

West Sussex Fire and Rescue Service Performance Report Quarter 4

Deputy Chief Fire Officer
Mark Andrews

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Strategic Performance Board Quarterly Report

Quarter 3 2020-2021

- 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 Provision	Corporate Health
Priority Programmes	Risk

- The explanations, mitigations and actions contained within this report are those endorsed by the Service Executive Board (SEB).
- This report covers data from the period of 1st January 2021 – 31st March 2021.

Cabinet Member Summary



The performance information contained within this report for WSFRS is for the fourth quarter of 2020/2021, 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.

During this quarter the Service also welcomed a revisit inspection from Her Majesty's Inspectorate of Constabulary & Fire & Rescue Services (HMICFRS) on the WSFRS causes of concern, which identified significant improvement in areas where improvement was needed.

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



This quarter was once again affected by the pandemic with continued efforts from all our staff to maintain the appropriate standards of safety to protect themselves and the public. This meant that our business continuity arrangements were still fully in force with crews and corporate staff carrying out restricted duties and visits to only the most vulnerable people.

During this quarter we also welcomed the HMICFRS to look once again at our Causes of Concern. The subsequent letter forms part of today's meeting and I am very proud of the 'significant' improvement identified by the Inspectors during their visit and once again their recognition of the assurance and governance that assist us in delivering continued improvements in performance.

In this report I am particularly pleased to see that 1st Appliance (Fire Engine) Attendance to critical fires has once again exceeded the target which is now for all four quarters of the year demonstrating our commitment to get the right fire service resources to those that need us most quickly and efficiently. I am also very pleased with the consistently low sickness levels, despite of the pandemic, which hints at a strong organisational culture of support and well-being for all colleagues and positive provision of occupational health and rehabilitation to those that need it. The well-being of our service remains a top priority and as the pandemic begins to ease we will continue to carefully monitor the impact both inside and outside of our organisation.

Performance Summary

Scrutiny Committee Members to note that with the exception of Core Measures CM22, 23, 24, 25 and 31, all of the remaining Measures are directly associated with the statutory functions and requirements of West Sussex Fire and Rescue Service.

At the end of Quarter 4 2020-21 the following performance against 31 Core Measures was recorded:

16 measures had a green status, 7 were amber and 8 were red. Of the 13 comparable measures that were red or amber last quarter, 8 have shown improvement and 5 a decline. One measure moved from red to green status and another from red to amber.

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

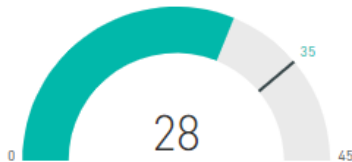
- CM1: Total number of Fire Deaths
- CM6: Number of Safe and Well Visits Completed
- CM8: High Risk Safe and Well Visits Delivered on Time
- CM9: Fire Safety Audits Completed under the Risk Based Inspection Programme
- CM13: Number of False Alarms in Non Domestic Premises
- CM18: Critical Fires - 2nd Appliance (Fire Engine) attendance

Performance Summary for all core measures at the end of Quarter 4 (1 of 2):

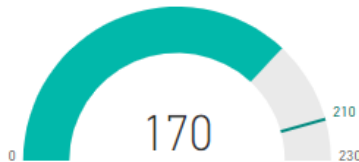
CM1: Fatalities in Fires



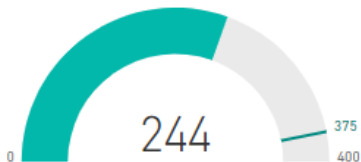
CM2: Injuries in Fires



CM3: Deliberate Primary Fires this FY



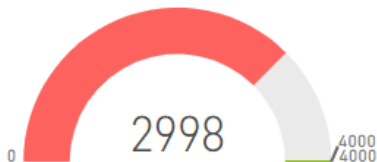
CM4: Deliberate Secondary Fires this FY



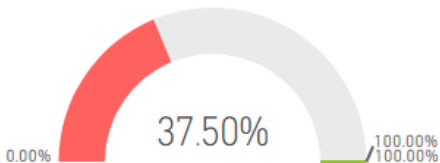
CM5: Safeguarding Created within 24 Hours of Concern Last Quarter



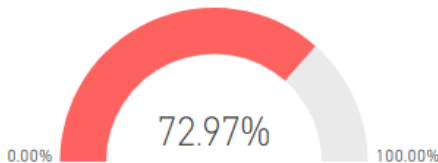
CM6: Safe and Well Visits



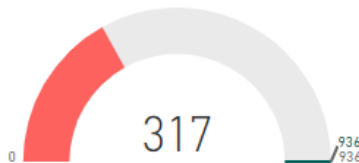
CM7: V High Risk Safe & Well on Time Last Quarter



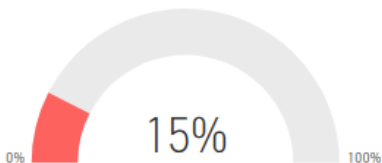
CM8: High Risk Safe & Well on Time Last Quarter



CM9: Fire Safety Audits - Year to Date



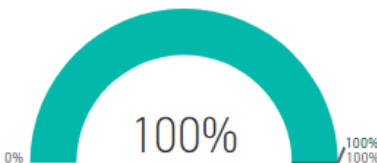
CM10: Unsatisfactory Inspections Last Quarter



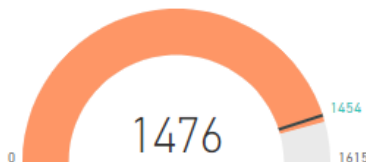
CM11: Prosecutions



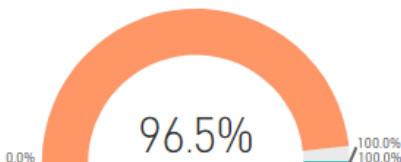
CM12: Consultations on time Last Quarter



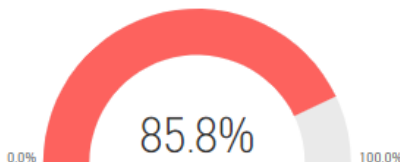
CM13: Unwanted Fire Signals YTD



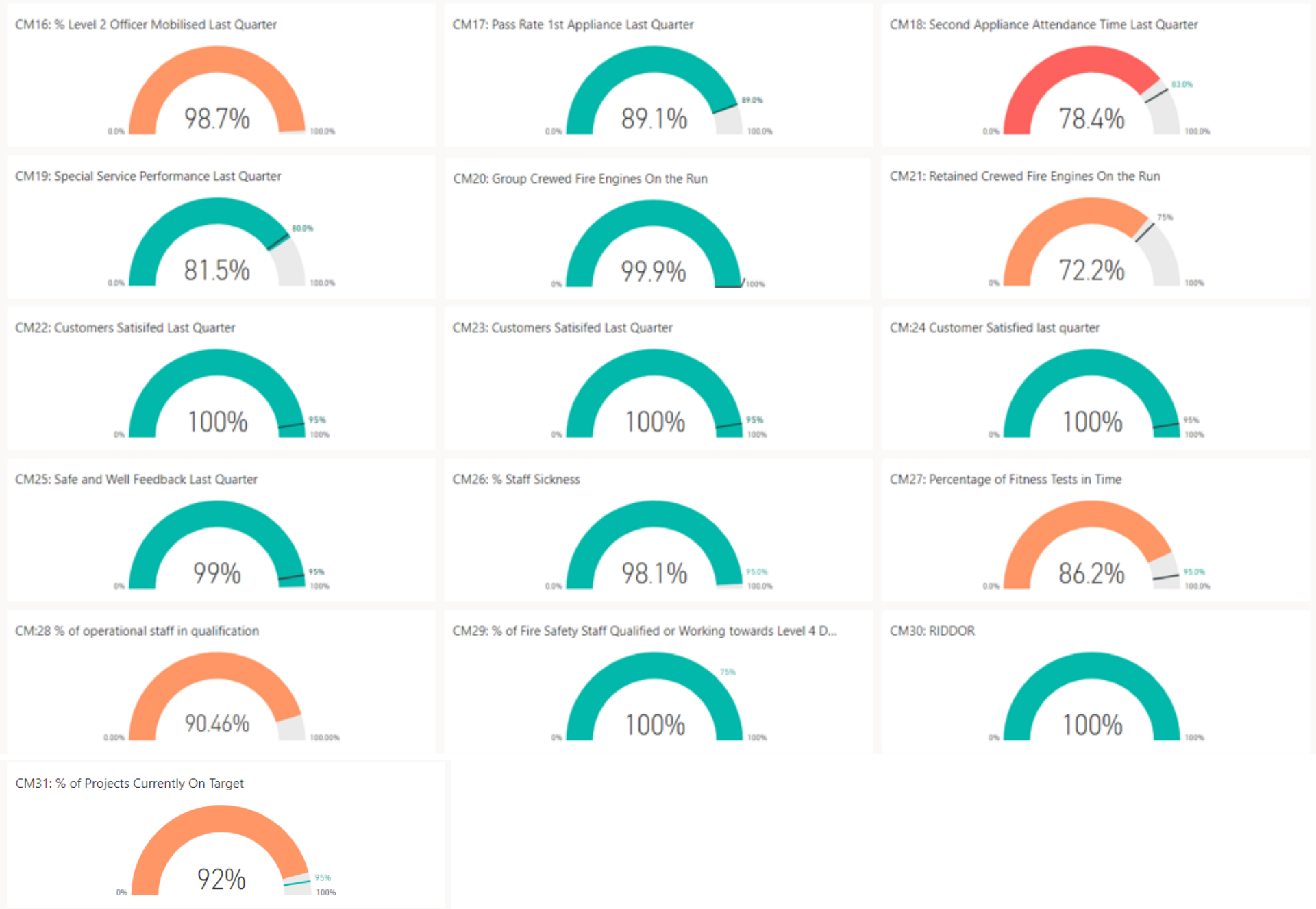
CM14: % Calls answered in 7 seconds last quarter



CM15: % 2 minute Send last quarter



Performance Summary for all core measures at the end of Quarter 4 (2 of 2):



Selected Measures (Red and Amber Status)

Quarter 4

(1st January 2021 – 31st March 2021)

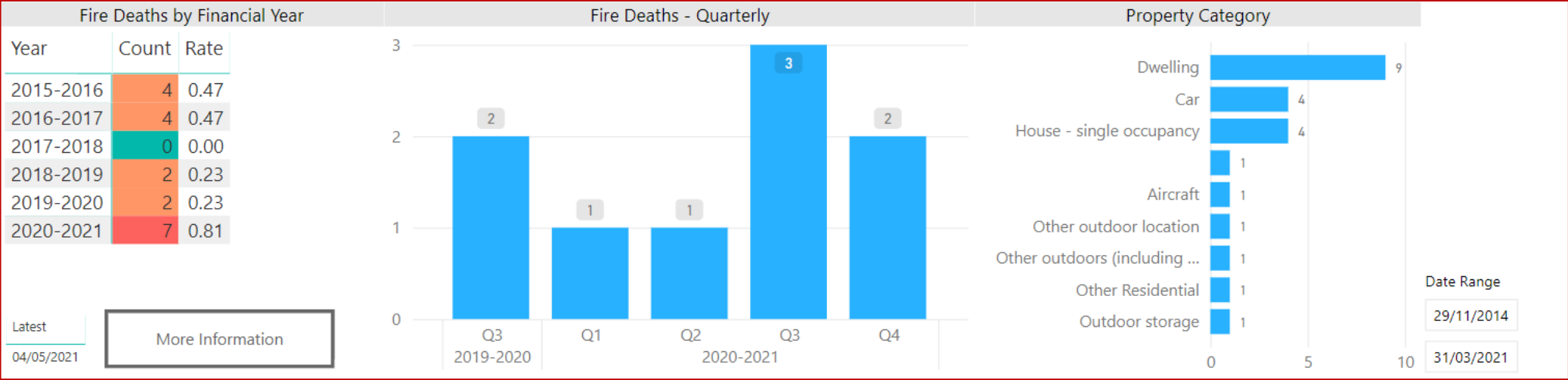
Core Measure 1: Total number of Fire Deaths in West Sussex over a year period starting from April

7 Fatalities in Fires Since April 2020

The total number of deaths that occur as a result of a fire. This includes a person whose death is attributed to a fire, even when the death occurs weeks or months later. This includes injuries/fatalities resulting from all types of fires including dwelling fires, non-domestic fires and vehicle fires, whether deliberate or accidental.

Annual Target:
Annual Target: 0 Green, Amber, 7 + Red.

Nicki Peddle
Service Owner
Prevention
Area



Commentary

Two fatalities occurred during this Quarter. 1 in Horsham as a result of an electrical fire and the other in Pulborough which was smoking related. We may be seeing an increase in ADF fire fatalities due to Covid, as a result of partner agencies visiting fewer properties, vulnerable people being reluctant to have people visit their homes and seek assistance. Whilst this is the highest number of fatal fires for some years there is no correlation with the number of accidental dwelling fires (ADFs) or ADF injuries both of which have shown significant reductions this year. The number of ADFs is 387 which is 46 below the 7 year average and perhaps more importantly the number of ADF injuries is down to 18 which is 10 fewer for the same time last year.

Actions

Treat: Both incidents have been subject to an operational performance and a fire fatality case review. The Deputy Chief Fire Officer (DCFO) chaired the panel which carried out an intensive review of the incident and it's background. The reviews considered both the background and the follow up fire prevention activity which took place immediately afterwards, as well longer-term prevention activity which will be influenced from the findings of this process. There are a number of activities that will take place through partnerships to develop an understanding of fire risk and any immediate prevention actions that can be taken. Sadly, despite all our very best prevention and protection efforts, these accidents do still happen and this is why we focus so hard on getting the fire engine to the scene as quickly as possible and train our crews relentlessly on choosing the right tactics to save lives and property once we are in attendance. These 2 incidents take the total fire deaths in 2020/21 up to 7 and officers will be preparing an additional annual report focusing on the background to these incidents and along with other serious fires identifying any trends or patterns that may inform future prevention plans for next year.

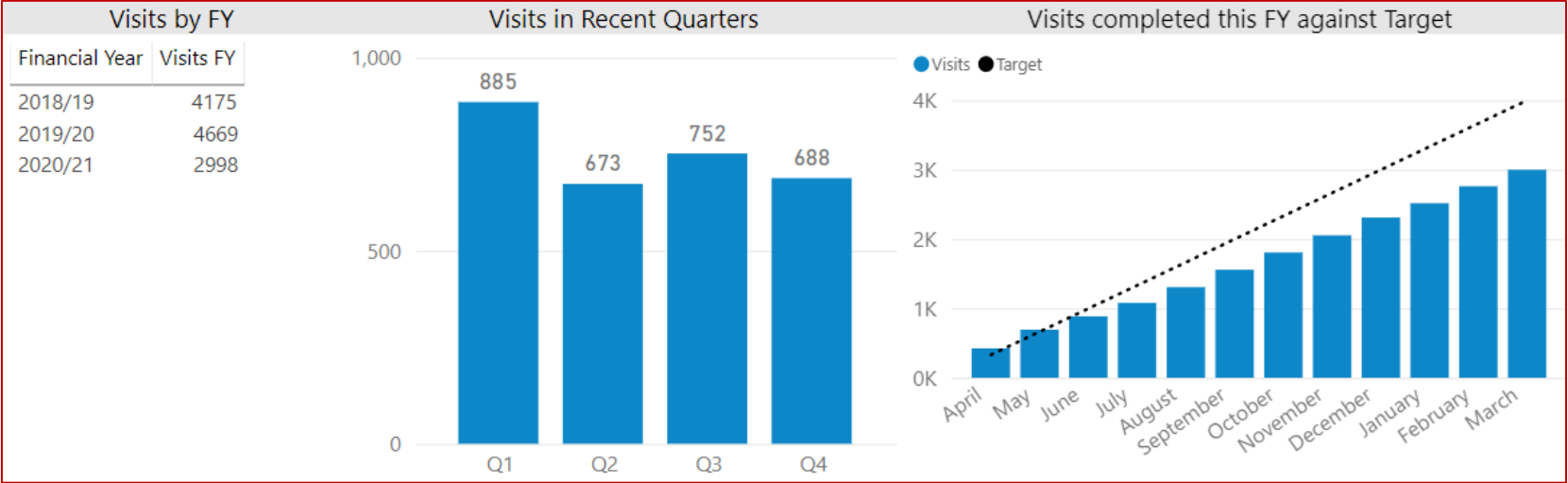
Core Measure 6: Number of safe and well visits (S&WVs) delivered to those who are at very high risk or high risk.

2998 safe & Well visits
Since April 2020

Annual Target:
Annual Target:
4,000 Green,

Nicki Peddle
Service Owner
Prevention
Area

Number of Safe and Well Visits (S&WVs) delivered to those who are at very high or high risk of dying or being injured in the event of a dwelling fire over a year period starting from April. Target is 4000 Safe and Well Visits per Financial Year.



Commentary

The quarterly target based on the annual target of 4000 visits is 1000 visits each quarter. In Quarter 4, 688 visits were made to the property to completed a Safe and Well Visit. Extensive activity continues to increase the number of requests and referrals for a visit. Despite the commencement of vaccinations, our target audience remain reluctant to have our staff enter their homes. The annual figure is 36% down on the previous year, which is a result of the pandemic (lockdown and shielding) many of our target audience are clinically extremely vulnerable. A total of 3460 visits (at all risk levels) were completed in person with an additional 822 being complete over the telephone with the resident declining a visit to their property due to Covid. Cumulatively due to strong performance pre Covid, we are still on target to meet our target of 19800 by March 2022, (4000 per year is a milestone).

Actions

Treat: Activity continues to increase the number of visits through introductions to the fire service and through direct community activity with warm calling (leaflet drops and follow up door knocking). The new campaign promoting smoke detectors and SWVs has now commenced and its impact will be monitored.

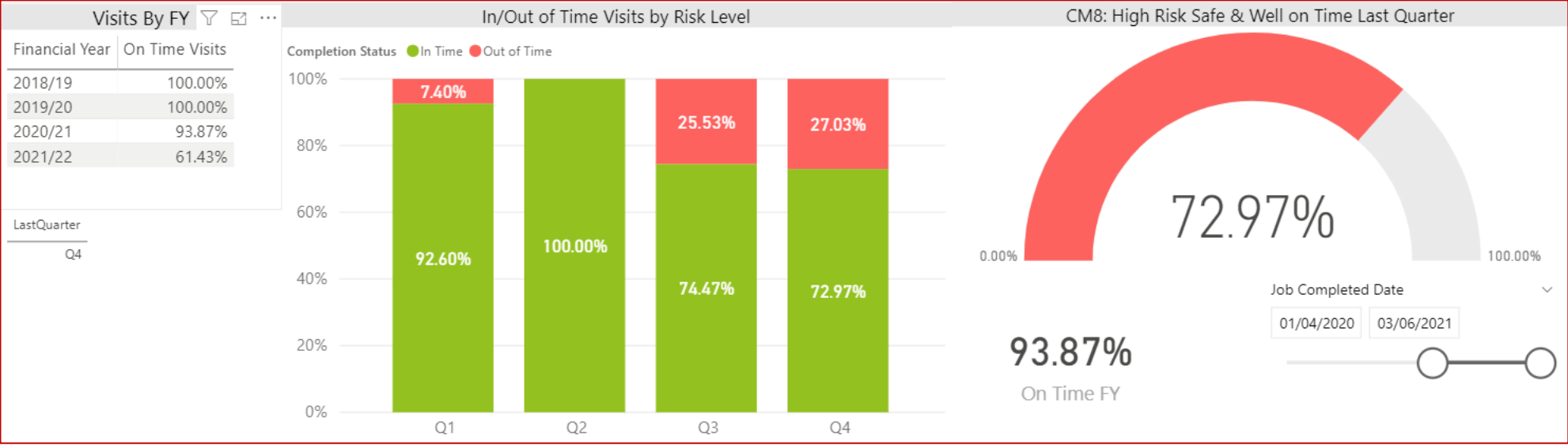
Core Measure 8: High Risk safe and well visit referrals delivered within 7 working days

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, completed within 7 working days. Target is 100% completed on time.

72.97% of HR S&WV Completed on Time this quarter

Annual Target: Annual Target: 100% on time Green,

Nicki Peddle Service Owner Prevention Area



Commentary

During Q4 there were 40 visits where it was not possible to agree a visit with the customer within the 7 days requirement set out in our Standard Operating Procedure as reflected in this measure with 27% not in the timescale. Data indicated that 100% of high-risk customers were contacted within the timeline. There are a number of reasons why residents decline a visit within 7 days, very similar to those in the very high category. For example, the resident requesting a delay or being uncontactable. 100% of visits were completed within 7 days when the resident permitted access to their property.

Actions

Treat: The pandemic and recent period of lockdown continues to have an impact on this measure given that some residents will not allow the Service to access to their homes which inevitably builds in a delay to a visit over the 7-day reporting period. However, in all cases where an 'in person' safe and well visit to a vulnerable person was requested, and who were happy for us to make a home visit, these have been completed within 7 days. Officers continue to work hard at alternative ways of delivering this service over the telephone to at least ensure the basic fire safety messages are conveyed until the 'in person' assessment can be made.

Core Measure 9: Number of Fire Safety Audits completed under the Risk Based Inspection Programme

317 Audits completed Since April 2020

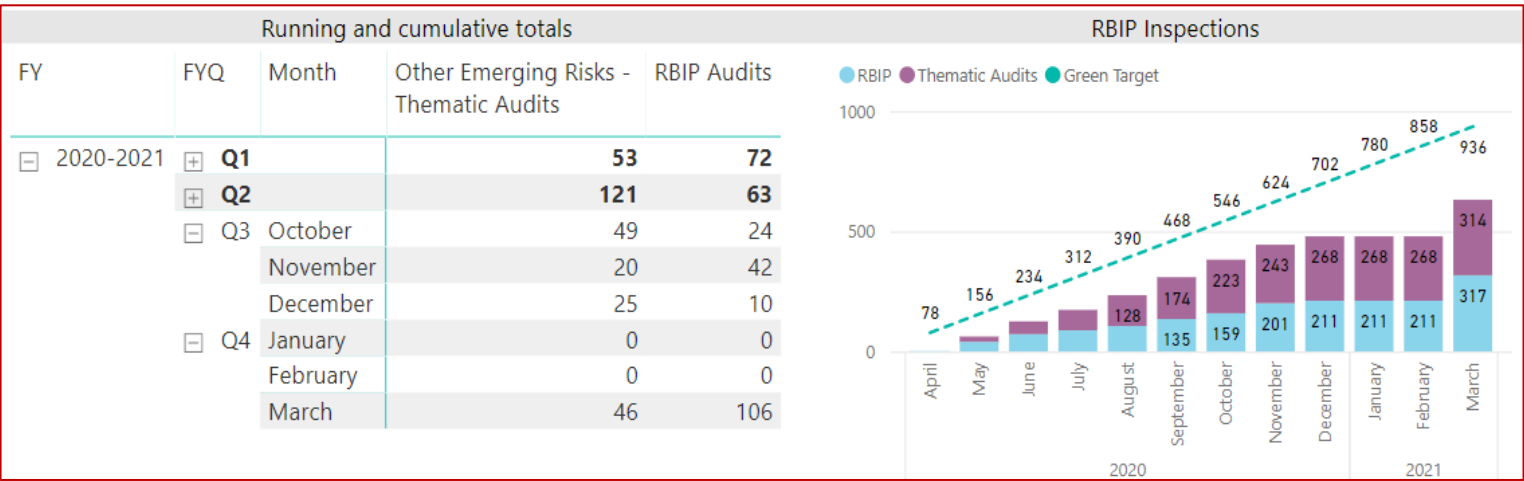
The total number of full Fire Safety Audits carried out to enforce The Regulatory Reform (Fire Safety Order 2005) each financial year, starting in April.

Annual Target:
Annual Target:
936 Green, <936
Red

Steve Ash
Service Owner
Protection
Area

Commentary and Mitigating Actions

The Risk Based Inspection Programme (RBIP) is the work we plan to deliver every year so that we are effectively enforcing the Fire Safety Order. The RBIP is a combination of the activities on known sleeping risks, specific risk premises, thematic risks and IRMP work. At the core of the RBIP is a regular inspection program for 1533 known sleeping risks. To achieve this target an average of 936 visits per year is required. In 2019, 1391 audits were completed which has meant that less planned re-inspections are required this year than the average. There is no backlog of outstanding re-inspections. Lockdown in this quarter has had an impact on the type of work that is either required or possible. While inspecting Officers have continued to carry out remote and tabletop audits, owing to the strict C-19 conditions many premises remain closed with no response or contact. Those that are open have been contacted to find the best way to offer advice and to ensure we keep premises safe. We have sent out communications and sent letters to some premises outlining what actions they should be considering as they remain open to the public. We have also responded to 100% of all licensing consultations where premises are seeking changes to their licensing conditions so they can be Covid safe. We have also worked as part of the multi-major incident response to Covid to ensure new risks - such as increased oxygen use in hospitals or convalescence hotels are safe from fire. We have also used inspecting officers to undertake essential data quality tasks in this quarter. This is to ensure the move to the new fire safety database has the best possible starting point. Finally, we have also used inspecting officers to support the delivery of improvement projects such as website redesign and the production of AFA reduction education resources. As the roadmap to recovery continues, we are supporting local business and booking more on-site audits ensuring the safety of our staff and the service users.



Recommendation to SPB: (Tolerate or Treat)

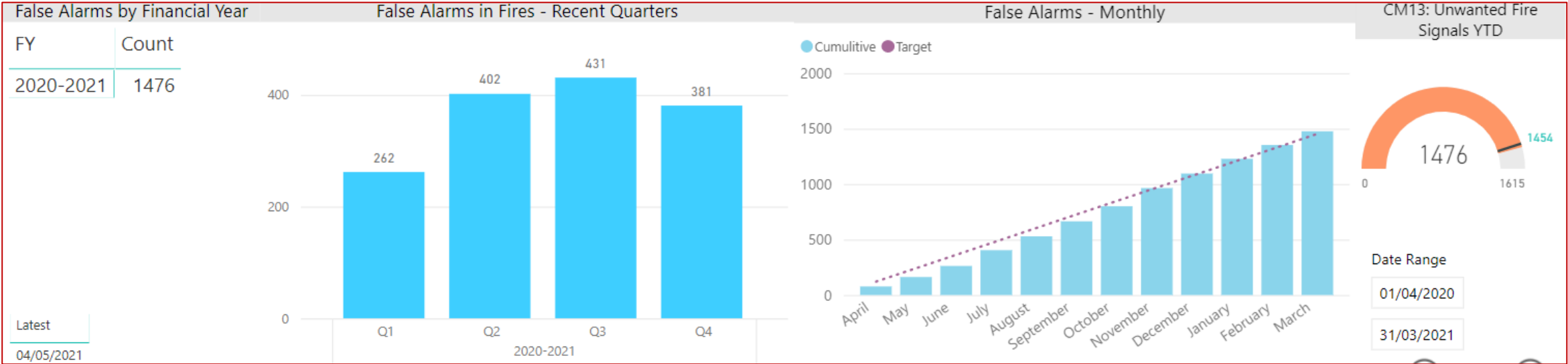
Treat: The delivery team have reviewed how to maximise their output and continue to deliver a safe service whilst reviewing the impact of Covid, new ways of working with current restrictions and phased returns to a full audit process. Audits for high rise blocks of flats are being carried out as part of the national program for in-person audits and will be completed within the agreed time scales despite the pandemic. The new Farynor system continues to create internal efficiencies that will increase the capacity to undertake a higher number of audits along with more staff being recruited to vacant and new posts.

Core Measure 13: The number of incidents each year which are unwanted fire signals (false alarms) from fire alarm systems in non-domestic premises.

1476 un-wanted fire signals YTD

Annual Target: Green 10% reduction, 2% Amber, <2% Red

Steve Ash
Service Owner
Protection Area



Commentary

This measure records the number of incidents to which a least one fire engine was sent where the origin of the call was an automatic fire alarm (AFA) system, the property type was non-residential or other residential and the incident was recorded as a False Alarm. AFA data is analysed monthly with actions taken to reduce the number of AFAs.

Our AFA policy has recently been reviewed and an improved policy will be implemented to increase our impact in this area.

The change in the use of buildings due to Covid 19 restrictions has had an impact on the number of AFAs attended and as such the reduced number of incidents of this type in this financial year cannot be wholly attributed to the fire service demand reduction activity

Recommendations (Tolerate or Treat)

Treat: Training is being delivered to ensure AFA reduction activity takes place at all relevant incidents. This, along with a suite of other measures, should assist in driving down unwanted fire signals to meet the annual 10% reduction on our historical average.

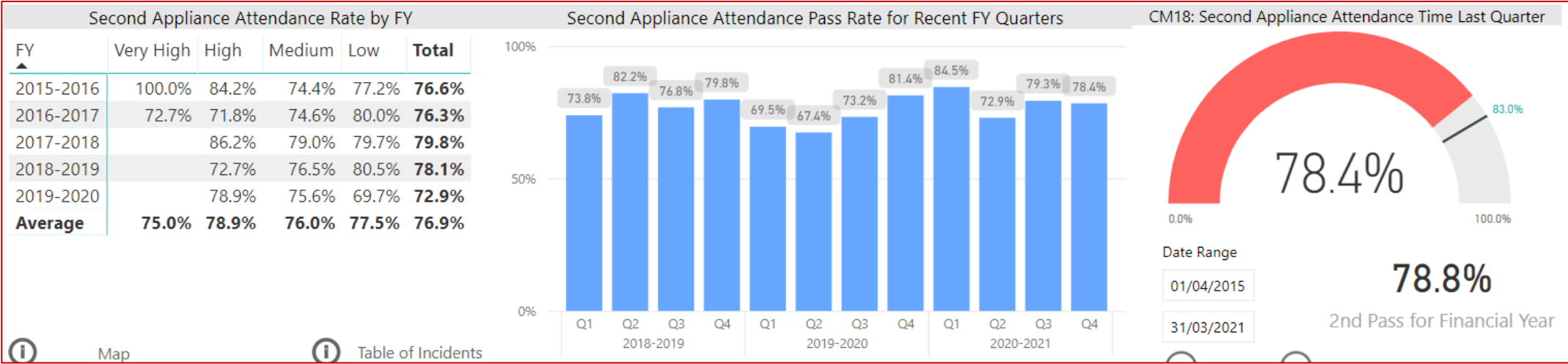
Core Measure 18: Critical Fires – 2nd Appliance Attendance

78.4% Q4
78.8% YTD

Jon Simpson
Service Owner
Response
Area

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 occasions where the second fire engine arrives at an emergency incident within the target number of minutes from the time the emergency call was answered.

Core Measure 18 Targets:
11 minutes to Very High risk
13 minutes to High risk
15 minute to Medium risk
17 minutes to Low risk
83% Target for Green



Commentary

Performance against this measure is currently below target at 78.4%, this represents a 0.9% reduction from Q3. End of year performance is 78.8% which represents a 6% improvement when compared to the 2019/2020 financial year. This has been achieved by increasing the availability of our retained fire engines through previously identified projects, all of which are having a positive impact on our performance. Whilst this performance represents an improvement on the previous year, we recognize that there is still more to do, the learning and improvements will be taken forward into our next IRMP to ensure continuous improvement.

Recommendation to SPB: (Tolerate or Treat)

Treat: The retained Marginal Gains project continues to make incremental improvements to the availability of our retained fire engines. This is being further supported by a station-by-station review to identify the specific availability needs of each station. This review will result in a workforce action plan for each of our 23 retained stations.

Areas of Significant Improvement and Success

Quarter 4

(1st January 2021 – 31st March 2021)

Areas of Significant Improvement and Success (1 of 2)

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.
Enormous credit to all our staff in successfully improving our performance during this quarter despite of the impacts of COVID 19.

The following corporate measures showed notable success in Quarter 4:

Core Measure 2: The number of Fire Injuries are significantly lower in 2020/2021 than in previous years, possibly as a result of occupiers detecting fires sooner and taking evasive action

Core Measure 4: The number of Deliberate Secondary Fires shows significant reduction/improvement in 2020/21 compared to previous years. Targeted arson reduction programmes and campaigns to raise awareness have been effective here, though good performance may also be attributed in part to COVID lockdowns.

Core Measure 5: Safeguarding Referrals have been completed within 24 hours of discovery on 100% of occasions throughout 2020/21. The new process for safeguarding has resulted in all referrals being made in a timely and direct way addressing one of the concerns identified by the 2018 HMICFRS Inspection.

Continued on next slide...

Areas of Significant Improvement and Success (2 of 2)

- **Core Measure 17: Critical Fires - 1st Appliance (Fire Engine) Attendance** time pass rate has exceeded the target for all four quarters of the year (five consecutive quarters and the highest in recent years). This indicates that the investment into the Service Delivery Centre, the additional 3 Retained Liaison Officers (RLO's), the County Crewing pilot and maximising the Crewing Optimisation Group (COG) establishment is having a positive effect on crewing of fire engines, leading to improving attendance standards.
- **Core Measure 19: Critical Special Services - 1st Appliance (Fire Engine) Attendance** has exceeded the target in Q4 and as an average for the year 2020/21.
- **Core Measure 26: Sickness levels** have remained consistently low throughout 2020/2021 despite additional factors that have been in force throughout the COVID 19 pandemic.

The following corporate measure has shown notable improvement in Quarter 4:

- **Core Measure 21: Adequate Crewing on Retained Frontline Fire Engines** has seen sustained improvement throughout the year. Though some crew availability may be attributed to the effects of COVID19 lockdown, a number of initiatives have supported an improvement in performance for this measure throughout the year.

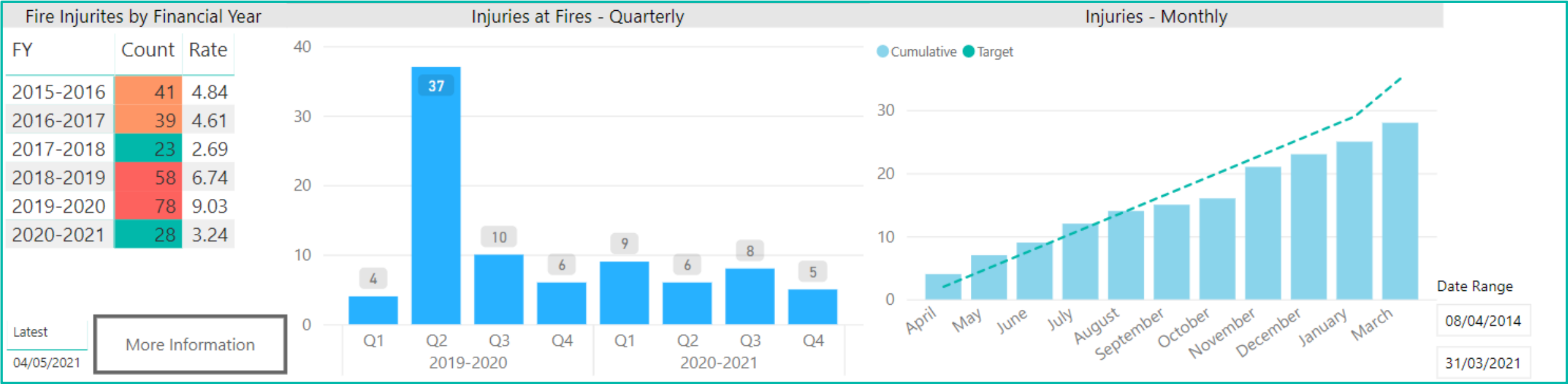
Core Measure 2: Number of fire casualties in West Sussex over a year period starting from April

28 Casualties in Fires Since April 2020

The total number of casualties that occur as a result of a fire. This includes a person or persons whose injuries may be slight or serious and require hospital treatment and which are attributed to the fire.

Annual Target:
Annual Target:
<26. < 35 Green,
35-45 Amber, >
45 Red

Nicki Peddle
Service Owner
Prevention
Area



Commentary

Five cases all with slight injuries, slight burns and smoke inhalation. These incidents were inside someone's home, the majority were cooking related. This year's figure (28) is 64% lower than last years figure, which may be as a result of Covid and more people being at home and detecting fires earlier and taking evasive action.

Recommendations to SPB

Treat: Continue to use learning from incidents to educate and inform our communities via press releases and through the delivery of the local risk management plans, as well as the annual kitchen safety campaign.

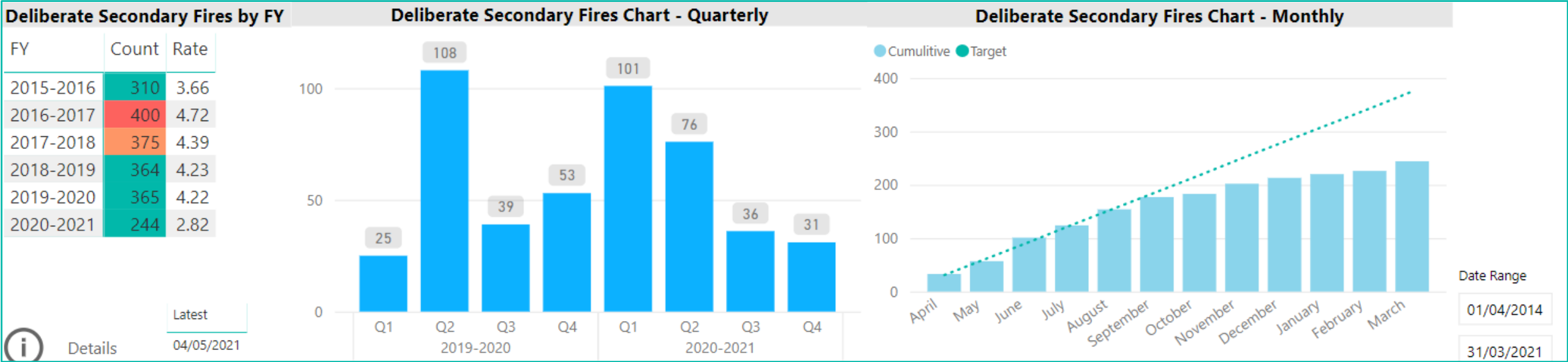
Core Measure 4: The number of deliberate secondary fires in West Sussex over a year period starting from April

244 Deliberate Secondary Fires Since April 2020

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. The number of deliberate secondary fires over a year.

Annual Target:
<375 Green, 375
- 400 Amber,
>400 Red

Nicki Peddle
Service Owner
Prevention
Area



Commentary

Worthing and Crawley have the highest proportion of deliberate secondary fires. Over 70% of the fires took place outside. The year has ended with a 33% reduction on the previous year.

Recommendations to SPB

Treat: Hotspots are indicated through the data that has been used to build the local risk manage plans. Community based activity will be directed to these areas.

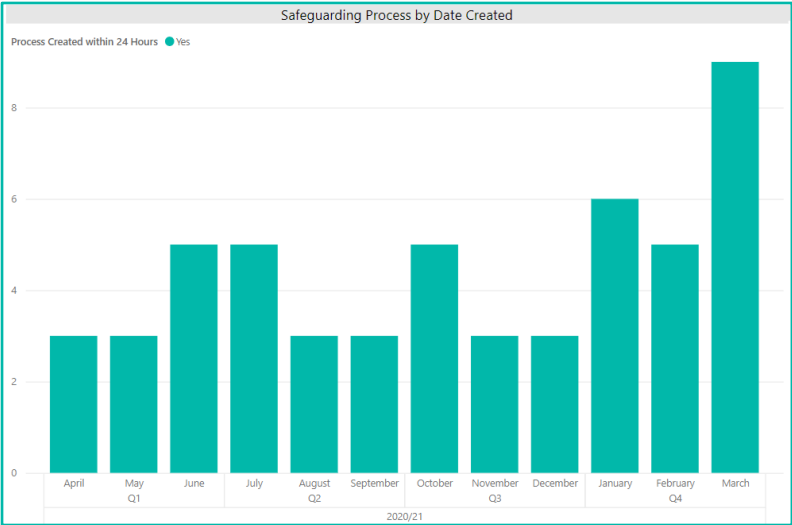
Core Measure 5: Safeguarding referrals made to Social Care colleagues in West Sussex County Council within 24 hours of discovery

Safeguarding referrals made to Social Care colleagues in West Sussex County Council within 24 hours of discovery over a year period, starting from April. To ensure that safeguarding referrals are made in a timely manner for the protection of individuals considered at risk in West Sussex. This is the time taken from the Duty Officer or Safeguarding Coordinator being made aware of a safeguarding case, to the referral being made to the local authority

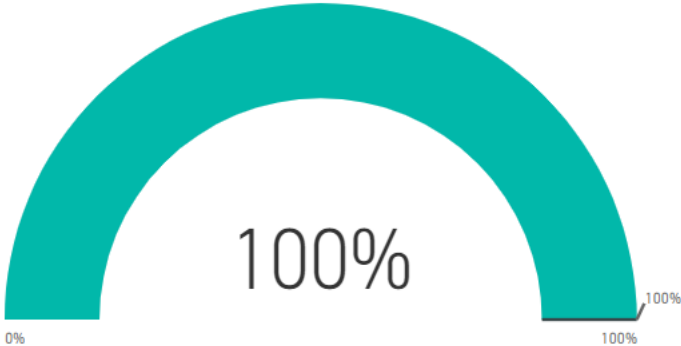
100% of concerns were dealt with thin 24 hours in the last quarter

Annual Target:
Annual Target: 100% Green.
<100% Red

Nicki Peddle
Service Owner
Prevention Area



CM5: Safeguarding Created within 24 Hours of Concern Last Quarter



100%
Year to Date Pass Rate

Commentary and Mitigating Actions

20 safeguarding referrals were made in Q4 and 100% were completed on time. This has been achieved as a result of staff being able to identify vulnerability and take the appropriate action by making a referral using our new electronic form. The new process has resulted in the safeguarding referrals all being made in a timely and direct way addressing one of the concerns identified by the 2018 HMICFRS Inspection report.

Recommendation to SPB: (Tolerate or Treat)

Treat: Continue to monitor and feedback to the person making the referral to support the ongoing development of our safeguarding process and risk management.

Core Measure 17: Critical Fires – 1st Appliance Attendance

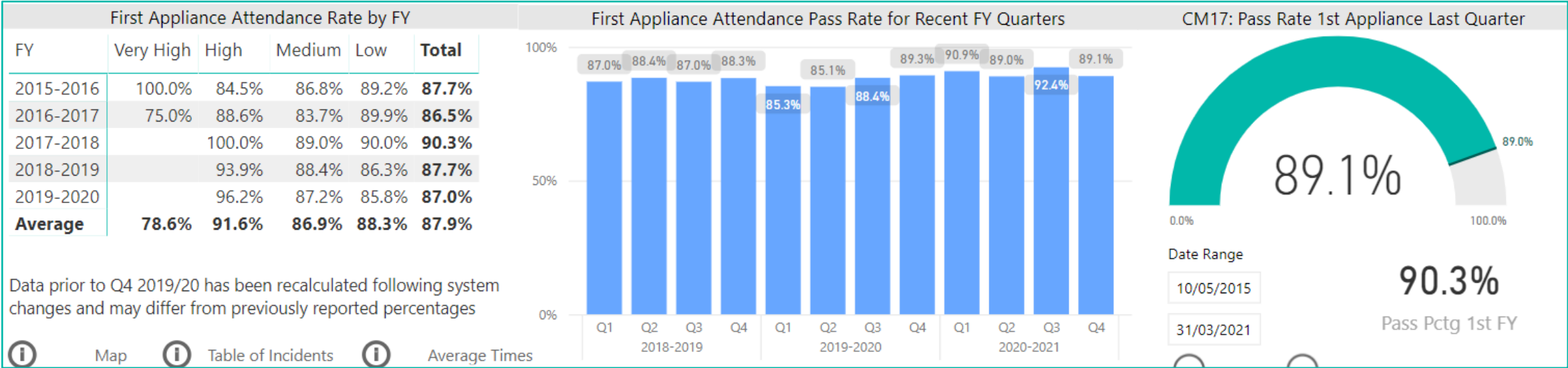
89.1% Pass Rate 1st Appliance Last Quarter

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. Occasions where the first fire engine arrives at emergency incident within the target number of minutes from time the emergency call was answered.

Targets:

- 8 minutes to Very High Risk
- 10 minutes to a High Risk
- 12 minutes to a Medium Risk
- 14 minutes to a Low Risk
- 89% Target for Green

Jon Simpson
Service Owner
Response
Area



Commentary

Performance is again strong in Q4 with attendance standards met on 89.1% of occasions. Whilst this reflects a 3.3% reduction from Q3 it does mean that West Sussex Fire and Rescue Service has achieved its emergency response standard for critical fires in all quarters within the financial year, with year end performance of 90.3% being achieved. This is also the fifth consecutive quarter that this target has been achieved. We are maintaining a strong focus on sustained improvements in our retained fire engine availability and our associated projects have led to an 8.7% improvement when compared to Q4 of 2019/20.

Recommendations to SPB

Tolerate: The Retained Marginal Gains project continues to make incremental improvements to the availability of our retained fire engines. This is being further supported by a station-by-station review to identify the specific availability needs of each station, this review will result in a workforce action plan for each Of our 23 retained sections.

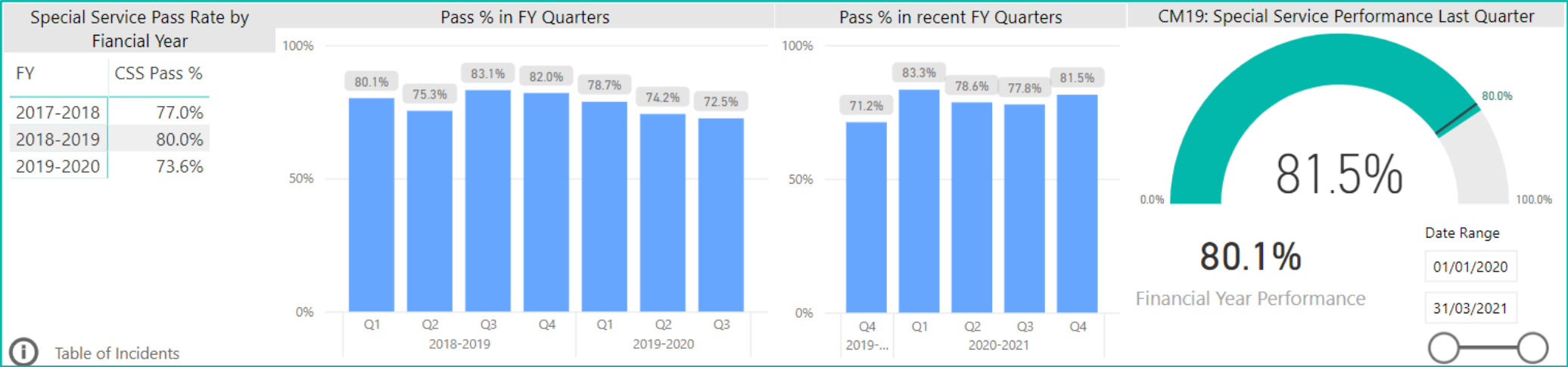
Core Measure 19: Critical Special Service – 1st Appliance Attendance

81.5% arrived within 13 minutes

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. Occasions where the first fire engine arrives at an emergency incident within the target number of minutes from time the emergency call was answered.

Annual Target:
First Fire Appliance is in attendance at a critical special service within 13 minutes. **Target 80% Green**

Jon Simpson
Service Owner
Response Area



Commentary

Q4 performance is 81.5% which is a 3.7% improvement from Quarter 3. When compared to Q4 of 2019/20 a performance improvement of 10.3% has been achieved. The year end performance of 80.1% means that WSFRS has achieved its emergency response standard for critical special services. A significant number of these incident types involve Road Traffic Collisions and assisting other emergency services, due to the nature of these incidents, information passed between emergency services can sometimes be delayed such as time taken to identify incomplete address information. This can lead to longer call handling and mobilisation times.

Recommendations to SPB

Tolerate: The Retained Marginal Gains project continues to make incremental improvements to the availability of our retained fire engines. This is being further supported by a station-by-station review to identify the specific availability needs of each station, this review will result in a workforce action plan for each of our 23 retained sections. Officers from the Joint Fire Control regularly meet with multi-agency emergency control room partners to ensure call information is passed in a timely and accurate manner.

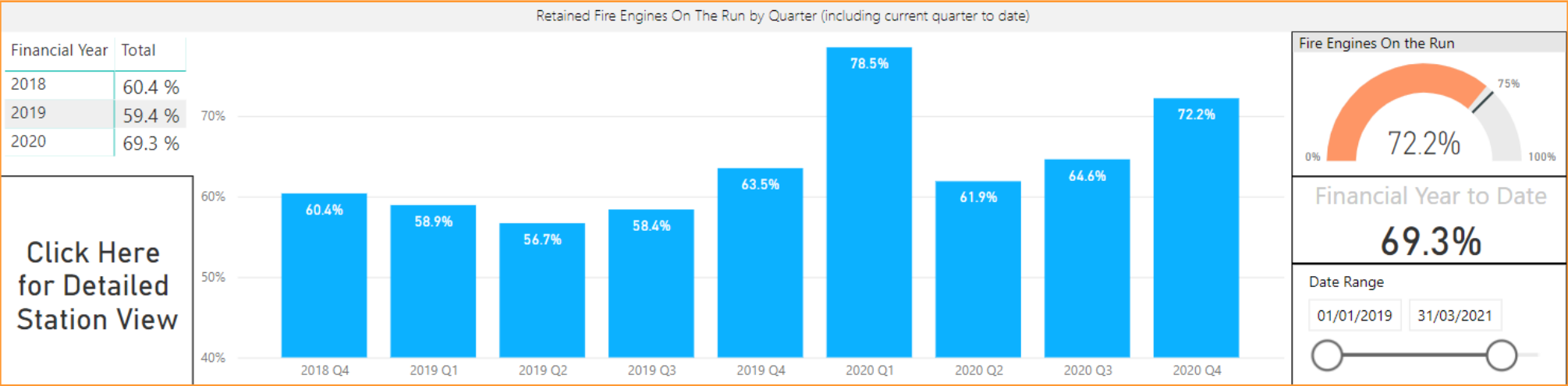
Core Measure 21: Adequate crewing on all retained frontline fire engines (based on 24/7 crewing)

72.2% availability
in the last quarter

Retained frontline fire engines are crewed mainly by on-call fire fighters who are based at stations in more rural locations and, when they receive the can via their pagers, leave their place of work or home and attend emergencies from the local retained station. Four qualified people are required on a frontline fire engine to ensure safety. This measure examines the percentage of hours where there are sufficient minimum qualified fire fighters (4 personnel) on retained fire engines.

Annual Target:
Green: 75-100%
Amber: 65-74%
Red: <65%00

Jon Simpson
Service Owner
Response
Area



Commentary

Retained Duty System (RDS) availability has improved in Q4 by 76% when compared to Q3. RDS availability has improved by 3.7% compared to the same period in 2019/20. The year end performance is 69.3% against target of 75%, whilst this remains a constant focus for WSFRS it does represent a 9.9% improvement in overall availability when compared to the previous financial year. The Service Delivery Centre (SDC), Retained Liaison Officers (RLO), Crewing Optimisation Group (COG) and the County Crewing pilot continue to support and maximise RDS fire engine availability. COG have made RDS fire engines available on 163 occasions. County Crewing has supported RDS fire engine availability on a further 99 occasions during weekday and weekend periods. The County Crewing system utilises spare RDS staff to cover crewing deficiencies at other RDS fire stations for a specific period of time.

Recommendations to SPB

Treat: The RDS Marginal Gains project continues to make incremental improvements to the availability of our retained fire engines. This is being further supported by a station-by-station review to identify the specific availability needs of each station, this review will result in a workforce action plan for each of our 23 retained sections. Work is progressing to widen County Crewing opportunities to include whole-time staff. This will increase the number of staff available to support the availability of RDS appliances and will allow WSFRS to expand the number of stations that we deploy County Crewing staff to.

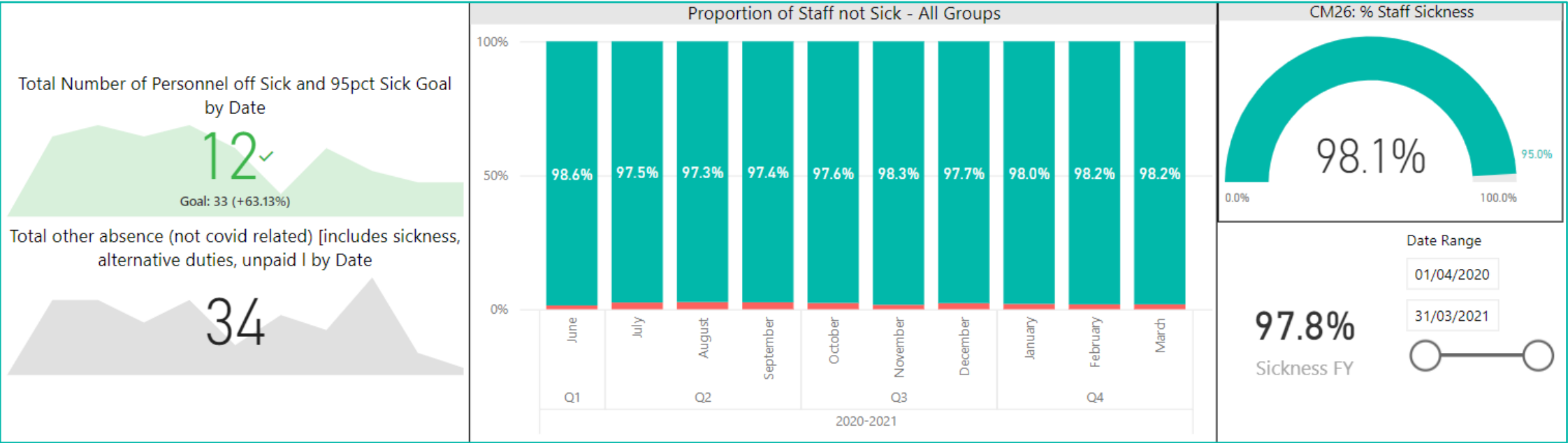
Core Measure 26: Working time lost to sickness across all staff groups

98.1% staff well

Annual Target:
Staff wellness
Green: >95%
Amber: 90-95%
Red: <90%

People
Area

This measure examines the proportion of staff not sick



Commentary

The target of 95% attendance has been achieved consistently over the last quarter and throughout the year, with the proportion of staff not sick at 98% or above each month. Staff that are off sick benefit from being managed in line with the Sickness Absence policy ensuring the appropriate wellbeing and support is in place and medical advice is obtained, as necessary. This very positive set of figures provides a good indication of the levels of communication and pastoral support afforded to colleagues when they are poorly and a culture whereby staff engage with the absence management processes to return to work in a safe and timely manner.

Recommendation to SPB: (Tolerate or Treat)

Tolerate: All sickness cases are reviewed monthly by managers and HR to ensure these are being progressed in a timely manner and staff can return to work safely and with the appropriate support/adjustments.