Fire and Rescue Service Scrutiny Committee

30 September 2020

Priority Programme Update

Report by Chief Fire Officer

Summary

This report provides an overview of the priority programmes of work during Quarter 1 of 2020/2021. 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 The inspectorate identified four 'causes of concern', as well as ten additional specific areas for improvement that the Service needed to address. HMICFRS re-visited West Sussex Fire & Rescue Service (WSFRS) on 19 February 2020 and found that the Service had made tangible improvements to mitigate the risk to public safety. They noted an accelerated pace and that staff reported that they felt supported. The four 'causes of concern' underpin the Services improvement plan and progress is detailed below.

2 Cause of Concern 1 - Preventing Fire and Other Risks

- 2.1 HMICFRS found that prevention activity does not always align with the risk identified in the Integrated Risk Management Plan (IRMP). Home fire safety checks were not being carried out in a timely manner and there was a backlog of 552 high risk cases.
- 2.2 The Service needed to achieve two main things to address this area. It needed to ensure safe and well checks were targeted to those most at risk, and then to achieve them in a timely manner. Eight posts have been added to Prevention in

- Quarter 1 which has significantly increased capacity within the team and progress continues.
- 2.3 Three more Community Fire Safety Officers have been appointed to increase the capacity of the Service to carry out Safe & Well Visits for those people assessed to be of highest risk.
- 2.4 The Service now has a prevention strategy and a standard operating procedure, to ensure visits are targeted to those most at risk. This includes a trigger point to avoid a backlog occurring again unexpectedly. This is now monitored and reported through the Performance and Assurance Framework.
- 2.5 There have been difficulties in ensuring all operational staff fully understand how to conduct Safe & Well Visits and ensuring the quality is consistent. Two prevention trainers have been introduced who will be crucial in ensuring a common understanding, and quality, of Safe and Well Visits. Whilst these posts were being recruited, staff undertook mandatory training on safeguarding vulnerability.
- 2.6 During the re-visit, prevention staff told inspectors that they felt that the Service was supportive. They have noticed faster progress since October with the publication of revised processes, the appointment of new staff and the decision to procure a replacement IT system.
- 2.7 One area that has proved challenging due to Covid-19 has been the next steps to quality assure our work, more specifically for Prevention our Safe & Well Visits. This work has been planned with a clear process to be developed and implemented by January 2021.
- 2.8 Covid-19 has meant that most of the residents that we normally visit have been either self-isolating or shielding. Visits were immediately offered in three ways, in person with staff social distancing and wearing Personal Protection Equipment (PPE), by phone and by skype. Phone and skype visits were offered to residents who were unable to allow or were uncomfortable with people entering their home. Phone and video-call visits were supplemented with the advice confirmed in writing accompanied by a booklet containing multi agency safety and wellbeing information and contact numbers. Where the fire risk was identified as being very high residents were still offered a visit in person.
- 2.9 The improvements already made through improvement activity have meant that we were able to address the pent-up demand in a more effective, more efficient and more timely way than we were able to address our previous backlog. During the period of Quarter 1, 321 people who declined a visit were deferred until government advice changed and prevention activity recommenced. In order to meet this temporary pent-up demand, we redirected staff to prioritise these visits. Out of 321 pent-up visits, just five remain.

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

3.1 The inspectorate noted that the Service does not have a robust methodology for the risk-based inspection programme that identifies its highest risk premises. The database used to manage premises information was unreliable, which affected the accuracy of the information. The Service was unable to carry out the number of audits of high-risk premises that it committed to as part of its programme.

- 3.2 A core problem for the Service was having sufficient capacity within protection teams to be able to carry out the number of audits that were required. The department restructured in November 2019, and additional capacity was introduced in the team (seven additional inspecting officer positions, two managers and two specialist training staff). All of these positions are filled, and the backlog of fire safety audits was cleared in November 2019.
- 3.3 In April 2020, a new improved Fire Safety Enforcement Strategy was introduced which identifies the risk criteria to prioritise fire safety audits. Targets have been set for the number of high-risk premises audits to be completed each month. Targets have also been set for the number of thematic fire safety visits to be completed. The thematic visits are based on identified high risk factors such as sleeping risk above fast food premises.
- 3.4 An interim recording and allocation system generates a list of premises to be audited based on risk factors which enables audits in the short term. For the longer term a new IT system has been procured, it will automate this process ensuring the most efficient and effective allocation. The inspectorate recognises that the interim recording and allocation is an improvement, but the system will further improve our ability to target audits at premises with the highest risk.
- 3.5 The Service recognised that it needed to make greater use of the enforcement powers available in appropriate cases. HMICFRS found evidence that this is now happening, which is a result of having more capacity within the department. There is a quality assurance process for fire safety audits. The Service has recently started to use this, with a target to conduct three assessments of each inspecting officer per year.
- 3.6 The resourcing plan has made provision for the training and development of protection staff. This is particularly salient as the sector responds to changes in required competency levels throughout the sector following Grenfell.
- 3.7 The inspectorate reported that protection staff feel that the Service is supportive. They have noticed faster progress since October with the appointment of new staff and a greater focus on high-risk premises.
- 3.8 The government is bringing forward changes that will improve building and fire safety. These changes to legislation follow the Grenfell fire are currently under national consultation. The proposed changes may have a significant impact to our protection activity with an increase of buildings falling under new legislation. Our new protection strategy and improved structure takes account of this possibility. We will continue to work with the National Fire Chiefs Council (NFCC) and other partners to adapt our working practices in readiness for the changes to legislation next year.
- 3.9 Our Protection activity has been impacted by the Covid-19 crisis and the lockdown. Many business premises were closed and therefore we were unable to carry out audits in the traditional way. During this period, fire safety activity was prioritised and activities such as building regulations consultations, and general enquires have continued unaffected as staff were able to undertake this activity remotely.
- 3.10 We have maintained the ability to respond to fire safety complaints throughout the crisis, using our fire safety officers, whom have full PPE and training to maintain this activity. Officers within protection have maintained our 24/7

- ability to enforce the Fire Safety Order and carry out fire investigations and there were no gaps in this provision during the crisis.
- 3.11 The Risk Based Inspection Programme (RBIP) requires the completion of 72 audits per month. Due to the risk of Covid-19 transmission, the majority of these audits were suspended between March and August 2020 in line with guidance from the NFCC. During this period there were 92 premises that we were not able to audit as planned. Wherever feasible we adopted remote techniques, including document reviews and telephone interviews. By reprofiling the work of the team, utilising our new Fire Safety Enforcement Strategy and increased resource we have significantly addressed the pent-up demand created by Covid-19. There are a small number of properties we cannot currently gain access to such as high-risk care homes that have some of our most vulnerable people in. These will continue to be offered a visit in a socially distanced way using PPE and/or remotely delivered advice. Overall, there are only 19 audits yet to be completed. We are now looking forward to redesigning how we approach all future audits, as social distancing and PPE may be a requirement every time in some premises.

4 IT system for Prevention & Protection

- 4.1 Outdated IT systems were causing considerable challenges in terms of maintaining appropriate data sets and working efficiently and were hampering activity in both Prevention and Protection.
- 4.2 'Farynor' IT system has been introduced and a test system is now live with a completion date for full implementation across all Service areas by Quarter 3 2020/21. This has been slightly delayed due to Covid-19 but mitigating actions have kept the project on track and trial system in place.
- 4.3 There have been small delays from planned go live in Summer 2020 as a result of CAPITA availability due to Covid-19, and further development of the system to improve the user experience and capability. However, the project team has planned around this to minimise impact through re-prioritising activities that can be done early, such as data cleansing. Farynor will allow the Service to deliver prevention and protection activities in the most efficient way using more up to date technology in a mobile way, allowing for increased accuracy in reporting as well as enabling a focus on areas of highest risk in compliance with General Data Protection Regulation.

5 People Action Plan

- 5.1 HMICFRS identified considerable areas of improvement in relation to how well the Service looked after its people. The improvement activity in relation to this area has been enhanced and escalated into a priority programme of work. The People Action Plan outlines five key people priorities for the Service:
 - Becoming an employer of choice
 - Effective leadership
 - Improving the employee experience and wellbeing
 - Performance and development
 - Retaining and nurturing talent.

- 5.2 These priorities are delivered under five workstreams:
 - Strategic Direction
 - Leadership
 - Values, Ways of Working & Wellbeing
 - Performance and Appraisal
 - Resourcing and Talent
- 5.3 The People Action Plan workstreams have been matched to concerns raised by the inspection report and are fully aligned to the County Council's People Strategy. Key activity relating to the two people related 'causes of concern' which are outlined in detail in below.

6. Cause for Concern 3 - Promoting the Right Values and Culture

- 6.1 WSFRS staff sometimes act in ways that go against its core values. This is leading to bullying in the workplace.
- 6.2 We have introduced a strategic lead to deliver improvements through a new dedicated programme of work around the People activity to enable a strong focus on our cultural journey.
- 6.3 The improvement plan resourced 28 values workshops with staff to improve the understanding of the values and to explore any barriers to their adoption. The output of these workshops informed the ongoing work in the People Action Plan. To strengthen the understanding of staff around values we have integrated the NFCC Behaviour Framework into our appraisal process. Each of our values is described as a behaviour and to further support staff comprehension, examples of unacceptable behaviours, expected behaviours and those that exceed expectations have been included. This will also act as a framework tool to support managers to have meaningful discussions around standards and expectations.
- 6.4 The Service has appointed an Equality, Diversity & Inclusion Officer to facilitate a cross service approach to increased awareness and inclusion. Key activity includes increased positive action and community engagement activities to attract a more representative workforce. We have recently recruited a Wellbeing Officer to further complement this activity with a focus on staff wellbeing including mental health first aid. They are currently developing a wellbeing programme across the Service, which will include a range of activities and support mechanisms to ensure that when staff need help it is readily available to them.
- 6.5 Following engagement sessions with staff around the People Action Plan we advertised internally for members of staff to take on a Diversity Champion role in addition to their usual duties. The response has been extremely positive, and eight members of staff have come forward to express an interest in becoming diversity champions. Induction into this new role will take place by the end of September 2020. These champions will assist with engaging with colleagues in relation to diversity and inclusion issues and will provide a conduit between peers and the Equality, Diversity & Inclusion officer. The champions will also

- engage with senior leaders in the Service to provide feedback on initiatives implemented as part of the People Action Plan.
- 6.6 The Service has set a clear vision and mission statement, which links to our values and the behaviours we expect staff to display. A new appraisal system has been launched, which links personal objectives, performance and behaviour to our vision and mission. The appraisal process now includes a Core Behaviour Standards & Expectations Framework based on our values and the NFCC Behaviour Framework. Our framework includes examples of unacceptable behaviours, behaviours that meet requirements and behaviours that exceed, and this provides managers with a tool that they can use to support the two have constructive conversations with staff as part of the appraisal process.
- 6.7 The Service is creating leadership programmes and coaching & mentoring programmes for all levels of leadership. An 'Operational Managers' qualification has been launched which provides a range of skills, knowledge and techniques that leaders can practically use to support them to lead their teams effectively.

7 Cause for Concern 4 - Ensuring Fairness and Promoting Diversity

- 7.1 The inspectorate found that WSFRS did not engage with or seek feedback from staff to understand their needs. They reported this to especially be the case with some under-represented groups. When staff raised issues and concerns the Service did not respond quickly enough.
- 7.2 We have worked to improve the effectiveness of engagement with all staff, including under-represented groups, through a pro-active approach to engagement opportunities. We have also increased our attendance at national and regional meetings and working groups to share best practice and learn from other fire and rescue services. We were due to host the Asian Fire Service Association (ASFA) summer conference, however this has sadly been postponed due to Covid-19. We have worked collaboratively with Surrey FRS on ASFA South Region Business Fire Safety initiatives, enabling improved fire safety output across fire services.
- 7.3 Communications between staff and senior managers have improved through the use of the Big Exchange app, video briefings, online open question & answer 'surgeries' with Heads of Service for all staff, as well as back to the shop floor activity. This has been adapted from face to face engagement to virtual contact throughout the Covid-19 period to ensure that continuity is maintained.
- 7.4 The Service has secured funding to address property-based issues with not having appropriate facilities for all genders, and to undertake remedial work to reduce the potential impact of contaminants. An indicative capital amount of £5m has been allocated, and an in-depth survey of all station facilities is being carried out which will inform the improvements required.
- 7.5 A new Service structure went live on 1 April 2020 to address the improvement challenges and provide a clear overview of the teams to all staff. We have grown our activity relating to our workforce plan into a People Action Plan which is a Service priority. A restructure of the Service has created a position for a strategic lead to increase capacity here and ensure that cultural change and people aspects are not just considered but are the cornerstone of our business processes.

- 7.6 Listening groups have been completed and a report was published to everyone in the Service at the same time, as requested by staff within the listening groups. Following this, staff were invited to form a working group developing a plan of action for what they want to see changed as a result. Headlines from 2019 included a lack of trust in the leadership and that for some, they do not feel leaders are role modelling the values. There are behaviours going on that some felt to be bullying that we needed to tackle.
- 7.7 As a result, we issued clear guidance on what constitutes bullying and how complaints will be dealt with. People have started to use formal processes more frequently reporting inappropriate behaviour which has been positive. Previously, staff may not have believed anything would happen and it is encouraging to see there is sufficient confidence in the Service to use these processes.
- 7.8 Back to the shop floor day engagements are being introduced for managers to continually understand the pressures experienced by the staff they are responsible for, and the impact their decisions can have. Reverse mentoring opportunities are being explored, including opportunities for senior staff to be mentored by more junior staff to support development and awareness of the impact of their leadership.
- 7.9 A full review of promotional processes, talent management and career development pathways has been undertaken to enable staff to focus more on outcomes and impact than simply undertaking individual tasks. Key to this work is to highlight the golden thread back up to the IRMP and the difference they make as an individual to service goals through the appraisal process.
- 7.10 Improvements have supported us with staff availability as an early risk raised was degradation of staff levels due to social distancing. Over the last 14 days, we have had on average 3.5% of staff not in work due to Covid-19, demonstrating the high level of commitment to support the national response.

8 Areas for Improvements updates

- 8.1 The Local Risk Management Project has progressed well with technical project management support. Community risk dashboards have been rolled out to stations to support more targeted prevention and protection activity. We have adapted our approach given Covid-19 to allow us to continue the planned work virtually. This includes not only station engagement but also community engagement through the use of technology.
- 8.2 Improvements have supported us with greater staff availability, as an early risk raised was degradation of staff levels due to social distancing. Over the last 14 days, we have had on average 3.5% of staff not in work due to Covid-19, demonstrating the high level of commitment from staff to support the national response.

9 Integrated Risk Management Plan 2018-22 (IRMP)

9.1 The IRMP action plan (Appendix A) sets out the Services progress against the commitments made in the IRMP. We have undertaken our Year 3 annual review for the IRMP Action Plan. For 2020/21 we had one action which has been delivered in in Quarter 1 which relates to the Service Delivery Centre (SDC) and introduction of Retained Liaison Officers. A summary on the outcome of this has been provided and some key updates from other areas too.

- 9.2 For this quarter, the Service committed to reviewing its wholetime crewing systems to ensure that they maximise the availability of fire engines and support the delivery of prevention and protection activity. We also undertook to deliver the SDC and the additional Retained Liaison Officers (RLOs).
- 9.3 SDC was at full staffing by April 2020 and has begun to make significant improvements since its implementation in January 2020. This is through the central coordination of all physical resources required to maintain appliance availability. It has begun to reduce the burden placed on both wholetime and retained managers thereby allowing them to focus on core responsibilities such as the maintenance of operational competence and the delivery of core prevention and protection activities.
- 9.4 The SDC has been critical in adapting during initial phase of Covid-19, as we have needed to coordinate all activity across stations especially during the busy period where some staff were self-isolating or sick. This led to numbers of staff changing rapidly day to day and a rapid response to ensure operational cover and staffing was available. In Quarter 1, the SDC co-ordinated opportunities for County Crewing, where retained staff took up opportunities to cover crewing deficiencies, preventing fire engines from becoming unavailable 202 times. This has resulted in 1,465 hours of improved availability, during which time 137 incidents were attended.
- 9.5 This team has also been key to capturing information for national reporting through to the Business Continuity Action Team (BCAT) to ensure we could support our blue light partners such as South East Coast Ambulance Service.
- 9.6 The RLOs have been making an impact. We have seen an increase in the availability of our retained and staff engagement throughout Covid-19 have seen the reintroduction of the Retained Officer Meetings (ROMs) which have been received well by staff and something that we will to continue.
- 9.7 Some areas of work of the IRMP have been consolidated into the HMICFRS Improvement Plan.
- 9.8 Three actions pertaining to our staff have been incorporated into the People Action Plan such as Workforce Plan, Talent Management Framework and Inclusion & Diversity and has begun to set firm foundations for completion by Quarter 4.
- 9.9 A final key area of work regarding the Automatic Fire Alarms (AFA) policy has been transferred into the improvement plan to ensure alignment with the recommendations from HMICFRS as well as consideration to our future IRMP 2022.
- 9.10 The HMICFRS Report 2018 commented that this policy required reviewing, stating:
 - "In the year ending 30 September 2018, false alarm incidents made up 51 percent of all incidents attended, which is higher than the England average of 40 percent over the same period. The Service should make sure it has a clear approach to reducing the impact of these false alarms"
- 9.11 The Service Executive Board has been considering proposals regarding an updated AFA policy which will improve the Services response to Unwanted Fire Signals (UWFS) by a clearer approach through call handling, call challenge,

from crews on scene and by Fire Safety Inspectors for premises with a high number of such AFAs. We will continue to improve upon the provision of advice to businesses in order to reduce the occurrence of automatic fire alarms resulting in UWFS's.

10 Programme Status Overview

- 10.1 68% of the current projects are showing a green RAG (Red, Amber, Green) status and are on track for delivery. We have 13 amber projects and 1 red project across the programmes.
- 10.2 The one red RAG status project is in the Strategic Risk & Improvement area and is entitled Customer Centred Value for Money. The objective of the project is to develop a customer-centred strategy and conduct customer-focused Service review to provide options for delivery prioritisation. This has been completed; however, a further review is required to ensure the outcomes align with the Service following significant improvement activity. 'Provide customercentred value for money Services' is one of the current IRMP strategic objectives and this strongly aligns with this project. There is a subsequent action on our IRMP for delivery of the identified prioritised outcomes from the customer-centred review in year 3 as part of the IRMP Action Plan. A clear mitigation plan has been developed to review the strategy to ensure it remains fit for purpose as well as some of the associated actions where they correlate have been included in the People Action Plan.

11 Fleet Replacement

11.1 There has been significant progress made on the delivery of the 12 tonne fire engines despite the Covid-19 delay and these arrived in service as lockdown eased. However, there have been delays to the Fleet Replacement Programme as a result of Covid-19

12 Operational Resilience

The Service has been reviewing its crewing systems to ensure that they maximise the availability of fire engines and support the delivery of prevention and protection activity. Our new SDC has been delivered and has begun to make significant improvements through the central coordination of all physical resources required to maintain appliance availability. The centre has begun to reduce the burden placed on both wholetime and Retained Duty System (RDS) managers thereby allowing them to focus on core responsibilities such as the maintenance of operational competence and the delivery of core prevention and protection activities. We have increased the number of RLOs from three to six and have focused their activity to increase availability of RDS fire engines. During Covid-19, as we have seen an increase in the availability of our fire engines as more of are retained duty system staff are at home.

13 Contaminants

13.1 The Service is working to reduce the potential risk posed by contaminants that occur as a result of operational exposure to smoke from fires, in order to protect the health of our firefighters. A phased approach has been adopted with the provision of decontamination wipes on fire engines so firefighters can decontaminate whilst at the incident. This enables firefighters to remove contaminants from their skin as soon as reasonably possible. Phase two is looking at robust decontamination facilities for larger incidents. Phase three has

- started its work in partnership with County Council colleagues through fire station estate improvements.
- 13.2 An estates programme is underway to survey all stations to identify and address contaminants risks on the premises. A feasibility study is considering fire station facilities and how firefighters return from incidents and decontaminate to ensure contaminants are kept separate from other clean areas. Fire station premises risk assessments are continually updated as part of the reset and reboot of Covid-19. We have also increased our levels of PPE and hygiene on stations and at operational incidents however much more needs to be done to reduce risk further and complete projects.

14 Other options considered (and reasons for not proposing)

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

15 Consultation, engagement and advice

15.1 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.

16 Finance

- 16.1 Most of the Council's £26.8m Fire & Rescue Service budget is invested in frontline services including firefighting, rescue operations and community safety activity. This is summarised as the following:
 - Firefighting and rescue operations: £22,011,154
 - Community Fire Safety: £4,352,772
 - Fire Service Emergency Planning and Civil Resilience: £390,071

17 Risk implications and mitigations

17.1 Further information on risk is contained in Appendix A, and paragraph 9.

18 Policy alignment and compliance

- 18.1 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.
- 18.2 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.

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Appendices: A - IRMP Action Plan – Year 3

Background papers: None