge on a case-by-case basis. Officers have continued to support other Protection core functions including completing the Building Risk Review, which account for over 50% of departmental activity. This includes building regulation consultations, licensing applications and other forms of inspections and prosecutions.

Actions

Treat: Our approach will increase audit file review activity, whilst still targeting face to face inspections at premises of highest risk within our RBIP, ensuring we are still picking up key areas of non-compliance with the Fire Safety Order. We have a clear way forward focusing on risk and maximising the number of audits completed. We are increasing our desktop reviews completed by qualified Inspecting Officers and Low Risk Fire Safety Checks conducted by station personnel, both of which will see performance in this area improved the have also seen good engagement with licensed premises in Chichester, which is part of a joint fire safety project between our protection and responsed teams focusing on takeaways with sleeping risks above. This in turn will lead to more audits being completed.

Core Measure 19: Critical Fires - 1st Appliance Attendance

86.8% in Q3 2021-22

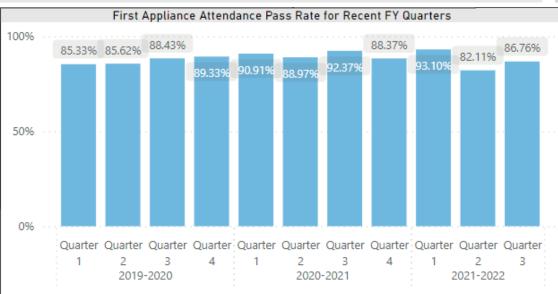
Status RED Service Owner **Steve Ash** Area: Response

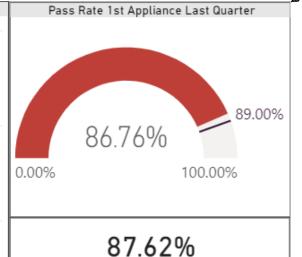
Current RAG

West Sussex FRS categorises risk into four types being Very High, High, Medium and Low. It has also set a different attendance time target against each risk type. This measure examines the number of occasions where the first fire engine arrives at an emergency incident within the target number of minutes from time the emergency call was answered.

Target: >89% Green, <89% Red

	Financial Year	Very High	High	Medium	Low	Total
	2015-2016	100.00%	84.48%	86.75%	89.19%	87.67%
	2016-2017	75.00%	88.57%	83.72%	89.86%	86.52%
	2017-2018	0.00%	100.00%	89.03%	90.00%	90.28%
	2018-2019	0.00%	93.94%	88.32%	86.27%	87.66%
	2019-2020	0.00%	96.00%	87.50%	85.82%	87.11%
Ņ	2020-2021	0.00%	92.31%	88.37%	91.70%	90.15%
	Total	78.57%	91.60%	87.18%	88.88%	88.21%





% First Attendance Time Pass

Table of Incidents (i)

Map & Station Group

Commentary

Following six quarters of strong performance in meeting first fire engine attendance standards we had a significant drop in Q2 and an increase in Q3. This increase means that our last three months performance have been 3.33% below target. For the last 6 months we have been trialling the Dynamic Cover Tool (DCT) in Fire control. This tool allows the control operators to assess the impact of any standby moves on response times before implementing them. During this trial we have been reviewing the impact this has had on our response times and the impact it's had on our staff. While we have seen how valuable the DCT is, we recognise that improvements can be made that will maximise the performance of our existing resources.

Actions

Treat: We are working very closely with Joint Fire Control (JFC) and following a revision to the governance arrangements we now have engagement and additional scrutiny at both operational and strategic levels. This work and the inclusion of our colleagues from East Sussex FRS is already seeing improvement in areas of performance that contribute to responding quickly to incidents. One of the main changes is the development to the way we use the Dynamic Cover Tool (DCT) in JFC across the County. This is intended to improve our response times by focusing cover at a district or local level. Additionally, we are reviewing all elements that contribute to meeting our response standards. This has seen work done at our fire stations to ensure we are consistently doing everything we can to respond to all incidents as quickly as possible.

Core Measure 20: Critical Fires - 2nd Appliance Attendance

76.1% in Q3 2021-22

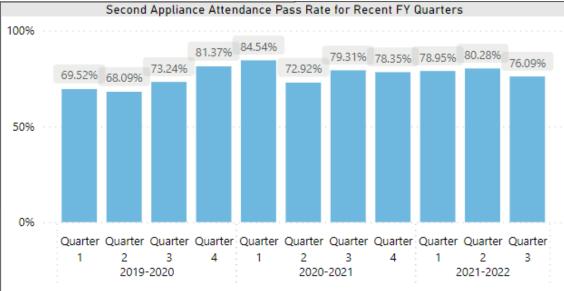
Current RAG
Status
RED

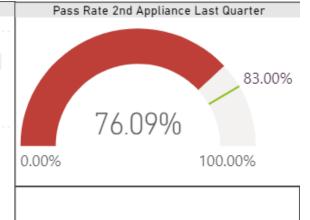
West Sussex FRS categorises risk into four types being Very High, High, Medium and Low. It has also set a different attendance time target against each risk type. This measure examines the number of occasions where the second fire engine arrives at an emergency incident within the target number of minutes from time the emergency call was answered.

Target: >83% Green <83% Red

Service Owner: Steve Ash Area: Response

Financial Year	Very High	High	Medium	Low	Total
2015-2016	100.00%	84.21%	74.36%	77.20%	76.58%
2016-2017	72.73%	71.79%	74.58%	80.00%	76.32%
2017-2018	0.00%	86.21%	79.00%	79.73%	79.79%
2018-2019	0.00%	72.73%	76.88%	80.43%	78.27%
2019-2020	0.00%	77.78%	76.00%	69.83%	73.12%
2020-2021	0.00%	100.00%	80.46%	76.53%	78.78%
Total	75.00%	79.74%	76.79%	77.36%	77.22%





78.29%

% Second Attenance Time Pass

(i)

Table of Incidents (i)

Ī)

Map & Station Group

<u>Actions</u>

Tolerate and Monitor: The implementation of the Dynamic Cover Tool (DCT) is intended to have a positive impact on first engine attendance times and it's impact on second engine attendance times will be closely monitored. We are proposing to review and assess our emergency response standards to simplify them in line with other fire and rescue services when the NFCC guidance is published.

Commentary

Our emergency response standards have been in place since 2009 and are based on assessing levels of critical fire risk. Our current standard is that the second appliance attendance time will be three minutes longer than the attendance time for the first appliance in the area. In the last quarter our greatest challenge on this measure has been in medium risk areas in Western group (15 minutes for the second appliance attendance) and low risk areas across the county (17 minutes for second appliance attendance).

Core Measure 21: Critical Special Service - 1st Appliance Attendance

A critical special services incident is a serious incident that does not involve a fire, for example an RTC, an emergency involving a hazardous substance or when someone is trapped. Some areas of the county are more at risk of fires than others, however special service incidents can happen anywhere, especially with our extensive road network. For this reason we have a single response standard of less than 13 minutes for all critical special service incidents. This measure examines the percentage of occasions where the first fire engine arrives at an emergency special services incident within 13 minutes of the time the emergency call was answered.

77.8% in Q3 2021-22

Service Owner on Area:

Response

Current RAG

Status

Target: >80% Green <80% Red

Financial Year % CSS pass

2014-2015 76.9%

2015-2016 77.6%

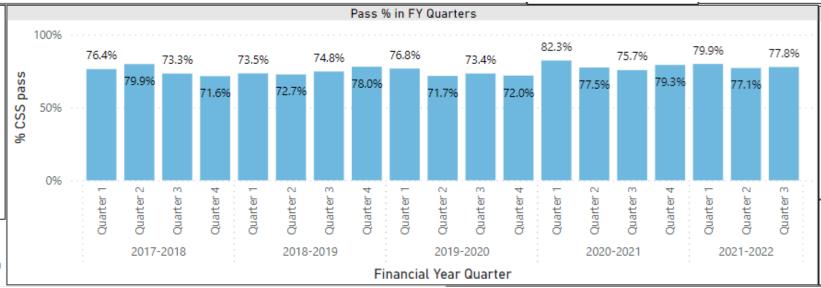
2016-2017 76.7%

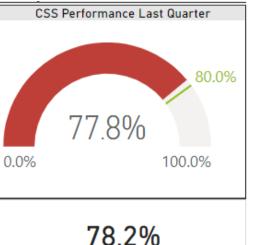
2017-2018 75.4%

2018-2019 74.8%

2019-2020 73.3%

62020-2021 78.5%





Financial Year Performance

(i)

Additional Information

Commentary

We have seen a small increase in retained availability and a corresponding increase in the overall countywide attendance time to critical special service incidents. At the start of Q2 the Dynamic Cover Tool (DCT) trial was implemented. This is designed to assist control room operators in ensuring that the resources that are currently available are always in the best place to maximise overall response times. The use of the DCT has been effective in maximising the use of available resource with respect to critical special service calls.

Actions

Treat: In addition to the actions relating to Joint Fire Control (JFC), we are reviewing the management of our Service Delivery Centre (SDC) and have the introduced a new permanent Crewing Support Officer.

Our Crewing Optimisation Group (COG) within the SDC aims to maximise crewing levels across the service. Our Assistant Chief Fire Officer will be working strategically with the Head of Response and the SDC to continue to improve our crewing availability and continue to focus on those marginal gains.

Core Measure 27: Eligible operational staff in qualification

89.4% in Q3 2021-22 Current RAG
Status
AMBER

This measure examines the average percentage of operational staff who have current qualifications in the use of breathing apparatus, emergency response driving and incident command (as outlined in the 8 core areas of the Fire Professional Framework) as required by their role. Staff who are long term sick, on secondment, maternity leave or alternative duties are excluded from this measure.

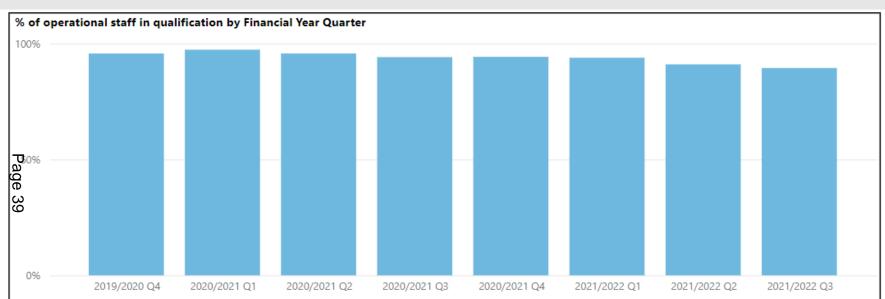
Target: >95% Green 85%–95% Amber <85% Red

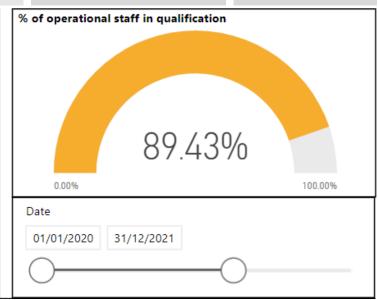
Service Owner:

Cathy McDonnell

Area:

POD





Commentary

There is a slight decline in the performance of this measure this quarter. The full report for each competency is made up of a number of modules which are delivered centrally and are performing well however there are two factors impacting the overall performance figures. Firstly the modules completed on the station are short of expectation and secondly, staff who are ineligible for these qualifications may not be accurately recorded on the system.

Actions

Following an internal review and audit we are clear on the areas of focus for improvement for this core measure which include the need for accurate recording of data on our systems particularly where staff are not 'eligible' for the relevant qualifications or attract a dual contract which many of our staff have. Secondly, we are improving training delivery to ensure competence is maintained and monitoring has been amended to report staff before they go out of date. This will further improve local management of the competencies and ensure action is taken for those that require assessments to take place

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Report to Fire and Rescue Service Scrutiny Committee

4 March 2022

End of December 2021 (Quarter 3) Quarterly Performance and Resources Report – Focus for Scrutiny

Report by Director of Law and Assurance

Summary

The Quarterly Performance and Resources Report (PRR) is the Council's reporting mechanism for corporate performance, finance, savings delivery and business performance. It has been re-designed to reflect the new priorities, outcomes and measures included in Our Council Plan. It will be available to each scrutiny committee on a quarterly basis. Each committee will consider how it wishes to monitor and scrutinise performance relevant to their area of business.

The report (Appendix A) reflects the portfolio position at the end of December 2021. It includes information which is specifically relevant to the portfolio responsibilities of the scrutiny committee including an update on the tri-service Joint Fire Control project with Surrey and East Sussex Fire and Rescue which went live on the 17th November, a refocus on close call activity and how the service have adapted the protection ways of working to focus on desktop and remote fire safety audits to overcome the remaining challenges of access due to Covid which is proving beneficial for the premises.

The current Risk Register is included to give a holistic understanding of the Council's current performance reflecting the need to manage risk proactively.

Focus for scrutiny

The Committee is asked to consider the PRR (Appendices A and B). Areas for scrutiny include:

- 1) The effectiveness of measures taken to manage the Council's financial position and expectations;
- 2) The particular performance indicators and measures identified as most critical to the focus of the Committee and whether the narrative provides assurance about the position presented and likely outcomes;
- 3) The on-going impact of the Covid-19 emergency situation on the Council's financial resilience and performance;
- 4) Any areas of concern in relation to the management of corporate risk;
- 5) Whether the report indicates any issues needing further scrutiny relevant to the Committee's portfolio area and, if so, the timing of this and what further data or information may be required; and
- 6) Identification of any specific areas for action or response by the relevant Cabinet Member.

The Chairman will summarise the output of the debate for consideration by the Committee.

1. Background and context

- 1.1 The Performance and Resources Report (PRR) replaces the Quarterly Performance Report (QPM). The PRR is designed to be used by all Scrutiny Committees as the main source of the County Council's performance information.
- 1.2 The current report has two changes in the presentation of the information:
 - Capital performance within the Portfolio Sections has been moved to the start of each capital section to enable the reader to focus on the performance of projects; this is complimented by the financial aspect of the capital programme and links the areas together. In addition, explanations of the capital finance movements (including additions to the programme) have been included for completeness and governance reasons.
 - The arrows on the KPI measures have been updated. A green upward arrow indicates that performance is improving, a downward red arrow indicates performance is worsening, and a horizontal amber arrow indicates no change to performance.
- 1.3 Appendix C How to Read the Performance and Resources Report, provides some key highlights on the structure, content and a detailed matrix of the sections of the report which are expected to be reviewed by the different scrutiny committees.
- 1.4 The background and context to this item for scrutiny are set out in the attached appendices (listed below). As it is a report dealing with internal or procedural matters only the Equality, Human Rights, Social Value, Sustainability, and Crime and Disorder Reduction Assessments are not required.

Tony Kershaw

Director of Law and Assurance

Contact Officer

Rachel Allan, Senior Advisor (Democratic Services), 0330 222 8966

Appendices

Appendix A – Community Support, Fire and Rescue Portfolio - Performance Summary

Appendix B – Corporate Risk Register

Appendix C – How to read the report

Background Papers

None

Community Support, Fire and Rescue Portfolio - Summary

Performance Summary

1. The Portfolio has a number of performance highlights to report this quarter:

Fire and Rescue Service

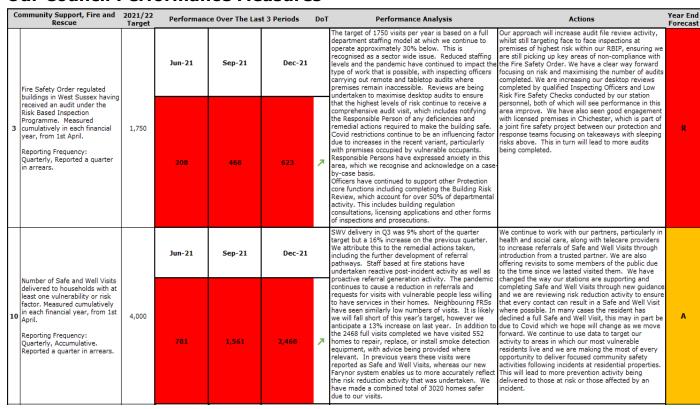
- The tri-service Joint Fire Control project with Surrey and East Sussex Fire and Rescue went live on the 17th November. The new arrangement provides a shared control centre based in Surrey where teams align mobilising services to enhance capability, efficiency and resilience for the Service. This new arrangement will assist with performance by focussing on movement of resources and call handling times which will improve our appliance attendance times for critical fires and special services.
- We are refocussing on close call activity after every fire to ensure that the
 immediate neighbourhood receives fire safety advice. This has resulted in a
 notable increase in Safe and Well Visit referrals and visits completed. Work is
 also underway to create partnerships with GP surgeries in locations where
 these fires occur to further increase local referrals of the most vulnerable.
- Accidental and deliberate fires remain very low, demonstrating the continued benefit of our fire prevention activity to ensure that the most vulnerable are kept safe from fire.
- We have adapted our protection ways of working to focus on desktop and remote fire safety audits to overcome the remaining challenges of access due to Covid. This is proving beneficial for the premises who receive the same advice and guidance but have less disruption to their business. We are also seeing a notable increase in the number of audits that we can deliver using this approach.

Communities

- Following wide ranging consultation, and in partnership with East Sussex County Council and Brighton and Hove City Council, West Sussex has published its Domestic Abuse Safe Accommodation Strategy setting it out its commitments to provide further support for our communities.
- The backlog of births needing to be registered continues to reduce with approximately 120 babies over six weeks (down from 180 end of Q2). We have re-opened further outstations with Shoreham, Midhurst, Bognor and Storrington all now open (by appointment as resource allows).
- Libraries have been acting as collection points for lateral flow device kits for residents, as part of a pan-Sussex operation to utilise library front doors as easy access points for residents. This last quarter has seen demand for kits grow significantly, with weekly numbers of kits handed out by library staff increasing over 350%. A total of almost 21,000 kits were distributed by our libraries this quarter; by December we were exhausting each delivery on a daily basis.

- The Refugee Resettlement Team has continued to work towards accommodating families under the Afghan Relocation and Assistance Policy Scheme (ARAP) and Afghan Citizens Relocation Scheme (ACRS). During the quarter the Team has been successful in securing more suitable properties from both the private and social sectors, which far exceeds the original plan of 8-10 properties for the financial year 2021/22. Work has also commenced on supporting the Hong Kong British Nationals Overseas (HKBNO) that have started to arrive in West Sussex.
- The Community Hub works closely with Public Health and provides the Local Tracing Partnership service (LTP) for East and West Sussex, for residents that have tested positive for Covid-19. 26,580 cases were passed to the LTP team in the three months of October to December 2021.
- 1,204,692 people visited our corporate website where they gained information or transacted with the Council. Customer Experience, Capita OSD Team have been working with all services to make all documents and web content accessible and SOCITM Silktide UK Councils index now rates the West Sussex County Council website as 'Great' for accessibility.
- More than 200 packets of illegal cigarettes were recently seized from a shop in Worthing. The illicit haul was part of an operation led by West Sussex Trading Standards officers targeting rogue retailers. Trading Standards Officers visited three shops in Worthing supported by Sussex Police following a tip-off claiming they were selling illegal tobacco. A total of 205 packets of illegal cigarettes and 63 packets of tobacco were found at one of the shops. Work to protect the vulnerable also led to a <u>rogue trader receiving a three-year prison</u> <u>sentence</u>.

Our Council Performance Measures



С	ommunity Support, Fire and Rescue	2021/22 Target	Performano	e Over The Las	st 3 Periods	DoT	Performance Analysis	Actions	Year End Forecast
	Percentage of 'critical fires' where the first appliance in attendance meets our emergency response standard Reporting Frequency: Quarterly, Reported a quarter in arrears.	89.0%	Jun-21	Sep-21	Dec-21		Following six quarters of strong performance in meeting first fire engine attendance standards we had a significant drop in Q2 and an increase in Q3. This increase means that our last three months performance have been 3.33% below target. For the	arrangements we now have engagement and additional scrutiny at both operational and strategic levels. This work and the inclusion of our colleagues	
42			93.1%	82.1%	86.7%	7	last 6 months we have been trialling the Dynamic Cover Tool (DCT) in Fire control. This tool allows the control operators to assess the impact of any standby moves on response times before implementing them. During this trial we have been reviewing the impact this has had on our response times and the impact it's had on our staff. While we have seen how valuable the DCT is, we recognise that improvements can be made that will maximise the performance of our existing resources.	from East Sussex FRS is already seeing improvement in areas of performance that contribute to responding quickly to incidents. One of the main changes is the development to the way we use the Dynamic Cover Tool (DCT) in JCC across the County. This is intended to improve our response times by focusing cover at a district or local level. Additionally, we are reviewing all elements that contribute to meeting our response standards. This has seen work done at our fire stations to ensure we are consistently doing everything we can to respond to all incidents as quickly as possible.	G
	Percentage of `critical special service incidents' where the first appliance in attendance	80.0%	Jun-21	Sep-21	Dec-21		We have seen a small increase in retained availability and a corresponding increase in the overall countywide attendance time to critical special service incidents. At the start of Q2 the Dynamic Cover Tool (DCT) trial was implemented. This is designed to	reviewing the management of our Service Delivery Centre (SDC) and have the introduced a new permanent Crewing Support Officer. Our Crewing Optimisation Group (COG) within the	
43	meets our emergency response standard Reporting Frequency: Quarterly, Reported a quarter in arrears.		79.9%	77.1%	77.9%	7	assist control room operators in ensuring that the resources that are currently available are always in the best place to maximise overall response times. The use of the DCT has been effective in maximising the use of available resource with respect to critical special service calls.	SDC aims to maximise crewing levels across the service. Our Assistant Chief Fire Officer will be working strategically with the Head of Response and the SDC to continue to improve our crewing availability and continue to focus on those marginal gains.	Α
	Percentage of suspected scam victims, identified to WSCC by the National Trading Standards		Jun-21	Sep-21	Dec-21		The appointment of the second Protecting The Vulnerable Officer, in conjunction with a low number of referrals received from the National Scams Team over the last guarter, has meant that we have been	No further actions currently required.	
4	Scams Team, receiving a pro- active intervention from the Trading Standards Service Reporting Frequency: Quarterly	100.0%	82.0%	82.0%	100.0%	7	able to have a big impact on this measure over the last quarter and achieved 100% for the first time.		G
	Use of virtual/digital library services by residents		Jun-21	Sep-21	Dec-21		We are continuing to see higher than normal levels of demand for eBooks and virtual library services, evidence of some customers making greater use of online services which they found through lockdowns.	No further actions currently required.	
33	Reporting Frequency: Quarterly, Accumulative	5.45m	1.48m	2.93m	4.31m	7	Tolline services which they found through lockdowns.		G
	Number of people reached and supported via the West		Jun-21	Sep-21	Dec-21		59k residents supported to September 2021 as part of the Central Government Covid-19 Shielding Programme, which ended on the 15/9/2021. From October 2021 the Community Hub is supporting	No further actions currently required.	
34	Sussex Community Hub during 4 the Covid-19 pandemic Reporting Frequency: Quarterly, Accumulative	35,000	58,230	59,097	62,270	7	residents with Covid-19 related needs and households with wider essential needs such as food, energy and water bills via the Household Support Fund. Please note this measure does not include the volumes for the Local Tracing Partnership.		G

Website link to Our Council Performance Measures here.

Finance Summary

Portfolio In Year Pressures and Mitigations

Pressures	(£m)	Mitigations and Underspending	(£m)	Year end budget variation (£m)
Covid-19 pandemic forecast expenditure/ allocations to third parties	£11.666m	Assumed funding from Covid-19 grant	(£11.666m)	
Fire – Additional costs within the Electronic Services Group and other related pressures including the Dynamic Cover Tool	£0.350m	Communities – Increased demand for registrar's services	(£0.200m)	
Fire - Increased pressure from supply of enhanced tactical PPE firefighter uniforms	£0.100m	Communities - Staffing vacancies within Trading Standards and Communities teams	(£0.259m)	
Fire - Increase in overtime within the Fire Response Service	£0.150m	Communities - In year underspending from homeworking/ change in service delivery due to pandemic restrictions	(£0.065m)	
Communities – Additional cost following work undertaken on long inquests	£0.152m			
Communities – Increase in mortuary contract	£0.075m			
Community Support, Fire & Rescue Portfolio - Total	£12.493m		(£12.190m)	£0.303m

Significant Financial Issues and Risks Arising

2. There are no significant issues to raise within this section.

Financial Narrative on the Portfolio's Position

- 3. The Community Support, Fire and Rescue Portfolio is currently projecting a £0.303m overspend, a reduction of £0.159m when compared to September.
- 4. Within the Fire and Rescue Service, there has been a £0.1m increase in overspend projected relating to an increase in overtime costs in response to emergencies and other one-off minor variations.
- 5. Within Communities, the Registrars Service have experienced an increase in the number of ceremonies they have delivered following the easing of Covid-19 restrictions. This rise in volume has increased the expected income by a further £0.1m when compared to the September projection.
- 6. Underspending on staffing and vacancy management has led to a further £0.094m reduction in the projection this month. In addition, savings from homeworking and changes in service delivery due to pandemic restrictions has also generated an estimated £0.065m following a reduction in staff mileage, home working and changes to working arrangements.

Savings Delivery Update

7. The portfolio has a number of 2021/22 savings included within the budget and one saving outstanding from the 2020/21 financial year. Details of these savings are included in the table below:

Saving Activity	2020/21 Savings £000	December 2021		Narrative	2022/23
Communities - Increased income from Registrars Services	150	150	G	Although achieving income assumption currently, post-pandemic sustainability of saving still to be determined.	G

Saving Activity	2021/22 Savings £000	December 2021		Narrative	2022/23
Development of adapted Library Service offer in conjunction with Parish Councils	70	70	G	Discussions with Parish Councils are continuing to deliver this saving on a long-term basis; however, in year mitigations have been found.	Α
Increased income from copy certificates for Registrars' Services	150	150	G		G
Removal of Community Initiative Fund (CIF)	140	140	В		В
Review of Partnerships & Communities Team	70	70	В		В
Review of agency staff	8	8	В		В

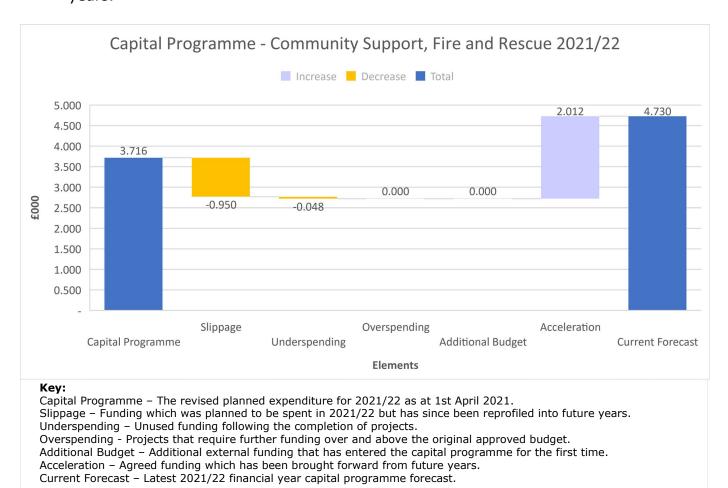
Capital Programme

Performance Summary - Capital

8. There are five schemes within the portfolio and all five schemes in delivery are rated green, indicating that the schemes are reporting to plan.

Finance Summary - Capital

- 9. The capital programme; as approved by County Council in February 2021, agreed a programme totalling £3.645m for 2021/22. £0.071m of expenditure, originally profiled to spend in 2020/21, was slipped into 2021/22, revising the capital programme to £3.716m.
- 10. Since this time, profiled spend has increased overall by £1.014m, to give a current year end projection for 2021/22 of £4.730m. Of this decrease -£0.950m relates to slippage, -£0.048m relates to underspending within current projects and £2.012m relates to projects where funding has been accelerated from future years.



11. Details of movements of the financial profiling within the capital programme between October and December are as follows:

- Acceleration: £2.012m. Movement since Q2 report: £1.645m
 - Live Training Centre and Horsham Fire Station: £1.645m.
 Works on the new fire station are progressing at pace therefore funding has been accelerated to meet the new profiled expenditure in 2021/22.

Risk

12. The following table summarises the risks on the corporate risk register that would have a direct impact on the portfolio. Risks to other portfolios are specified within the respective appendices to this report.

Risk No.	Risk Description	Previous Quarter Score	Current Score
CR60	There is a risk of failing to deliver the HMICFRS improvement plan , leading to an adverse effect on service delivery; which may result in failing any subsequent inspection.	15	15

13. Further details on all risks can be found in **Appendix 5** - Corporate Risk Register Summary.

Corporate Risk Register Summary - December 2021

CR58

Current Score

25

Target Score

9

Initial

Score

25

Risk Change Unchanged

Risk Description

The care market is experiencing an unprecedented period of fragility, particularly due to staff shortages and increasing demand. This has been further exacerbated by COVID19, including the mandatory requirement for care staff to have a vaccination; however this also extends to WSCC staff requiring access to these facilities (i.e. Social Workers, OT), and contractors. If the current and future commercial/economic viability of providers is not identified and supported, there is a risk of failure of social care provision which will result in funded and self-funded residents of West Sussex left without suitable care.

Date Risk Raised

Risk Owner

Executive Director of Adults and Health

05/09/2018

Risk Stategy

Treat

Risk Control/Action	Target Date
Administration of central government funding to provide financial support to the sector.	ongoing
Collection of market information on Firefly. Analysis of information and appropriate level of quality assurance response.	ongoing
Financial analysis of high risk provision - due diligence checks.	ongoing
In the event of an incident, ensure the consistent implementation of Emergency Response Plans, including a full de-brief and lessons learned.	ongoing
Provision of regular support and communication to care homes to monitor financial sustainability (increased engagement during COVID-19 pandemic to monitor Infection Control Grant).	ongoing
Regular review of care homes business continuity arrangements to address government vaccination directive.	ongoing
Review capacity of residential and non-residential services to ensure service availability and to support identification of contingencies if needed.	ongoing

CR39a

Current Score

25

Target Score

16

Initial Score

20

Risk Change

Unchanged



Risk Description

Cyber threat is an evolving, persistent and increasingly complex risk to the ongoing operation of County Council.

There is a risk of a successful cyber attack directly from external threats; or indirectly as a consequence of members or staff falling prey to social engineering or phishing attacks. The potential outcome may lead to significant

service disruption and possible data loss.

Date Risk Raised 01/03/2017

Risk Owner

Director of Finance & **Support Services**

Risk Stategy

Treat

Risk Control/Action	Target Date
Conduct tests including penetration, DR and social engineering. (conducted 6 monthly)	ongoing
Ensure that cyber-attack is identified early, that reporting & monitoring is effective, and recovery can be prompt.	ongoing
Improve staff awareness of personal & business information security practices & identification of cyber-security issues. Continued actions due to evolving threats.	ongoing
Maintain IG Toolkit (NHS) & Public Service Network security accreditations.	ongoing $\begin{cases} \begin{cases} $
Provide capacity & capability to align with National Cyber-Security centre recommendations.	ongoing Appe
Regular review, measurement and evaluation of corporate (technological/process) / organisational (behavioural) response to current and emerging cyber threats, where applicable to undertake pertinent actions to mitigate risks identified.	ongoingdix B
Transition to a controlled framework for process and practice.	ongoing

CR72

Current Score

16

Target Score

8

Initial Score

20

al Risk Change

Unchanged



Risk Description

The government have stipulated that from 9 Sep 2021 children in care under 16 will not be allowed to be accommodated in unregulated placements. This has strengthened existing regulations that stipulate that all children and young people who require residential care must be placed within registered children's homes. Due to a local and nationwide shortage of registered provision there is a risk that these children and young people will not be cared for in settings that best meet their needs, which could lead to safeguarding concerns and enforcement action against the providers of unregistered homes and local authorities.

Date Risk Raised

01/08/2021

Risk Owner

Executive Director of Children, Young People and Learning

Risk Stategy

Treat

Risk Control/Action	Target Date
Conduct an annual review and update of the placement sufficiency and commissioning strategy, in line with the market position statement.	ongoing bnda I
Develop and publish a market position statement to be sent out to care providers and other LA's to engage them in placements and requirements, in line with the needs of children.	01/03/20 28 5b
Escalate to Assistant Directors and Exec Director any situation where a child or young person is at risk of being without a registered provision when they require one.	ongoing

CR61

Current Score

15

Target Score

10

Initial Score

25

Risk Change

Unchanged



Risk Description

A 'serious incident' occurs resulting in the death or serious injury of a child where the Council is found to have failed in their duty to safeguard, prevent or protect the child from harm.

Date Risk Raised

01/06/2019

Risk Owner

Executive Director of Children, Young People and Learning

Risk Stategy

Treat

Risk Control/Action	Target Date
Implement Practice Improvement Plan (PIP). Improvement Plans include management development and HCC intervention.	ongoing
Provide proactive improvement support to services to assure effective safeguarding practices.	ongoing

5

Target Score

10

Initial Score Risk Change

Unchanged

25

Risk Description

The government have relaxed COVID-19 restrictions, however there are still requirements for Local Authorities to support the management of the COVID-19 pandemic. If there is a resurgence in COVID-19 infections and local (county or district) responsibilities are prolonged or additional measures imposed, there is a risk services will fail to deliver existing work plans due to staff responding to the impact of the pandemic, or staff shortages due to sickness.

Date Risk Raised 01/03/2020

Risk Owner

Chief Executive

Risk Stategy

Treat

Risk Control/Action	Target Date
Develop communications when required to manage expectations of staff and residents on WSCC response position.	ongoing
Regular engagement with MHCLG and ensure information and direction is discussed and implemented through the Strategic Coordinating Group (SCG-Gold) and Tactical Coordination Group (TCG-Silver).	ongoing
Review and update business continuity and service critical plans.	ongoing
Services to consider impacts should government impose restrictions (via tier system) at a district level as opposed to county.	ongoing
To continue to lobby government groups to influence funding decisions.	ongoing

CR69

Current Score

15

Target Score

10

Initial Score

25

Risk Change

Decreasing



Risk Description

Page 51

If the council fail to make the necessary improvements to progress from the previous 'inadequate' rating, there is a risk that children's services will fail to deliver an acceptable provision to the community.

Date Risk Raised

01/03/2020

Risk Owner

Executive Director of Children, Young People and Learning

Risk Stategy

Treat

Risk Control/Action	Target Date
Continue to work with Hants CC as a partner in practice to improve the breadth of children's service.	ongoing
Deliver Children First Improvement Plan.	ongoing
Implement the Children First Service transformation model	ongoing

Agenda Item 5b Appendix B

Score 10

Target

Initial Score Risk Change

Unchanged

Risk Control/Action

20

Target Date Agenda Item 5b ongoing B Ensure robust project and programme governance in place and monitor delivery.

Risk Description

There is a risk of failing to deliver the HMIC FRS improvement plan, leading to an adverse affect on service delivery; which may result in failing any subsequent inspection.

Date Risk Raised 01/04/2019

Risk Owner

Chief Fire Officer

Risk Stategy

Treat

CR11

Current Score

Target Score

Initial Score

20

Risk Change

Unchanged



Risk Description

Page 52

There is a risk that the Council will not be seen as an attractive place to work by current and potential employees. This will result in problems recruiting and retaining staff in key skills areas.

Date Risk Raised

01/03/2017

Risk Owner

Director of Human Resources & Org Dev

Risk Stategy

Treat

Risk Control/Action Development of comprehensive employee value proposition. Longer term strategies for addressing recruitment issues e.g. apprenticeships, growing our own. Produce Directorate Workforce Plans to identify skills, capacity and capability requirements. Target Date 01/06/2022 01/06/2022		
Longer term strategies for addressing recruitment issues e.g. apprenticeships, growing our own. Produce Directorate Workforce Plans to identify skills, capacity and capability 01/04/2022	Risk Control/Action	Target Date
our own. Produce Directorate Workforce Plans to identify skills, capacity and capability 01/04/2022	Development of comprehensive employee value proposition.	01/06/2022
		ongoing
		01/04/2022

Target Score

8

Initial Score Risk Change

Unchanged

25

Risk Description

If there is a failure to adequately prioritise, finance and resource our efforts to deliver on WSCC Climate Change commitments (e.g. 2030 Carbon Neutrality), there is a risk that there will be insufficient capacity and capabilty to complete the necessary actions within the required timeframes. This will lead to prolonged variations in weather and adverse impacts on WSCC service provision.

Date Risk Raised 01/01/2022

Risk Owner

Chief Executive

Risk Stategy

Treat

Risk Control/Action	Target Date
Align pipeline of projects for existing and future funding opportunities	ongoing
Built into county-wide Business Planning and budgeting process	ongoing
Clear prioritisation of CC Strategy delivery within Our Council Plan	ongoing
Existing estate & infrastructure made climate change resilient & future developments designed to be as low carbon & climate change resilient	ongoing
Existing governance bodies (eg, but not limited to, ELT, CAB, Asset Hubs, Procurement Board) are held accountable for relevant areas of delivery by the Climate Change Board and WSCC democratic bodies	ongoing
Recruitment and training policy to ensure all staff & elected members are suitably informed on climate change issues & that specialist skills are embedded through recruitment & training to enable delivery	ongoing
SMART programme of actions based on clear definitions and metrics	ongoing

CR22

Current Score

12

Target Score

12

Initial Score

16

Risk Change

Unchanged



Risk Description

Page 53

The financial sustainability of council services is at risk due to uncertain funding from central government and/or failure to make the required decisions to ensure the budget is balanced. This has been compounded further with the COVID-19 crisis, and the recent Ofsted and HMIC FRS reports.

Date Risk Raised

01/03/2017

Risk Owner

Director of Finance & Support Services

Risk Stategy

Tolerate

Risk Control/Action

Target Date

Financial impacts arising from the Covid-19 national emergency need to be reflected and addressed within the PRR and MTFS as appropriate.

Monitor the use of additional funds made available to improve service delivery.

Ongoing

Pursue additional savings options to help close the budget gap.

Agenda Item 5b Appendix B

Target Score

Initial Score Risk Change

Unchanged

Risk Description

There is an increasing demand placed on the senior officers due to the ongoing threat of COVID19 and additional burdens due to devolved responsibilities. This may lead to a continued lack of capacity to deal with strategic/organisational issues. leading to poor decision making.

Date Risk Raised 01/08/2020

Risk Owner

Chief Executive

Risk Stategy

Tolerate

Risk Control/Action	Target Date
Continue to monitor service resource impact.	ongoing en d
Provision of support to services when required.	ongoing is a state
	k tem
	(D)

CR39b

Current Score

9

Target Score

Initial Score

20

Risk Change

Unchanged



Risk Description

Page 54

Data protection responsibilities. The Council is a Data Controller and has obligations and responsibilities arising from that role. Council needs resources. skills, knowledge, systems and procedures to ensure obligations are met.

Date Risk Raised 01/03/2017

Risk Owner

Director of Law & Assurance

Risk Stategy

Tolerate

Risk Control/Action	Target Date
Adopt ISO27001 (Information Security Management) aligned process & practices.	ongoing
Enable safe data sharing, including using appropriate data standards & appropriate anonymization techniques.	ongoing
Ensure the skills and knowledge is available to support Caldicott Guardian in ASC.	ongoing
Maintain IG Toolkit (NHS) & Public Service Network security accreditations.	ongoing
Review IT systems implemented prior to 25 May 2018 to confirm compliance with updated regulations.	Timetabled
Test the effectiveness of DPIA	ongoing
Undertake Data Privacy Impact Assessments (DPIA) when systems or processes change and carry out resulting actions.	ongoing

9

Target Score Initial Score

20

Risk Change

Unchanged

Risk Description

WSCC are responsible for ensuring the HS&W of its staff and residents. There is a risk that if there is a lack of H&S awareness and accountability by directorates to capture and communicate in accordance with Council governance arrangements, it will lead to a serious health & safety incident occurring.

Date Risk Raised 01/03/2017

Risk Owner

Director of Human Resources & Org Dev

Risk Stategy

Treat

Risk Control/Action	Target Date
Conduct a training needs analysis, produce gap analysis to understand requirements a produce suitable courses as a consequence.	and ongoing
Develop and introduce a more comprehensive risk profile approach and front line serve based audits.	vice ongoing
Incorporate HS&W information into current performance dashboard.	ongoing
Purchase, develop and introduce an interactive online H&S service led audit tool.	ongoing
Regular engagement with other LA's on best practice and lessons learned.	ongoing

CR7

Current Score

8

Target Score

4

Initial Score

16

Risk Change

Unchanged



Risk Description

Page 55

There are governance systems which inhibit effective performance and a culture of non-compliance and also a lack of standardisation in some systems and processes. Skills and knowledge of systems inadequate and excessive effort required for sound decisions and outcomes.

Date Risk Raised 01/03/2017

Risk Owner

Director of Law & Assurance

Risk Stategy

Treat

Risk Control/Action	Target Date
Audit plan focussing reviews on key corporate support systems to identify areas in need of improvement.	ongoing
Data on areas of non-compliance used to inform Directors to enforce compliance with standards.	ongoing
Guidance to CLT on governance. Schedule and deliver associated training	01/01/2022
Regular compliance monitoring and active corporate support when non-compliance happens to establish better practice.	ongoing Agen
	enda Item 5b Appendix B

CR65

Current Score

6

Target Score Initial Score Risk Change

20

Unchanged



Risk Description

The review of corporate leadership, governance and culture recommended in the Children's Commissioner's report is not fully undertaken or effectively implemented leading to a lack of necessary improvement and further service failures or external intervention.

Date Risk Raised 01/12/2019

Risk Owner

Chief Executive

Risk Stategy

Tolerate

Risk Control/Action

Target Date Appenda Item 5b

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How to Read the Performance and Resources Report

The Performance and Resources Report is separated into three sections:

- a. **Summary Report** This is an overall summary of the County Council's performance for the latest quarter, including:
 - Performance highlights of the County Council's priorities,
 - Overview of the revenue and capital financial outlook across the organisation,
 - Key corporate risks with a severity graded above the set tolerance level,
 - The latest workforce overview.
- b. Sections by Portfolio (Sections 1-10) There is a separate section for each Portfolio:
 - Section 1 Adults Services
 - Section 2 Children's and Young People
 - Section 3 Learning and Skills
 - Section 4 Community Support, Fire and Rescue
 - Section 5 Environment and Climate Change
 - Section 6 Finance and Property
 - Section 7 Highways and Transport
 - Section 8 Leader
 - Section 9 Public Health and Wellbeing
 - Section 10 Support Services and Economic Development

Each Portfolio covers the following aspects in detail which enables the Section to be viewed as a stand-alone report:

• Updates of the performance KPIs agreed in Our Council Plan and the action taking place, including Climate Change performance measures.

The KPI measures compare the last three periods - this may be quarterly, annually or other time periods (depending on how regularly data is released); however, each measure will explain the reporting period.

The arrows on the KPI measures represent the direction of travel compared to the previous quarter:

- A green upward arrow ⁷ shows that performance is improving,
- A red downward arrow → shows performance is worsening, and,
- o An amber horizontal arrow → shows no change to performance.
- Overview of the revenue financial position, risks and issues and savings update.
- Overview of the capital financial position and latest capital performance.
- Details of the corporate risks which have a direct impact on the specific Portfolio.

c. **Supporting Appendices** – Other documents within the report include:

- Appendix 1 Revenue Budget Monitor and Reserves
- Appendix 2 Covid-19 Summary
- Appendix 3 Service Transformation
- Appendix 4 Capital Monitor
- Appendix 5 Corporate Risk Register Summary
- Appendix 6 Workforce

Scrutiny Committee Documents

The relevant appendices will be made available to Scrutiny Committees prior to being considered by Public Cabinet. The complete reporting pack, including the Cabinet Cover Report, will be considered by the Performance and Finance Scrutiny Committee.

A detailed matrix of the Performance and Resources Report's sections and appendices by Scrutiny Committee responsibility is shown below. The areas in dark green indicate the Scrutiny Committees areas of responsibility and the areas in light green denote areas of the report which should be included in the Committee papers for context and consideration where appropriate.

PRR Matrix - Documents for Scrutiny Committees

		CYPSSC	HASC	CHESC	FRSSC	PFSC
Summary Report						~
Section 1	Adults Services Portfolio		V			~
Section 2	Children and Young People Portfolio	~				~
Section 3	Learning and Skills Portfolio	V				~
Section 4	Community Support, Fire and Rescue Portfolio			V	~	~
Section 5	Environment and Climate Change Portfolio			V		~
Section 6	Finance and Property Portfolio					~
Section 7	Highways and Transport Portfolio			V		V
Section 8	Leader Portfolio					~
Section 9	Public Health and Wellbeing Portfolio		V			V
Section 10	Support Services and Economic Development Portfolio					V
Appendix 1	Revenue Budget Monitor and Reserves					~
Appendix 2	Covid-19 Summary					~
Appendix 3	Service Transformation					~
Appendix 4	Capital Monitor					V
Appendix 5	Corporate Risk Register Summary	~	V	~	~	V
Appendix 6	Workforce					V

KEY:	
	Specific Committee Responsibility
	To Be Included In Committee Papers

Report to Fire and Rescue Service Scrutiny Committee

4 March 2022

Priority Programme Update

Report by Deputy Chief Fire Officer

Electoral division(s): All

Summary

This report provides an overview of the priority programmes of work during Quarter 3 of 2021/2022. This includes progress against the People Action Plan, the Improvement Plan and the Integrated Risk Management Plan (IRMP) Action Plan.

This is a standing item on the Work Programme for the Fire and Rescue Service Scrutiny Committee.

Focus for Scrutiny

The Committee is asked to review the progress reported in relation to the priority programmes, which include the IRMP Action Plan, the Improvement Plan and the People Action Plan and provide any comments to the Cabinet Member.

Proposal

1 Background and context

Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) Improvement Plan

- 1.1 West Sussex Fire & Rescue Service HMICFRS, round two inspection was concluded on Monday 22 November 2021.
- 1.2 The Inspectorate will now collate all the information into the report which we are expecting to see when the inspectorate publishes their findings from the second tranche of inspections in the Spring

2 Cause of Concern 1 - Preventing Fire and Other Risks

2.1 All actions have been undertaken with regards to this Cause of Concern and considerable work has been undertaken to enable us to recommence the activity now that there has been a lift in the COVID restrictions.

3 Cause of Concern 2 - Protecting the Public Through Fire Regulation

3.1 All actions have been undertaken with regards to this Cause of Concern and considerable work has been undertaken to enable us to recommence the activity now that there has been a lift in the COVID restrictions.

4 People Action Plan

- 4.1 The annual review of the People Action Plan was presented in January 2022 to SEB to ensure that this will address all the issues from the original improvement plan.
- 4.2 There is now a focus on communication and engagement with wider staff groups, including webinars with Group and Station managers starting in March 2022.
- 4.3 This plan will then be reviewed in line with Community Risk Management Plan underpinned by associated service plans April 2022.

5 Cause for Concern 3 - Promoting the Right Values and Culture

- 5.1 Our new People Service plan activity aligns to the WSFRS Core Values, WSCC People Framework, National Fire Chiefs Council Core Code of Ethics, NFCC Leadership Framework, NFCC People Strategy and NFCC Equality Framework.
- 5.2 There are six workstreams within the plan:
 - 5.2.1 Recruitment, Retention & Workforce Planning
 - 5.2.2 Operational Training & Development
 - 5.2.3 Career Planning, Professional Development, Talent Management
 - 5.2.4 Health & Wellbeing
 - 5.2.5 Equality, Diversity & Inclusion
 - 5.2.6 Leadership Development
- 5.3 This plan includes a whole service approach to Community Engagement which was reinvigorated at a recent leadership Away Day held virtually in January 2022.
- 5.4 Leadership & Cultural Change Programme will be rolled out commencing in Q1 22/23 and will cover some key aspects and a more holistic approach to delivering training for our managers in several areas including:
 - 5.4.1 Creating psychological safety in all aspects of our work
 - 5.4.2 Dignity at Work policy (WSCC) and roll out and associated organisational training throughout the year.
 - 5.4.3 Inclusive Employers training delivered to all leaders within the organisation, this will further be cascaded to all staff to ensure and cohesive organisational approach.
 - 5.4.4 Developing leadership behavioural skills to improve their ability to support their teams and peers.
- 5.5 Workforce Planning processes are being reviewed and adapted to become a clear, transparent processes.

- 5.6 An Equalities, Diversity & Inclusion Action plan has been developed to ensure that activity relating to this is measurable and clear reporting of initiatives and the outcomes achieved from each.
- 5.7 Completed a self-assessment to benchmark WSFRS performance in relation to Equality Diversity & Inclusion, delivering a report and action proposals for Diversity and Inclusion Steering Group to progress into the Community Risk Management Plan.

5.8 A look forward:

- 5.8.1 Becoming an anti-racist organisation through development of a toolkit to raise awareness of racism, aid discussions in the workplace and signpost to additional learning activities by June 2022.
- 5.8.2 Inclusive Employers training to commence through management starting in Quarter 1 22/23 with completion in September 2022 for all staff.

6 Cause for Concern 4 - Ensuring Fairness and Promoting Diversity

- 6.1 People Impact Assessment training continues to be delivered and EDI Advisor continues to advise staff undertaking these, including our new Community Risk Management Plan.
- 6.2 Key engagement has been undertaken with all managers to review organisational skills and knowledge needs to identify gaps and solutions.
- 6.3 Workforce planning continues across People support and HR Business Partners, to ensure there are clear strategic alignments and dependency management of any staff moves to ensure that there are fair and consistent processes and supporting policies. This includes succession planning and forecasting to avoid future recruitment gaps as individuals retire.

6.4 A look forward:

- 6.4.1 Completion of implementation of wellbeing champions to have a mix of grey/green book staff members supporting our wellbeing vision and sharing the content with their areas by April 2022. This is to extend the organisational reach through advocates that help to share our messages and feedback what is needed in their area. They also assist in events & activities.
- 6.4.2 Redesign Development Operating Procedures to include alternative recruitment methods by April 2022.
- 6.4.3 Review and redesign of Transfers & Moves SOP by March 2022.

7 Areas for Improvements updates

- 7.1 Local Risk Management Plans continue to progress with activity having required adaptation due to the current pandemic and planning for transition as this eases. Community risk data is being updated monthly to ensure it is current information and by April 2022 there will be an annual refresh against risk.
- 7.2 A look forward:

- 7.2.1 Develop a neurodiversity toolkit by July 2022 for WSFRS including components that can be used, description of support and associated costings.
- 7.2.2 Closure of the Risk Alignment Project in March 2022 and a clear annual plan and approach to review risk regularly.

8 Integrated Risk Management Plan 2018-22 (IRMP)

- 8.1 4Fire Strategic Board leads a series of collaborative projects including one on Incident Command and has more recently approved the commencement of a project relating to Breathing Apparatus procurement and supporting operational alignment which will be led by West Sussex. This project is to commence in Q1 2022/23 following the recruitment of a joint resource to drive delivery.
- 8.2 Community Risk Management Plan (CRMP) 2022 responses are being analysed and the appropriate management response being developed to enable the approval of the CRMP in March 2022. This includes consideration of the reach of the consultation in terms of demographic and protected characteristics.
- 8.3 Public Consultation ended on 21st January 2022 and our new CRMP is proposed to go live in Quarter 1 of 2022/23.
- 8.4 Look Forward:
 - 8.4.1 The closure of the existing IRMP as well as the commencement of the new CRMP has required some structured planning to ensure that all areas are completed or transitioned.
 - 8.4.2 The launch of the CRMP will be delivered through a staff launch event as well as performance discussed at annual conferences to allow a more consistent approach to staff engagement in relation to the CRMP. A clearer approach to supporting staff to understand the golden thread from frontline staff activity through to member and public engagement.

9 Other options considered (and reasons for not proposing)

9.1 Updates on priority programmes are agreed through the Work Programme of the Fire and Rescue Service Scrutiny Committee at each meeting.

10 Consultation, engagement and advice

10.1 Continuous consultation with staff and members on the work of the Fire and Rescue Service Priority Programmes, including discussion at each meeting of the Fire and Rescue Service Scrutiny Committee.

11 Finance

11.1 Most of the Council's £26.8 million budget is invested in frontline services including firefighting, rescue operations and community safety activity. This is summarised as the following:

11.1.1 Firefighting and rescue operations: £22,011,154

11.1.2 Community Fire Safety: £4,352,772

11.1.3 Fire Service Emergency Planning and Civil Resilience: £390,071

12 Risk implications and mitigations

12.1 No current risk implications.

13 Policy alignment and compliance

- 13.1 This report has positive implications for the community, and it supports the benefits of an effective Fire and Rescue Service to all residents in West Sussex.
- 13.2 In terms of environmental sustainability, the IRMP makes clear the Authority's commitment to reducing the environmental impact of its operations and provides an indication of work done to date.

Mark Andrews

Deputy Chief Fire Officer

Appendices: None

Background papers: None



Fire and Rescue Service Scrutiny Committee

4 March 2022

Joint Fire Control Centre Update

Report by Deputy Chief Fire Officer

Summary

Following a decision by Cabinet in February 2019 arrangements were put in place for the control and mobilising arrangements for West Sussex Fire and Rescue Service (WSFRS) to be delivered by Surrey County Council (SCC) which went live in December 2020. Twelve months into the new arrangement the Fire and Rescue Service Scrutiny Committee (FRSSC) requested a task and finish review of the performance, progress and resilience of the new operating system, which was undertaken in January 2021.

There have been significant changes to Joint Fire Control since this review including the expansion of the mobilising service to a tri-service arrangement taking on mobilising responsibilities for East Sussex Fire and rescue service (ESFRS). This report provides an update to the Committee on the developments since the Task and Finish Group report over the last 12 months.

Focus for Scrutiny

- (1) To consider whether the planned developments to the Joint Fire Control Centre collaboration project have been delivered.
- (2) To agree the consequential changes to the performance and assurance framework.
- (3) To acknowledge the steps that are being taken to improve the delivery of the service from Joint Fire Control.

1 Background and Context

1.1 WSFRS have a statutory duty under Section 7(2)(c)¹ of the Fire and Rescue Services Act 2004 to make arrangements for dealing with calls for help and for summoning personnel. This legislation also allows for making arrangements for discharging this statutory duty under Section 16. On the 4th December 2019 mobilising arrangements for WSFRS were outsourced, under Section 16, to Surrey County Council (SCC).

In January 2021 the FRSSC task and finish group considered if: (1) the joint fire control centre collaboration project had produced the project deliverables; (2) identified improvements the collaboration had achieved in the first 12 months; and (3) acknowledged planned improvements and benefits over the

¹ https://www.legislation.gov.uk/ukpga/2004/21/part/2/crossheading/core-functionsn3

- next 12 months. The most significant planned improvement was that ESFRS were to join the Joint Fire Control Collaboration in September 2021.
- 1.2 The Findings of the task and finish group were presented in March 2021 to the Fire and Rescue Service Scrutiny Committee. It was concluded that the arrangements in place are satisfactory. A further review was planned for 12 months' time, once the move to a tri-service control had been completed

2 The introduction of a Tri-Service Control

- 2.1 In the last year, the most significant change to the fire control arrangements has been the move from a dual service control to a tri- service control with SCC now providing mobilising arrangements for Surrey, West Sussex and East Sussex fire and rescue services. This change occurred in November 2022 and was achieved without any impact on delivery of services. The changes to a tri-service control has resulted in updated governance and legal arrangements, performance standards and the technological roadmap for future improvements. The change has also brought about an increase in staff at the control centre to take account of the 3 Service model including arrangements for dealing with spate conditions and the recommendations from the Grenfell Tower Inquiry.
- 2.2 The changes to the legal framework are that ESFRS and WSCC now have arrangements for their control functions to be undertaken by SCC; under separate Section 16 agreements. There is also an overarching collaboration agreement which details how all three services work together on this arrangement.
- 2.3 These new governance arrangements extend the membership of existing operational/tactical/ and strategic boards and commit all parties to acknowledge and follow principles of joint working to ensure the efficient operation of the delegation. This is intended to achieve key objectives around improved resilience, efficiency and effectiveness. Specifically, these principles also focus on the future of the collaboration to ensure a tri-service 'investment roadmap' for the next 3 to 5 years in JFC and active promotion and facilitation of policies, operational procedures and ways of working.
- 2.4 The move to a tri-service control has also required changes to the existing performance standards. This is to ensure that the JFC is working to the same set of standards across all three services. (see Appendix A for the full range of new measures.) The most significant change is to the existing KPI on 'time to answer call' which has changed as follows:

previous	98% of calls within seven seconds, with an amber target of
target	95%
new	95% within 10 seconds with no amber rating
Target	

This new measure has been taken as the benchmark as it aligns with the Public Emergency Call Service (PECS) Code of Practice as referenced within national operational guidance.

- 2.5 As part of the acceptance of this change it was agreed that, as the target is 95%, there is no amber rating for this measure.
- 2.6 The original decision to move the arrangements for the delivery of the Fire Control to SCC delivered financial benefits to WSCC. The move to a tri-service control room has delivered further efficiencies. However, to meet the requirements arising from the Grenfell report, specifically around Fire Survival Guidance, there has been additional resource provided as part of the 2022/23 budget. This also provides greater resilience for spate conditions which can impact on control performance. The benefit of the tri-service arrangements is that WSFRS now share these costs which we would otherwise have had to find independently.
- 2.7 Within JFC, business continuity arrangements exist for all eventualities. These include a back-up mobilising system and a staff degradation plan. In addition, SCC have invested in a complete back-up control centre which is available for use in the event of any incident impacting on the primary control room. There are also mitigation measures in place to enable the 999 system to continue to operate while continuity arrangements are put in place. these are the fall-back arrangements with Merseyside Fire and Rescue Service, which are tested weekly.

3 Current performance

- 3.1 There are some challenges with current JFC performance that we are addressing with SCC with a particular focus on three current areas. The governance arrangements are established in a way that supports SCC in delivering improvement with support from all partners.
- 3.2 The first area is for 'Time to alert' where we have requested from SCC a deep dive analysis to be undertaken on the specific performance measure of 'time to alert' prior to go live with the tri-service arrangement. This deep dive indicated areas for improvement and an action plan has been produced. The second area is a performance improvement plan, that has been implemented following some technical issues and work to further improve systems and resilience. Finally, the protocol that has been produced that describes how SCC IT will support WSFRS Mobile data terminals on fire engines needs to be formally resolved through an addition to the IT schedule of the Section 16.
- 3.3 Due to these issues a full review, with legal support, was undertaken on the revised collaboration and Section 16 agreement. The opportunity of the revised JFC operating model has allowed us to fully evaluate the contract management and governance arrangements. This has led to a tightening up our procedures for reporting and escalations to ensure that robust continuous improvement model is adopted at JFC in the future.

4. Technological developments

4.1 Another change that has taken effect in the last 12 months has been the trial of The Dynamic Cover Tool (DCT) software, that is used to support dynamic decision making and enable effective and efficient resource use in control (JFC). This was stage three of the delivery of this tool which went live in July 2021. This tool is used to visualise response times on a live basis and inform

- evidence-based decisions on how to deploy our resources. This replaced all previous standby processes and the requirements for officers to manage appliance moves, strictly enabling JFC the accountability to do so.
- 4.2 Some of the key benefits of the DCT include: The ability to visualise risks and coverage on a live basis; Testing the impacts of potential redeployments before approving standby moves; Providing a retrospective view of how the service deployed its resources; Assessing upcoming challenges for resource availability. The performance of this approach was reviewed after six months and an enhancement to the DCT was made that provides more detail around district level of response times. The next stage of this development is to provide access to the DCT to flexible duty officers and managers within WSFRS providing improved situational awareness remote from an incident.
- 4.3 Other developments include the delivery of a mobile app that gives officers mobile real time intelligence detailing incident information. (BOSS mobile) and 999eye which is a smartphone solution that enables 999 callers, with compatible mobile, to securely send live footage or images of incidents to the control room thus improving situational awareness and incident details in the control room.
- 4.4 A full technological road map is now being developed which includes the replacement to the current airwave mobilising system through the National Emergency Services Mobile Communication Programme (ESMCP). There are delays in the implementation of this national programme but all UK blue light services will have to cease to use airwave by December 2026 as this national contract runs out. WSFRS and JFC are on track within this overall national program with a projection for switch over by July 2026. Opportunities will be available to adopt early update status which will enable WSFRS/to better understand system functionality and user requirements The benefits of collaboration will be demonstrated through the expected reduction of financial and resource impact on each authority as this program is progressed.

5. Assurance & Monitoring

5.1 As well as internal monitoring through the governance arrangements and core measures, the HMICFRS inspection for SFRS, that was published in December 2021, provides an external assurance on these control arrangements. The inspectorate found that: 'the mobilising system used in joint control means that the nearest fire engines from either service are sent to incidents in Surrey and West Sussex. This supports firefighter and public safety'; 'fire control can provide fire survival guidance to multiple callers'; 'Control staff were confident in the continuity arrangements for control'; and that 'Control has good systems in place to exchange real-time risk information with incident commanders, other responding partners, and other supporting fire and rescue services.'

6. Conclusion

6.1 The performance measures and the governance arrangements in place allow for a focus on performance and the drive for continuous improvement. Whilst the delivery for fire control activities is outsourced, the statutory duty rests with the authority. The collaborative approach that has been taken to the development of the JFC has developed these mobilising arrangements into an integral aspect of how WSFRS delivers its services to all those who live work or travel through West Sussex.

7 Risk implications and mitigations

7.1 During the Joint Fire Control project each individual area of the project was risk assessed as contained within the original business case. Ongoing assessment of risk is undertaken through the fire and rescue service Strategic Risk Team.

8. Policy alignment and compliance

- 8.1 This report has positive implications for the community and it supports the benefits of an effective fire and rescue service to all residents in West Sussex.
- 8.2 In terms of environmental sustainability, the CRMP makes clear the Authority's commitment to reducing the environmental impact of its operations, and provides an indication of work done to date.

Contact Officer: Steve Ash Head of Response, steve.ash@westsussex.gov.uk 07517911433

Appendices

Appendix A Revised Joint Fire Centre Performance Measures



Agenda Item 7 Appendix A

Revised Joint Fire Centre Performance Measures

KPI No.	Data Supplier	KPI Description	Data source	Frequency	Target	Measure
1b	PR	999 call handling: % of calls answered within 10 seconds	Data taken from ICCS reports	Monthly	>95% of calls answered within 10 seconds	>95% <95%
2	PR	Mobilisation: Time between receipt of emergency call and Station End activation	Data from Data, Digital and Specialist Projects	Quarterly	>98% of SEE equipment activated within 120 seconds of receipt of emergency call or determine that mobilisation is not required	>98% >95% - <98% <95%
3	CI	Mobilisation: Time taken from call to notify a L2 or L3 officer about a Level 1 incident with life risk	Data from Data, Digital and Specialist Projects	Quarterly	Level 2 or 3 officer notified within 120 seconds of receipt of emergency call for >98% of such incidents	>98% >95% - <98% <95%
4	CI	Mobilisation: Time taken from call or escalation to notify a L 2 or L3 officer about a Level 2 incident	Data from Data, Digital and Specialist Projects	Quarterly	Level 2 or 3 officer notified within 120 seconds of receipt of emergency call or escalation for >98% of such incidents	>98% >95% - <98% <95%
5	CI	Mobilisation: Time taken from call or escalation to notify a L3 officer about a Level 3 incident	Data from Data, Digital and Specialist Projects	Quarterly	Level 3 officer notified within 5 minutes of receipt of emergency call or escalation for >98% of such incidents	>98% >95% - <98% <95%
6	CI	Mobilisation: Time taken from call or escalation to notify a Level 4 officer about a Level 4 incident	Data from Data, Digital and Specialist Projects	Quarterly	Level 4 officer notified within 15 minutes of receipt of emergency call or escalation for >98% of such incidents	>98% >95% - <98% <95%
7	CI	Mobilisation: Time taken from call or escalation to notify nominated Principal Officer where required	Data from Data, Digital and Specialist Projects	Quarterly	PO notified within 20 minutes of receipt of emergency call or escalation for >98% of relevant incidents	>98% >95% - <98% <95%
8	LB	Joint Fire Control crewing: Maintenance of minimum crewing levels @ JFC	Data from Mobilising taken from FireWatch	Quarterly	Minimum 9 staff on duty, including 3 supervisors, on >98% of all shifts	>98% >95% - <98% <95%

KPI No.	Data Supplier	KPI Description	Data source	Frequency	Target	Measure
0	NII	Mobilising systems: Number of safety critical	Data from IT&D	Monthly	Zero safety critical events within mobilising systems (excluding period of planned maintenance)	Zero
9	NL	events within core mobilising systems	via Capita	Monthly	Safety critical event = failure to mobilise or loss of significant functionality	> Zero
11	NL	Mobilising systems: Vision system downtime including	Data from IT&D /	Monthly	Zero downtime (excluding periods of	>99.9% >99% - 99.9%
11	INL	fall back	Capita	Monthly	planned maintenance)	<99% - 99.9% <99%
		Mobilising systems: ICCS	Data from IT&D /		Zero downtime (excluding periods of	>99.9%
12	12 NL	NL downtime, including fall	Capita	Monthly	planned maintenance)	>99% - 99.9%
		back	Capita		promised maintenance)	<99%



Forward Plan of Key Decisions

The County Council must give at least 28 days' notice of all key decisions to be taken by councillors or officers. The Plan describes these proposals and the month in which the decisions are to be taken over a four-month period. Decisions are categorised according to <u>Cabinet Member</u> portfolios.

The most important decisions will be taken by the Cabinet. Due to the continuing public health measures, there will be limited public access to the meeting. Admission is by ticket only, bookable in advance via: democratic.services@westsussex.gov.uk. The meetings will be available to watch online via our webcasting website. The schedule of monthly Cabinet meetings is available on the website. The Forward Plan is updated regularly and key decisions can be taken on any day in the month if they are not taken at Cabinet meetings. The Plan is available on the website. Published decisions are also available via the website.

A key decision is one which:

- Involves expenditure or savings of £500,000 or more (except treasury management); and/or
- Will have a significant effect on communities in two or more electoral divisions in terms of how services are provided.

The following information is provided for each entry in the Forward Plan:

Decision	A summary of the proposal.
Decision By	Who will take the decision - if the Cabinet, it will be taken at a Cabinet meeting
	in public.
Date added	The date the proposed decision was added to the Forward Plan.
Month	The decision will be taken on any working day in the month stated. If a Cabinet
	decision, it will be taken at the Cabinet meeting scheduled in that month.
Consultation/	How views and representations about the proposal will be considered or the
Representations	proposal scrutinised, including dates of Scrutiny Committee meetings.
Background	The documents containing more information about the proposal and how to
Documents	obtain them (via links on the website version of the Forward Plan). Hard copies
	are available on request from the decision contact.
Author	The contact details of the decision report author
Contact	Who in Democratic Services you can contact about the entry

Finance, assets, performance and risk management

Each month the Cabinet Member for Finance and Property reviews the Council's budget position and may take adjustment decisions. A similar monthly review of Council property and assets is carried out and may lead to decisions about them. These are noted in the Forward Plan as 'rolling decisions'.

Each month the Cabinet will consider the Council's performance against its planned outcomes and in connection with a register of corporate risk. Areas of particular significance may be considered at the scheduled Cabinet meetings.

Significant proposals for the management of the Council's budget and spending plans will be dealt with at a scheduled Cabinet meeting and shown in the Plan as strategic budget options.

For questions contact Katherine De La Mora on 033 022 22535, email katherine.delamora@westsussex.gov.uk.

Published: 15 February 2022

Community Support, Fire and Rescue

Cabinet

West Sussex Fire and Rescue Service Community Risk Management Plan 2022-26

The Fire and Rescue National Framework for England (2018) requires all Fire and Rescue Authorities to produce an Integrated Risk Management Plan (IRMP) that covers at least a 3-year period. We are now in the fourth and final year of our existing 2018-2022 IRMP and have developed a new Community Risk Management Plan (CRMP) covering 2022-2026 [per guidance from the National Fire Chiefs Council (NFCC), there has been a change in terminology from IRMP to CRMP].

During the planning process, we consider our community risks, using a range of sophisticated analytical tools to identify where incidents might happen, when they might occur and how serious they could be. Using this data alongside historical information about demand allows us to identify options to better target our resources, including firefighters and appliances, more effectively, resulting in a better balance of prevention, protection and response activities. This plan then clearly communicates this to the public, reinforcing the services commitment to our communities.

The Cabinet is recommended to endorse the West Sussex Fire and Rescue Service Community Risk Management Plan 2022-26 on behalf of the County Council.

Decision by	Cllr Urquhart, Cllr Lanzer, Cllr Crow, Cllr N Jupp, Cllr Hunt, Cllr Marshall, Cllr J Dennis, Cllr A Jupp, Cllr Russell, Cllr Waight - Cabinet	
Date added	27 October 2021	
Month	March 2022	
Consultation/ Representations	A programme of pre-consultation and engagement activities has been conducted over 12 months in order to help shape the strategic direction of the Community Risk Management Plan. A 10 week, formal consultation, runs from 15 th November 2021 to 21 st January 2022, open to public and staff and supported by public, staff and representative body engagement. Representations concerning this proposed decision can be made to the Cabinet Member for Fire & Rescue and Communities, via the officer contact, by the beginning of the month in which the decision is due to be taken.	
Background Documents (via website)	None	
Author	Sabrina Cohen-Hatton Tel: 033 022 24993	
Contact	Erica Keegan Tel: 033 022 26050	

Cabinet

West Sussex Fire and Rescue Service Statement of Assurance 2021-2022

The Fire Authority (FRA) is required to provide annual assurance on financial, governance and operational matters and show how they have had due regard to the expectations set out in their Integrated Risk Management Plan (IRMP) and as part of the Fire and Rescue National Framework for England.

This Statement reinforces the commitment to provide our communities with clear information about how we manage public funds and assure the effectiveness of our financial, governance and operational fire service arrangements.

All partners involved have been asked to formally endorse the Annual Statement of Assurance 2021-22. Cabinet will be asked to approve the West Sussex Fire and Rescue Service Statement of Assurance for 2021-22.

Decision by	Cllr Hunt, Cllr Lanzer, Cllr Urquhart, Cllr N Jupp, Cllr Crow, Cllr Waight, Cllr Russell, Cllr A Jupp, Cllr J Dennis, Cllr Marshall - Cabinet	
Date added	15 February 2022	
Month	June 2022	
Consultation/ Representations	Representations concerning this proposed decision can be made to the Cabinet Member for Fire & Rescue and Communities, via the officer contact, by the beginning of the month in which the decision is due to be taken.	
Background Documents (via website)	None	
Author	Sabrina Cohen-Hatton Tel: 033 022 24993	
Contact	Erica Keegan Tel: 033 022 26050	



Draft Fire and Rescue Service Scrutiny Committee Work Programme March 2022 – March 2023

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Appendix A – Check List



Scrutiny Business Planning Checklist

Priorities - Is the topic

- a corporate or service priority? In what way?
- an area where performance, outcomes or budget are a concern? How?
- one that matters to residents? Why?

What is being scrutinised and Why?

- What should the scrutiny focus be?
- · Where can the committee add value?
- What is the desired outcome from scrutiny?

When and how to scrutinise?

- When can the committee have most influence?
- What is the best approach committee, TFG, one-off small group?
- What research, visits or other activities are needed?
- Would scrutiny benefit from external witnesses or evidence?

Is the work programme focused and achievable?

- Have priorities changed should any work be stopped or put back?
- Can there be fewer items for more in-depth consideration?
- Has sufficient capacity been retained for future work?



Fire and Rescue Service Scrutiny Committee Task and Finish Group

The Retained Duty System (RDS)

Draft Terms of Reference

- 1. A Task and Finish Group (TFG) made up of Members of the Fire and Rescue Service Scrutiny Committee and the wider membership, will be held to scrutinise policies/issues concerning retained firefighters. The TFG will undertake its work at a series/single meetings held in public as appropriate commencing in April 2022 and report any findings directly to the main committee. A follow up meeting will be arranged if necessary and any recommendations directed to the relevant Cabinet Member.
- 2. Ahead of the TFG meeting an informal session with a presentation will be held with members of the TFG to learn about the background and wider issues with the retained duty system, in order for members to have the opportunity to gather evidence to aid the scrutiny session.
- **3.** The **role** of the TFG is to consider and form conclusions and recommendations on:
 - i. The strengths, weaknesses, opportunities and threats of the current WSRS RDS structure;
 - ii. Review the current performance measures;
 - iii. Review the current recruitment, induction and retention procedures for RDS
 - iv. Consider the relationship between a flexible and resilient RDS model and the WSFRS emergency response standards
- **4. Membership** of the TFG is drawn from Members of the Fire and Rescue Service Scrutiny Committees and the wider group as follows:TBC
- **5. Support** for the TFG is as follows:
 - **Service Lead officers**: Peter Rickard, Assistant Chief Fire Officer.
 - Democratic Services officer support t Rachel Allan, Senior Advisor and Rob Castle, Assistant Democratic Services Officer
- **6.** The TFG will report its findings directly to the next meeting of the Fire and Rescue Service Scrutiny Committee.

