

# West Sussex Fire and Rescue Service Performance Report Quarter 2 2022/23

Deputy Chief Fire Officer

Mark Andrews

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# Strategic Performance Board Quarterly Report

## Quarter 2 2022-2023

The aim of the 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, namely Service Provision, Corporate health and where appropriate, Priority Programmes and 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 July 2022 – 30th September 2022.

# Cabinet Member Summary



This quarter saw the much anticipated publication of the His Majesty's Inspectorate of Constabulary and Fire and Rescue Service (HMICFRS) report for WSFRS from the second full round of inspections. I was extremely pleased to read that it highlighted the marked improvement in the service since the first formal inspection in 2018, which is a considerable achievement against the challenges presented by the COVID 19 pandemic during this time.

The Service saw high levels of engagement and support from across the Service and the public in hosting many successful open days during the summer. This was the first time in over two years that stations had been able to fully open their doors and the excellent media and exciting displays provided much opportunity to promote community safety messages and crucially WSFRS Safe and Well Visits.

Following the death of her Majesty Queen Elizabeth II on the 8th September and the National Mourning that followed, WSFRS continued in its delivery of critical services to our residents. The performance information contained in this report demonstrates the effect of recommendations and interventions that WSFRS has applied on its service delivery.

# Chief Fire Officer Summary



The HMICFRS report from the second full round of inspections published this quarter recognised several improvements in the service since our last inspection in 2018. We achieved good in the efficiency pillar, however, there is still more work to be done with the Service being judged as requires improvement in the effectiveness and people pillars. We will now focus on an action plan to respond to the one remaining cause of concern which relates to people and culture which will form part of our People Service Plan within the Community Risk Management Plan (CRMP).

This quarter was one of the busiest operational periods for the Fire Service due to the impact of the long hot summer and record high temperatures. With significant demand on resources both nationally and here in West Sussex, many neighbouring counties experienced protracted major wildfire incidents. West Sussex responded with well-rehearsed business continuity procedures and support from our specialist wildfire tactical advisors to ensure that we remained prepared throughout this difficult period.

A number of major projects and project consultations began during this quarter including the first formal CRMP project on Day Crewed 7 where we plan to increase immediate response availability across 4 day crewed stations from 5 to 7 days. Two major procurement projects were launched in collaboration with Surrey and East Sussex Fire and Rescue Services to jointly purchase breathing apparatus and incident command vehicles. These are the first projects of this size and scale being led by West Sussex which present an exciting opportunity for greater operational alignment between the services whilst providing wider efficiency and economies of scale in the process.

Finally our Local Risk Management Plans (LRMPs) continue to help deliver positive performance and a number of local initiatives are beginning to show the value of local targets, engagement and trend analysis. They have been developed through community engagement and using data to identify local risk, enabling efficient planning and management of actions to reduce the identified risks.

# Performance Summary

At the end of Quarter 2 2022-23 the following performance against the 29 core measures was recorded: 13 measures had a GREEN status, 5 were AMBER and 11 were RED.

Of the 5 comparable measures that were RED or AMBER last quarter:

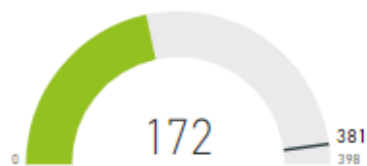
- 4 measures showed a decline in performance and 1 an improvement
- None of the 5 measures changed RAG status

Of the 16 comparable measures that were GREEN last quarter:

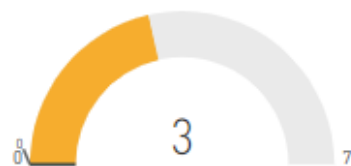
- 8 measures showed a decline in and 2 an improvement
- 4 measures moved to RED status and 2 to AMBER

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

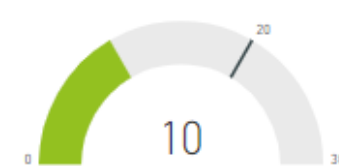
CM1: Accidental Dwelling Fires



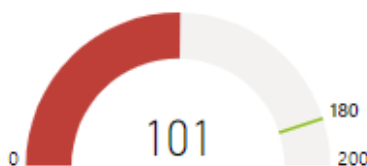
CM2: Accidental Dwelling Fire Fatalities



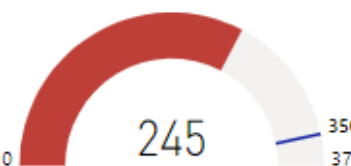
CM3: Accidental Dwelling Fire Casualties



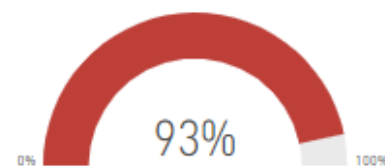
CM4: Deliberate Primary Fires



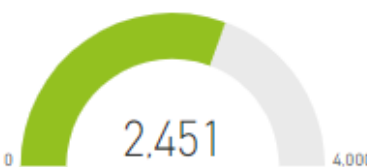
CM5: Deliberate Secondary Fires



CM6: Safeguarding - % Created within 24 Hours



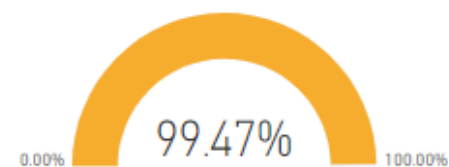
CM7: Safe and Well Visits



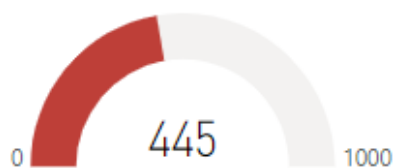
CM8: Very High Risk Safe & Well on Time



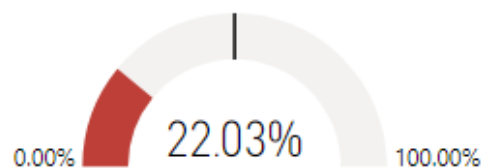
CM9: High Risk Safe & Well on Time



CM10: Fire Safety Audits



CM11: Unsatisfactory Inspections



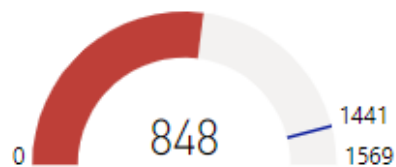
CM12: Prosecutions Successful



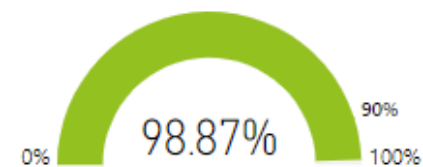
CM13: Statutory Fire Safety consultations



CM14: Unwanted fire signals

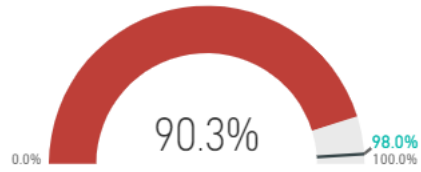


CM15: Site Specific Risk Information (SSRI)

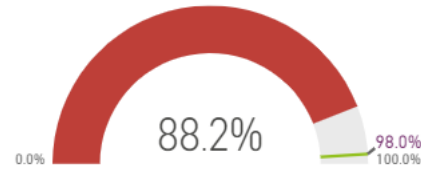


# Performance Summary for all core measures at the end of Quarter 2 (2 of 2):

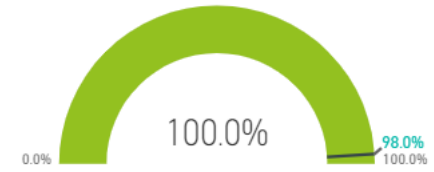
CM16: 999 Calls Answered on Time



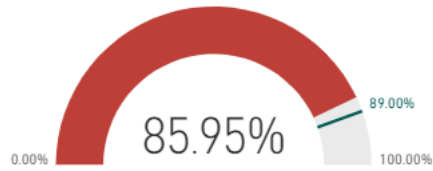
CM17: Time to Alert



CM18: Time to Inform L2



CM19: Critical Fires 1st Appliance Attendance Times



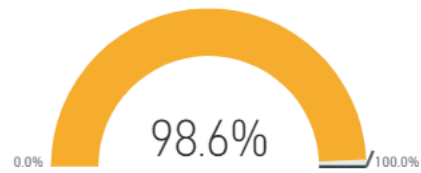
CM20: 2nd Appliance Attendance Times



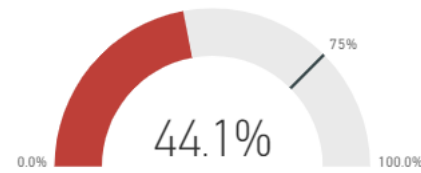
CM21: Critical Special Service Attendance Times



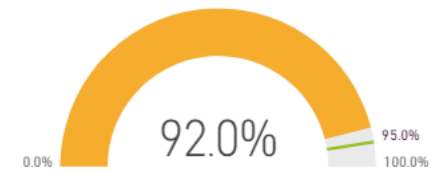
CM22: Immediate Response Availability



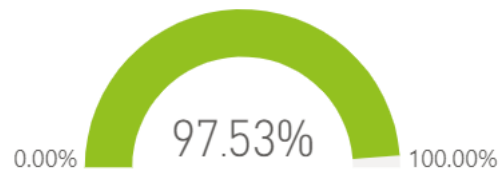
CM23: Retained Availability



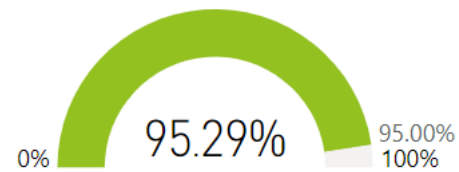
CM24: Feedback Surveys - Customer Satisfaction



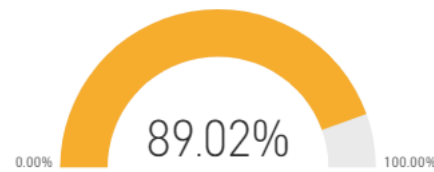
CM25: Proportion of Staff not Sick



CM26: Fitness



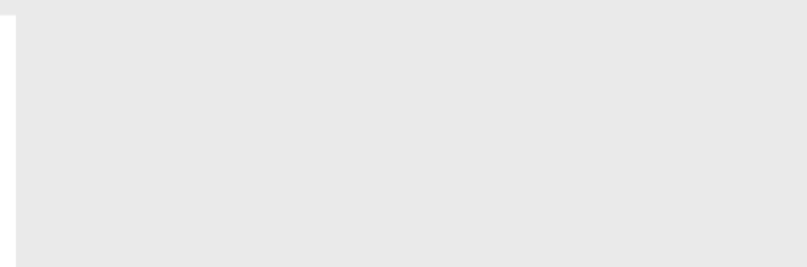
CM27: Staff in qualification



CM28: RIDDOR



CM29: Risk Assessments





# Areas of Significant Improvement and Success

Quarter 2

(1<sup>st</sup> July - 30<sup>th</sup> September 2022)

# 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.

Quarter 2 saw sustained good performance in many areas, with the following measures showing particular success:

- CM 1: Accidental Dwelling Fires
- CM 7: Safe and Well Visits delivered to households with at least one vulnerability
- CM 13: Building Regulation Consultations
- CM 15: Percentage of Site Specific Risk Information (SSRI) that are currently in date
- CM 25: % of Staff Not Sick Across all Staff Groups
- CM 28: % of RIDDOR accidents reported and investigated on time

# Core Measure 1: Accidental Dwelling Fires in West Sussex

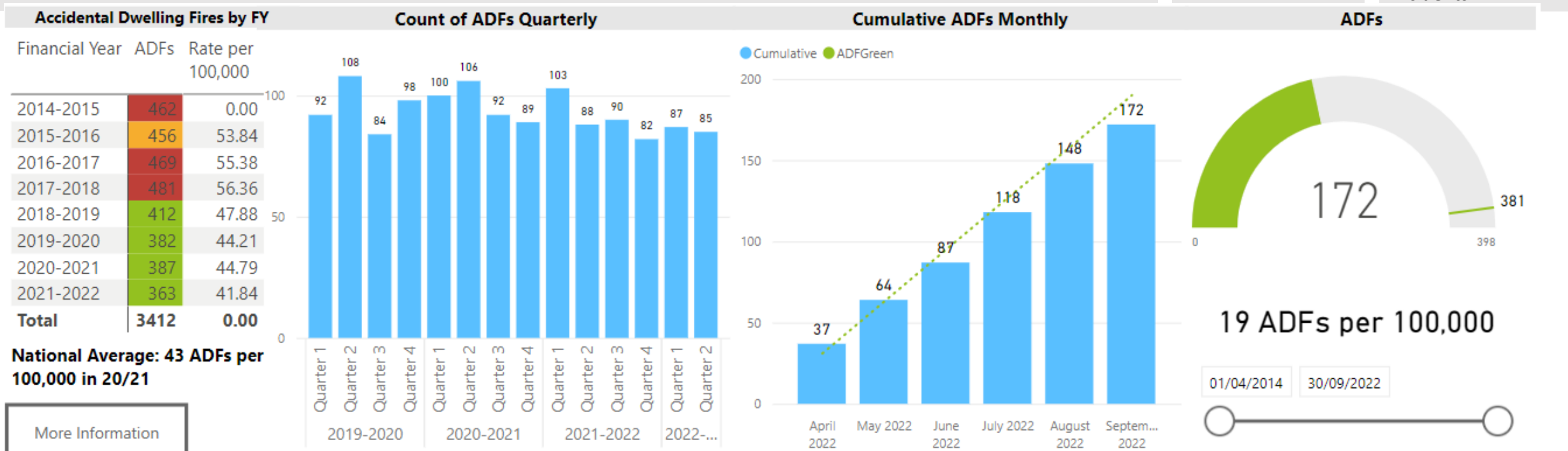
**172 fires at the end of Q2 2022-23**

**RAG Status GREEN**

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

**Annual Target:**  
 <381 Green  
 381-398 Amber  
 >398 Red

Service Owner:  
**Nicki Puddle**  
 Area:  
**Incidents**



**Commentary**

This measure reflects an ongoing downward trend with this quarter being the lowest number of Accidental Dwelling Fires (ADFs) for quarter 2 in 3 years. The main causes of these fires relate to cooking, electrical items and placing items too close to a heat source. These areas are key elements of our Safe and Well Visits. The year to date quarter 2 total represents a figure of 19 ADFs per 100,000 population which would give us a projection of ending the year below the national average, which was 43 per 100,000 in 20/21.

**Actions**

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

# Core Measure 7: Number of Safe and Well Visits delivered to households with at least one vulnerability or risk factor

**2451 at the end of Q2 2022-23**

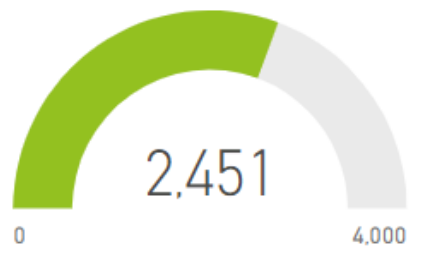
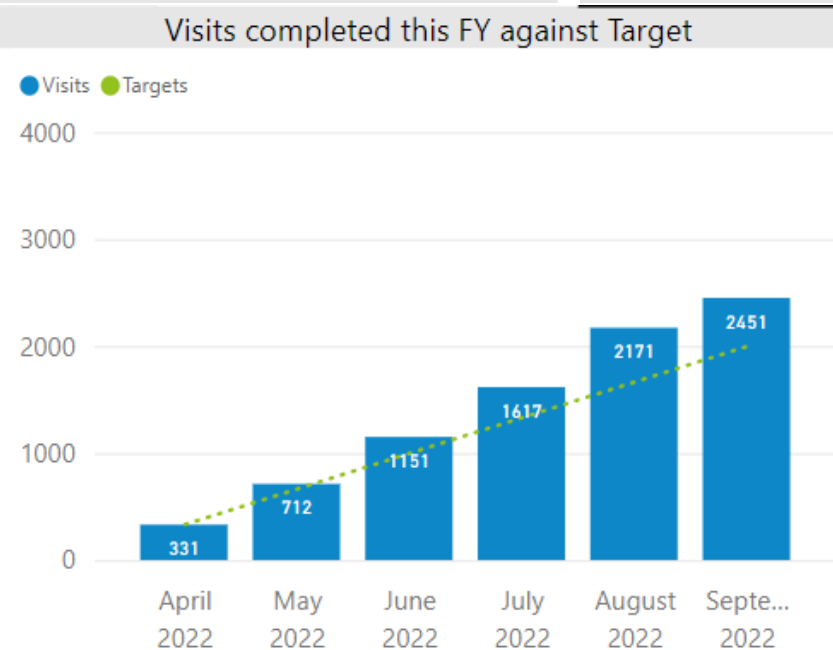
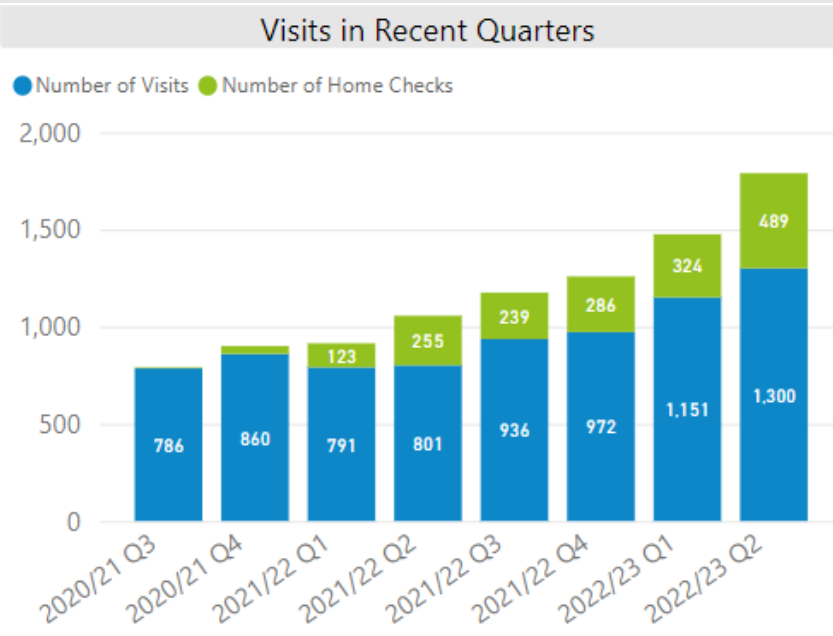
**RAG Status GREEN**

The number of Safe and Well Visits (SWVs) delivered to those who are at risk of dying or being injured in the event of a dwelling fire, over a year period starting from April.

**Target:**  
4000+ Green  
3500 – 3999 Amber  
<3500 Red

Service Owner:  
**Nicki Peddle**  
Area:  
**Prevention**

Visits by FY		
Financial Year	Visits	Rate per1000
2018/19	4175	4.83
2019/20	4669	5.4
2020/21	2998	3.47
2021/22	3355	3.88



**National Average: 4.6 HFSCs per 1000 in 20/21**  
*\*Visits prior to 21/22 were assessed against a different criteria for high or very high risk*

**More Information**

**Commentary**  
In Q2 we carried out 1,300 Safe and Well Visits and 489 home checks. We have seen a month on month increase in visits in the last 12 months which we attribute to the remedial actions taken, the ongoing development of referral pathways and more customers being receptive to having someone visit their home, although our previous referral pathways have yet to return to their pre-Covid levels. Staff based at fire stations are continuing to undertake reactive post-incident as well as proactive referral generation activity.

**Actions**  
Treat: We continue to promote Safe and Well Visits through our health and social care partners and train their staff to recognise and respond to fire risk. In addition, customer details are being shared to increase referrals of Safe and Well Visits. Crews use local data to drive and target prevention activity to areas where our most vulnerable residents live and we make the most of every opportunity to deliver focused community safety activities following incidents at residential properties. This is leading to more prevention activity being delivered to those at risk, particularly those who are in the vicinity of an incident.

# Core Measure 13: Building Regulations Consultations responded to within 15 days

**100% in Q2 2022-23**

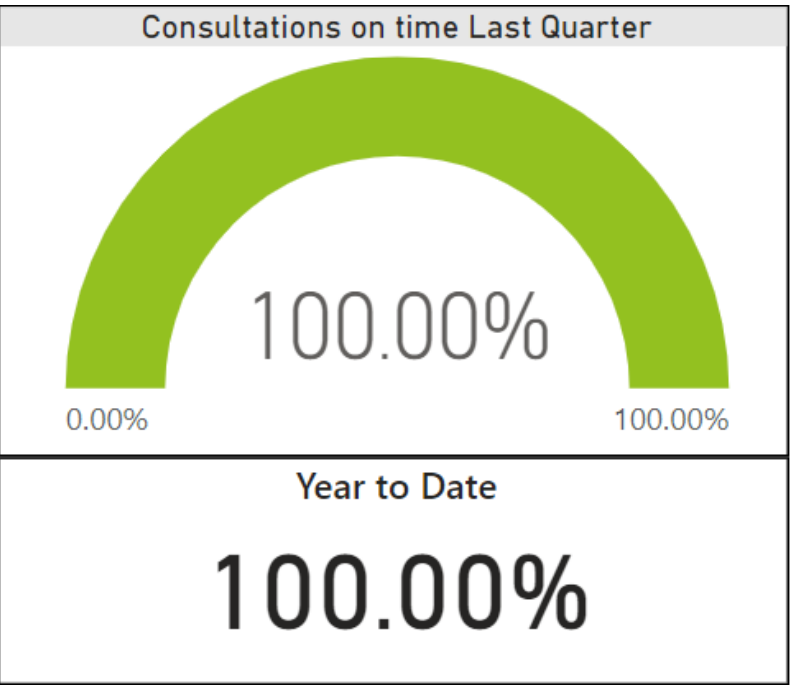
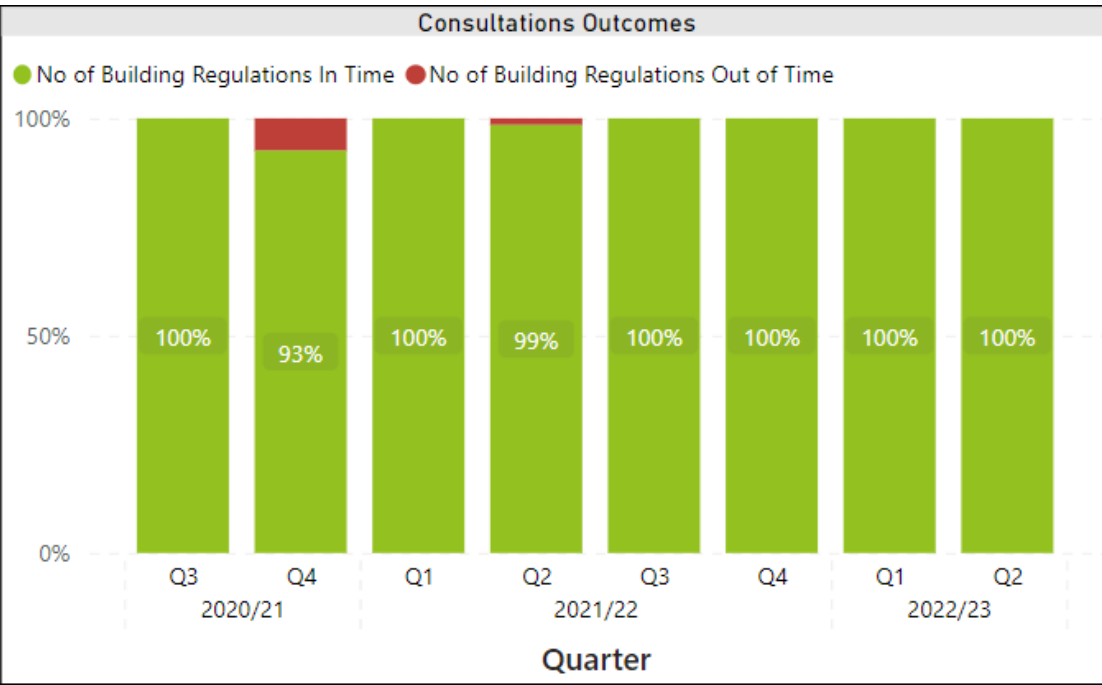
**RAG Status GREEN**

The percentage of Statutory Fire Safety Consultations completed within the prescribed 15 day time period.

**Target:**  
>100% Green,  
<100% Red

Service Owner:  
**Dave Bray**  
Area: **Protection**

Financial Year	Building Regulations In Time	Building Regulations Out of Time
2020/21	164	10
2021/22	598	2
<b>Total</b>	<b>762</b>	<b>12</b>



[Additional Information](#)

Last Refresh Date  
04/11/2022

**Commentary**  
The Protection team have continued to meet the statutory duty to respond to all building regulation consultations submitted to WSFRS within the 15 day deadline. This is extremely positive and considered internally as an absolute priority for the function.

**Actions**  
Tolerate: We will continue to develop the team that will specialise in Building Regulations and Complex Premises, following the rollout of the departmental restructure. This will ensure that we continue to meet the obligation for building regulations.

# Core Measure 15: % of High and Medium risk Site Specific Risk Information (SSRI) that are currently in date

**98.9% in Q2 2022-23**

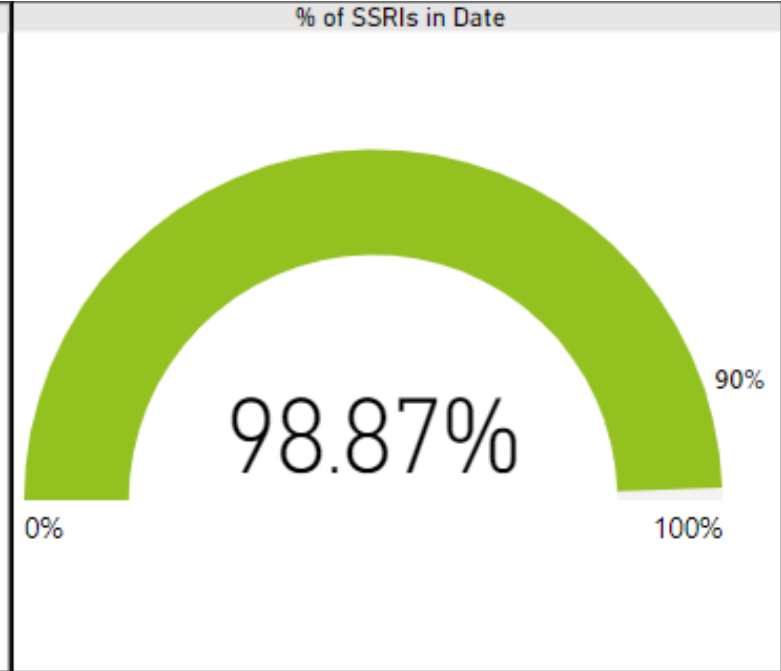
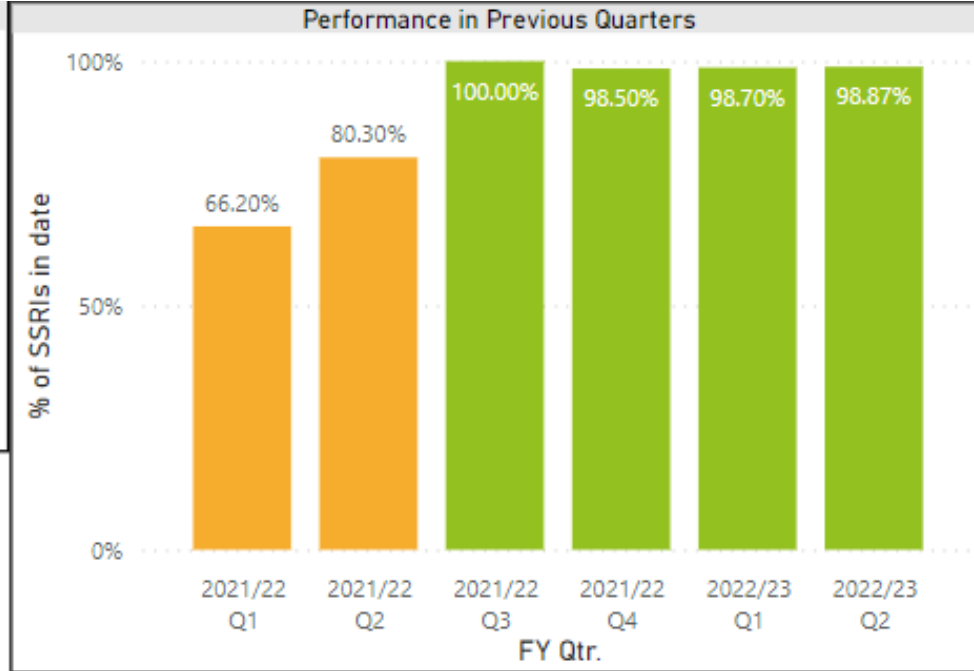
**RAG Status GREEN**

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.

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

Service Owner:  
**Dave Bray**  
 Area:  
**Protection**

Performance in Previous Quarters	
FY Qtr.	Number of SSRIs out of date
2021/22 Q1	177
2021/22 Q2	101
2021/22 Q3	0
2021/22 Q4	12
2022/23 Q1	12
2022/23 Q2	10



Last Refresh Date  
**04/11/2022**

**i Additional Information**

**Commentary**  
 This performance demonstrates a good level of engagement in ensuring that our high and medium risk premises have in date SSRIs.

**Actions**  
 Treat: Outstanding SSRIs are discussed in a monthly meeting with the Head of Response to ensure there are no barriers to crews completing the allocated visits that are due.  
 We are also working with our IT suppliers to overcome some technical issues that have affected our reporting and will improve the access and availability of reports to help crews conduct the necessary visits and record the outcomes.

# Core Measure 25: % of Staff Not Sick Across all Staff Groups

**97.6% in Q2  
2022-23**

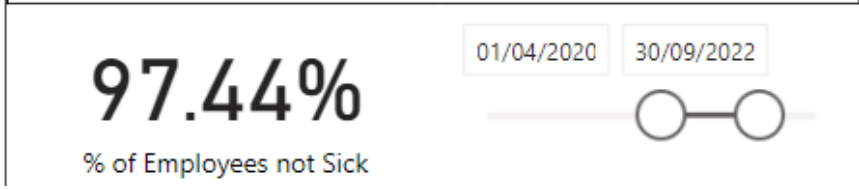
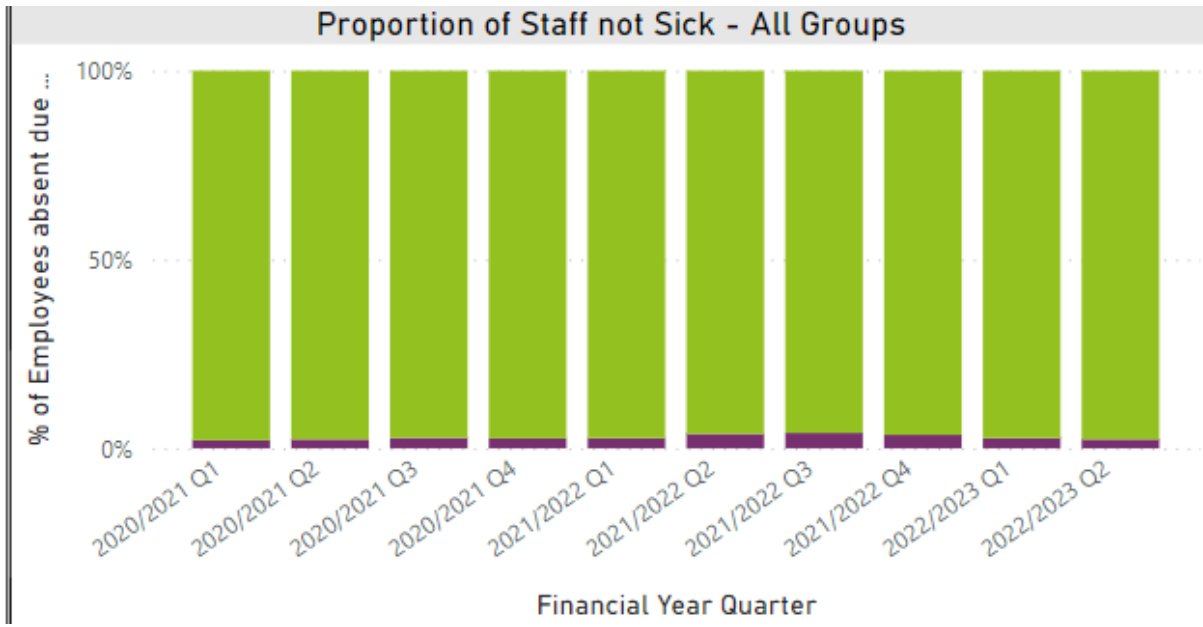
**RAG Status  
GREEN**

This measure examines the average percentage of staff who were not sick during each quarter, including support staff. Staff that are 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.

**Target:**  
>95% Green  
90% - 95% Amber  
<90% Red

Service Owner:  
**Catherine Walker**  
Area:  
**Development & Operational Training**

Financial Year	% of Employees not Sick
2020/2021	97.51 %
2021/2022	96.44 %
2021/2022	97.29 %
2021/2022	96.16 %
2021/2022	95.91 %
2021/2022	96.41 %
<b>Total</b>	<b>96.98 %</b>



**Commentary**  
The target of 95% attendance has been achieved consistently over this and previous quarters, with the proportion of staff not sick at 96% or above each month. This very positive set of figures provides a good indication of the levels of communication and pastoral support afforded to colleagues when they are unwell and a culture whereby staff engage with the absence management processes to return to work in a safe and timely manner.

**Actions**  
Tolerate: All sickness cases are reviewed monthly by managers and HR to ensure these are being progressed in a timely manner and staff are able to return to work safely and with the appropriate support/adjustments. Additional analysis of sickness data takes place weekly to ensure the service can manage any Covid related sickness or isolations through our business continuity arrangements.

# Core Measure 28: % of RIDDOR accidents that are reported and investigated on time

100% in Q2  
2022-23

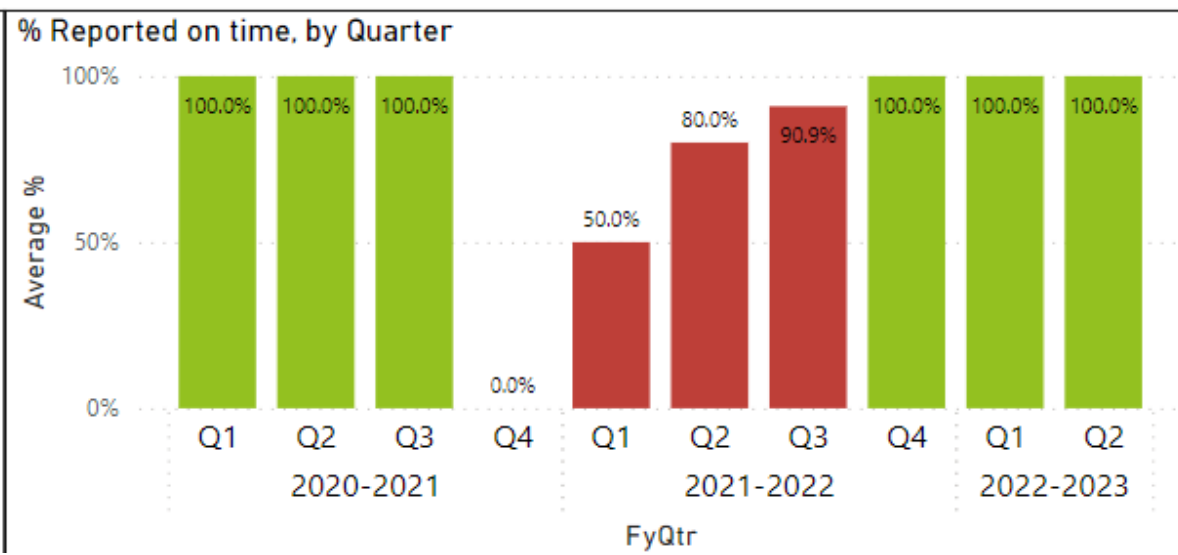
RAG Status  
GREEN

All RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) reportable Health and Safety Incidents must be reported within 10 days of the event occurring. Any contracted COVID-19 cases within the workplace are also reported under RIDDOR as per Health and Safety Executive (HSE) requirements.

**Target:**  
>100% Green  
<100% Red

Service Owner:  
**Richard Abbot**  
Area:  
**Strategic Risk & Improvement**

FY QTR	On Time	Out of Time	Total Incidents
2020-2021 Q1	1	0	1
2020-2021 Q2	1	0	1
2020-2021 Q3	15	0	15
2020-2021 Q4	0	1	1
2021-2022 Q1	1	1	2
2021-2022 Q2	4	1	5
2021-2022 Q3	10	1	11
2021-2022 Q4	4	0	4
2022-2023 Q1	1	0	1
2022-2023 Q2	1	0	1
<b>Total</b>	<b>38</b>	<b>4</b>	<b>42</b>



**Commentary**  
In Quarter 2 there was 1 reportable injury which was reported within the legislative timescale. This report was an over 7 day incapacitation following an injury.

**Actions**  
Treat: Following the service wide communications to reinforce management expectations and to raise staff awareness of the importance of reporting incidents, strict monitoring of Health and Safety incidents will continue to ensure timely reporting and compliance within HSE Regulations.  
  
An action plan has been completed to ensure electronic reporting processes, staff training and management responsibilities are refreshed and reinforced to reduce any risk of human error when reporting accidents and near hit events.



# Selected Measures (Red and Amber Status)

Quarter 2

(1<sup>st</sup> July - 30<sup>th</sup> September 2022)

# 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 Fatalities
- CM 14: Number of Unwanted Fire Signals attended
- CM 16: Time taken to answer the 999 call by Joint Fire Control Room
- CM 19: Critical Fires - 1st Appliance Attendance
- CM 23: Retained Duty System crewing availability

# Core Measure 2: Accidental Dwelling Fire deaths in West Sussex

**3 deaths at the end of Q2 2022-23**

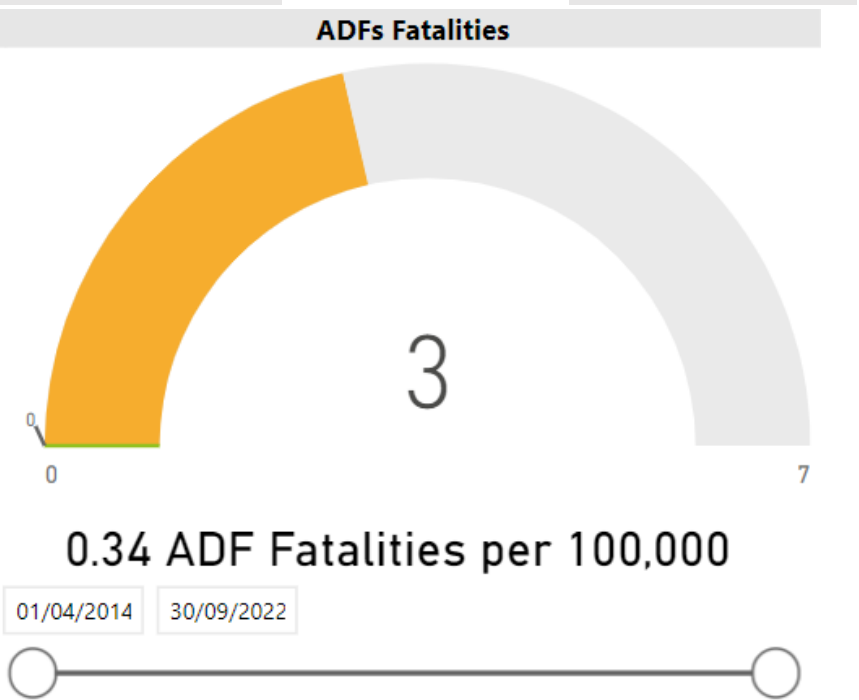
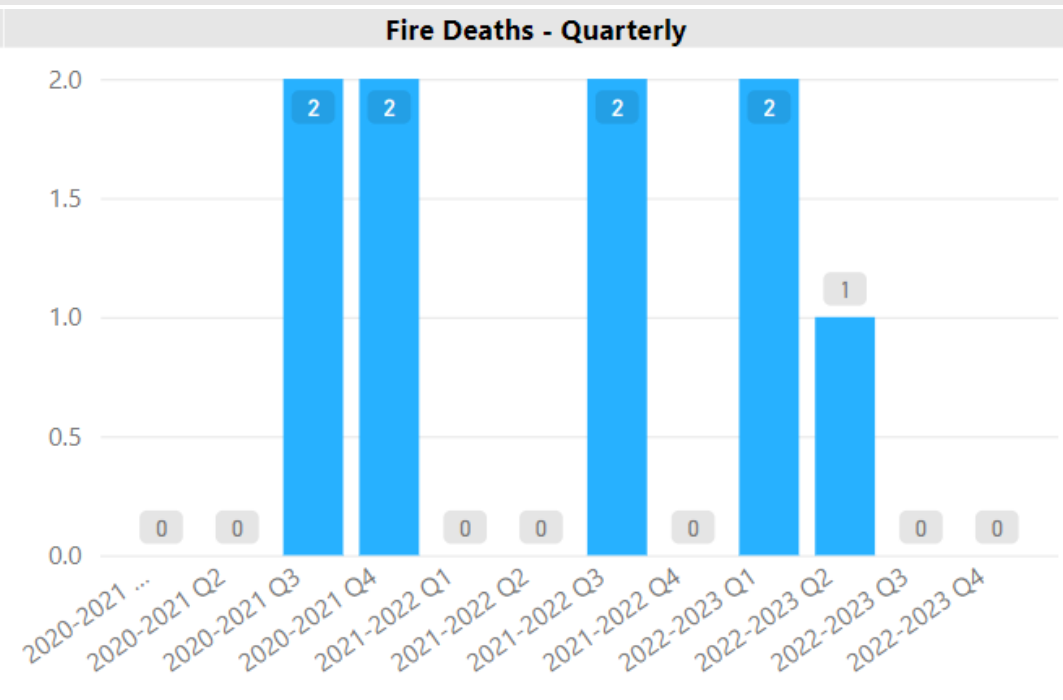
**RAG Status AMBER**

The total number of deaths that occur as a result of a Accidental Dwelling Fires, over a year period starting from April. This includes a person whose death is attributed to a fire, even when the death occurs weeks or months later.

**Annual Target:**  
0 Green  
1 - 3 Amber  
>3 Red

Service Owner:  
**Nicki Peddle**  
Area:  
**Incidents**

Financial Year	Fatalities	Rate per 100,000
2014-2015	0	0.00
2015-2016	1	0.12
2016-2017	3	0.35
2017-2018	0	
2018-2019	1	0.12
2019-2020	0	
2020-2021	4	0.46
2021-2022	2	0.23
<b>Total</b>	<b>11</b>	<b>0.00</b>



[More Information](#)

**Commentary**  
Sadly, there was 1 fatal fire in quarter 2, occurring in Bognor. There has been significant community safety activity following this incident to both reassure the local community and provide Safe and Well Visits to those who are vulnerable along with the critical review of the incident by the Deputy Chief Fire Officer. The 3 deaths this year to date represents a figure of 0.34 ADF fatalities per 100,000 population, compared to the national annual average of 0.28 ADF fatalities per 100,000 in 20/21.

**Actions**  
Treat: We will continue to apply the learning identified from serious and fatal fire incidents to offer specific and targeted fire safety advice to prevent such incidents reoccurring. We continue to build relationships with partner organisations who can refer people to us when they identify a fire risk.

# Core Measure 14: Number of Unwanted Fire Signals, over a year period starting from April

**848 at the end of Q2 2022-23**

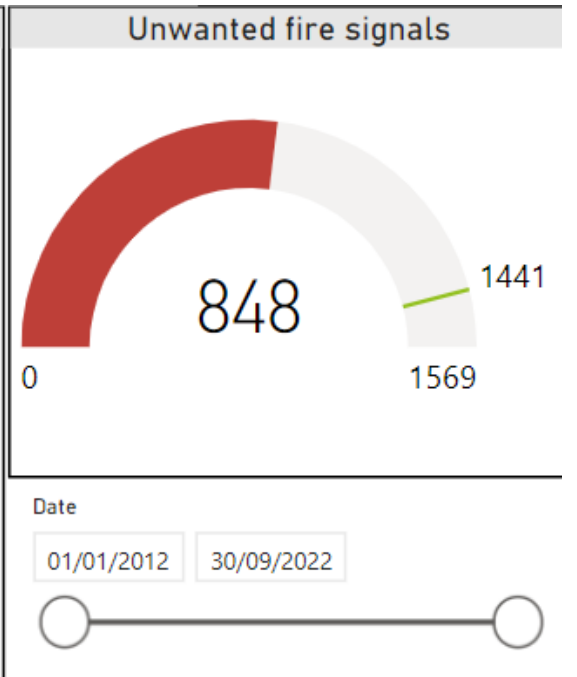
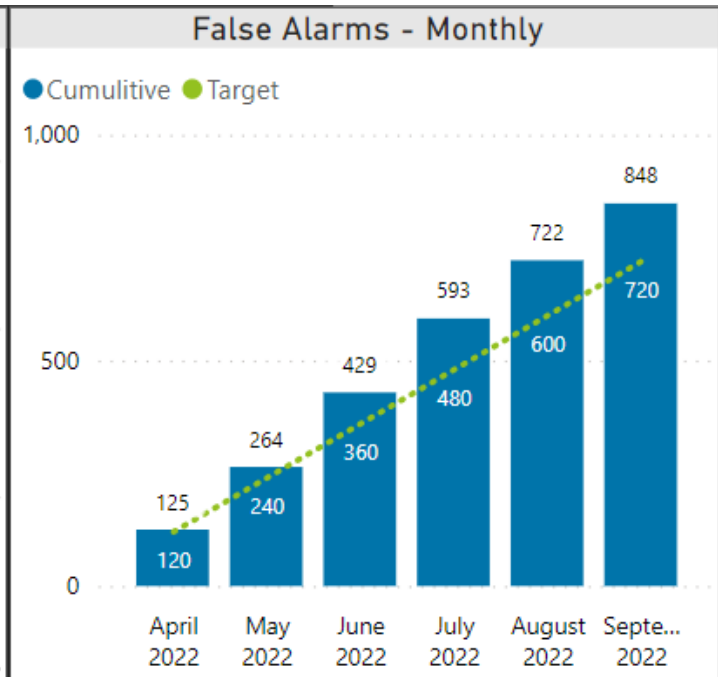
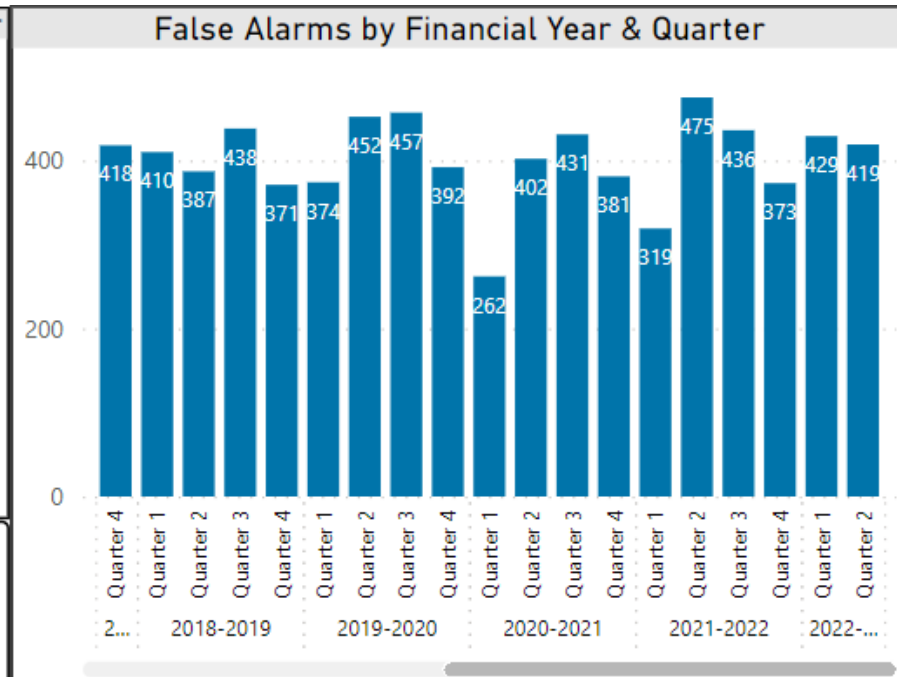
**Current RAG Status RED**

This measure records the number of incidents to which at 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.

**Reduction Target:**  
 10% (<1441) Green  
 2% (1569) Amber  
 <2% (>1569) red

Service Owner:  
**Dave Bray**  
 Area:  
**Protection**

Financial Year	No. of Incidents
2014-2015	1723
2015-2016	1693
2016-2017	1607
2017-2018	1645
2018-2019	1606
2019-2020	1675
2020-2021	1476
2021-2022	1603



**Additional Information**

**Commentary**  
 Quarter 2 saw a slight drop in the number of Unwanted Fire Signals, recording 412 versus the 429 in quarter 1. These numbers suggest we would not meet our end of year target. However, we still expect this target to be met as a call-challenge/ non-attendance policy will come into force in quarter 3.

**Actions**  
 Treat: Implement the approved call challenge/non-attendance policy, in line with the CRMP, in December 2022.

# Core Measure 16: Time taken to answer the 999 call by Joint Fire Control Room

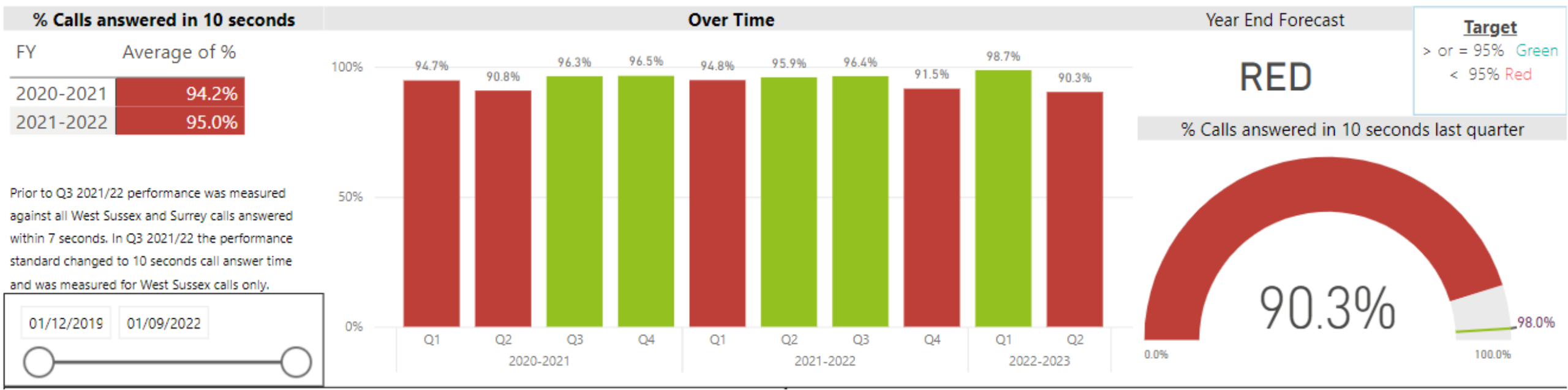
**90.3% in Q2 2022-23**

**RAG Status RED**

This measure looks at the time taken from when the Fire Control Room Operator answers the phone when a 999 call is received by Fire Control. The target is 95% of calls answered within 10 seconds.

**Annual Target:**  
 >95% Green  
 <95% Red

Service Owner:  
**Dave Bray**  
 Area:  
**Protection**



**Commentary**  
 Quarter 2 saw a drop in performance for both July and August to 89.9% and 86.6% respectively, followed by a return to 98.1% for September. This is due to the significant increase in call numbers being received by the Joint Fire Control Room during those months when Surrey, West Sussex and East Sussex were experiencing higher volumes of calls linked to fires in the open. Due to the number of calls being placed into JFC and the weight of response radio traffic resulting from the number of appliances deployed, JFC were unable to meet their call answering target.

**Actions**  
 Tolerate: We will continue to monitor this closely through the JFC Tactical board, as we expect to see call volumes return to normal as we pass from summer into autumn. We have contributed as a Service to the JFC staffing review where we have raised concerns over staffing levels that result in operators being busier, which has an inevitable impact upon performance for answering emergency calls. We will be seeking that JFC set out a clear roadmap as to how they are going to address the findings of this review.

# Core Measure 19: Critical Fires - 1st Appliance Attendance

**85.9% in Q3  
2022-23**

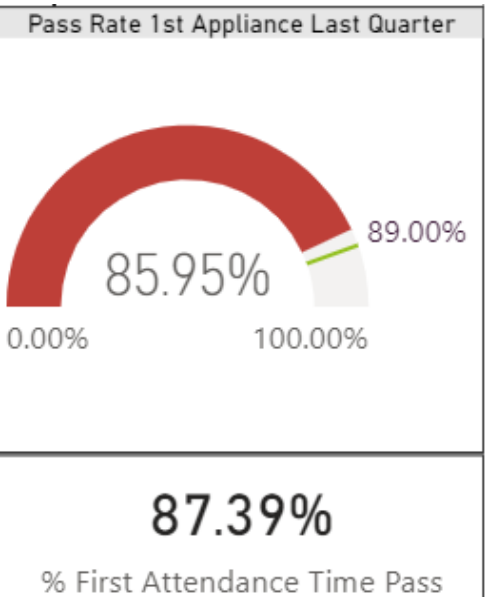
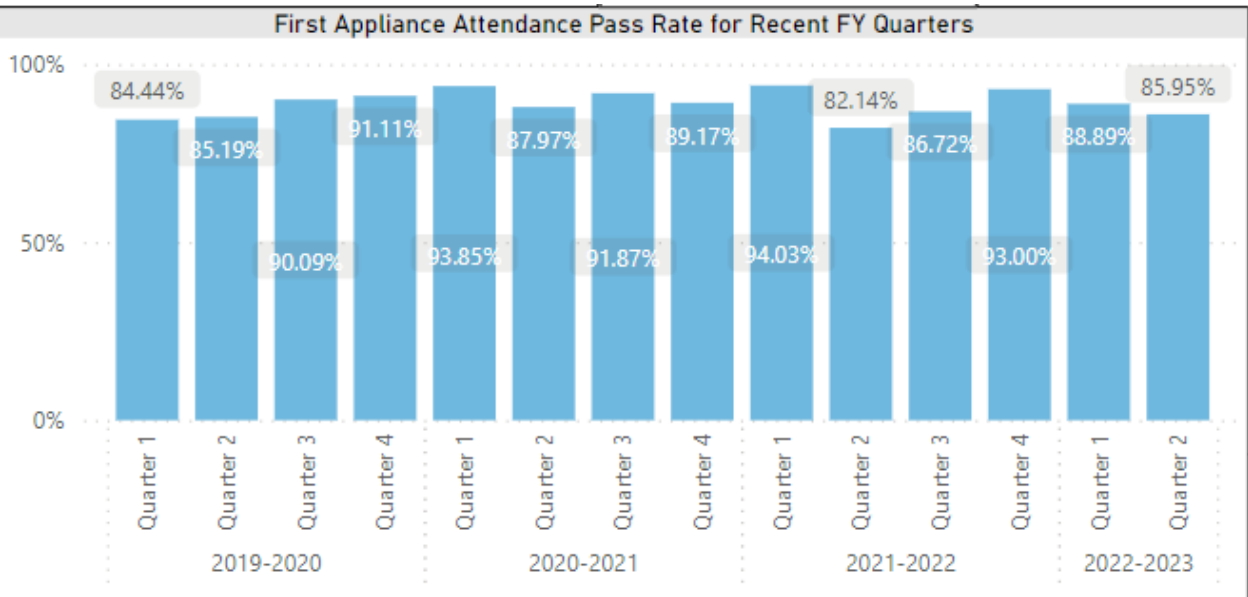
**RAG Status  
RED**

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 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

Service Owner:  
**Gary Ball**  
Area:  
**Response**

Financial Year	Very High	High	Medium	Low	Total
2015-2016	100.00%	86.27%	86.39%	90.11%	<b>88.10%</b>
2016-2017	75.00%	87.88%	84.84%	90.08%	<b>87.08%</b>
2017-2018	0.00%	100.00%	89.19%	89.49%	<b>90.09%</b>
2018-2019	0.00%	93.10%	89.96%	86.82%	<b>88.67%</b>
2019-2020	0.00%	100.00%	87.69%	86.32%	<b>87.60%</b>
2020-2021	0.00%	92.31%	88.46%	92.66%	<b>90.71%</b>
2021-2022	0.00%	100.00%	88.70%	89.08%	<b>89.03%</b>
<b>Total</b>	<b>78.57%</b>	<b>92.27%</b>	<b>87.80%</b>	<b>89.29%</b>	<b>88.72%</b>



**i** Table of Incidents **i** Map & Station Group

**Commentary**  
Quarter 2 saw an extended dry spell which placed significant demands on all fire and rescue services across the country, with many services declaring major incidents due to the impact on resources. The impact of this higher demand in West Sussex was a reduction in performance on this measure of approximately 3% when compared to quarter 1.

**Actions**  
Tolerate: We are confident that the changes we have seen around the introduction of performance data on turn out times being available to Immediate Response stations and the move back to a more normal level of demand will mean we will achieve the target for this measure across the year. The proposals we have for increasing the cover in Mid-Sussex and Shoreham will ensure we have more resilience when facing future occasions of high demand.

# Core Measure 23: Adequate crewing on all Retained Frontline Pumping Appliances (based on 24/7 crewing)

44.1% in Q2  
2022-23

RAG Status  
**RED**

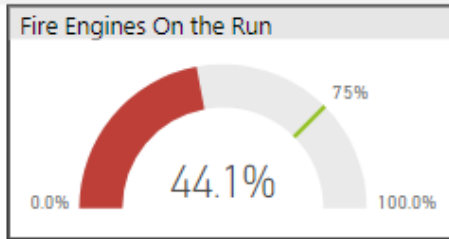
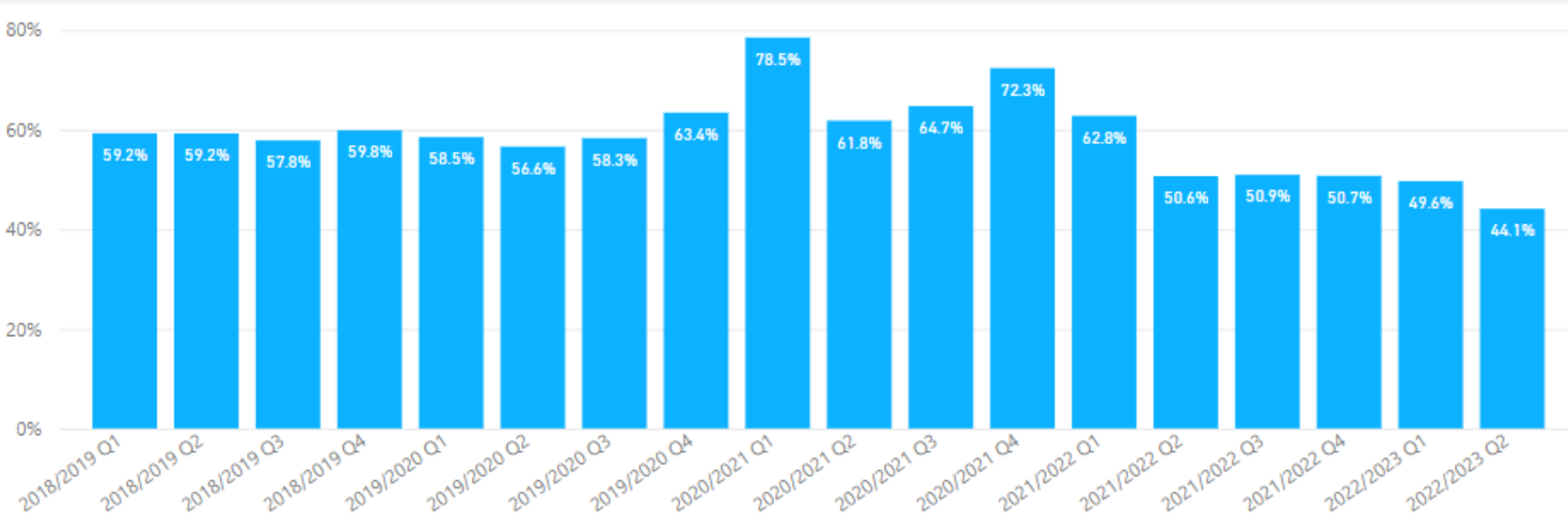
Retained frontline fire engines are crewed mainly by on-call fire fighters who are based at stations in more rural locations and, when they receive the call via their pagers, leave their place of work or home and attend emergencies from the local retained station. Four qualified people are required on 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.

**Target:**  
>75% Green  
65% - 75% Amber  
<65% Red

Service Owner:  
**Gary Ball**  
Area:  
**Response**

Retained Fire Engines On The Run by Quarter (including current quarter to date)

Financial Year	Total
2018/2019	59.0%
2019/2020	59.2%
2020/2021	69.3%
2021/2022	53.7%



Financial Year to Date  
**46.9%**

Date Range

01/04/2018 30/09/2022

[Click Here for Detailed Station View](#)

**Commentary**  
Retained Duty System (RDS) availability remains our biggest performance challenge. We have been undertaking significant work over the last few years to ensure that our RDS sections and stations, where fire engines are crewed by people who respond to the station from their home or work in the event of an emergency call, are supported by maximising the use of our Wholetime (WT) firefighters who are on duty at fire stations. This work is not reflected in the performance figures as when any WT crew cover RDS stations this is not currently included in the availability calculation.

**Actions**  
Treat: The Retained Duty System in it's current format has been used to provide a fire and rescue service in low activity areas for over 70 years. Social economic changes impacting on the viability of this duty system is a national issue. Work continues at a local level to ensure that we maximise availability wherever possible including a member level task and finish group as part of our FRS scrutiny committee. A more strategic approach is also being taken in our four-year Community Risk Management Plan which includes developing and implementing an operational response model to maximise retained availability in strategic geographical areas aligned to community risk. We are also working to address the underreporting of this measure.