

## **WEST MIDLANDS FIRE AND RESCUE AUTHORITY**

**12 DECEMBER 2022**

### **1. AN ANALYSIS OF PROGRESS OF QUARTERLY PERFORMANCE AGAINST 'OUR PLAN' – QUARTER TWO 2022/23**

Report of the Chief Fire Officer.

#### **RECOMMENDED**

- 1.1 THAT the Authority notes the status of the Service's key performance indicators in the second quarter of 2022/23 (Appendix 1).
- 1.2 THAT the Committee note the progress made in delivering the three strategic priorities contained in 'Our Plan' 2022-2025 (Appendix 1).

### **2. PURPOSE OF REPORT**

- 2.1 This report is submitted to provide Members with an analysis of the organisation's performance against 'Our Plan' for 2022-2025.

### **3. BACKGROUND**

- 3.1 The setting of targets against the operational and other performance indicators enables the Service to define in key areas the improvements which contribute to making the West Midlands safer, stronger and healthier, and to manage the resources allocated to this work. The Service continues to improve and meet targets across a range of indicators.
- 3.2 The performance information contained within this report was submitted to and considered by the Strategic Enabling Team in November 2022. It is submitted to Members to support the joined-up method of managing performance and providing assurance around the on-going performance of 'Our Plan'.
- 3.3 It should be noted that the Service continues to adapt its approaches to the delivery of prevention and protection services due to the lasting effects of the COVID 19 pandemic as the Service moves from a position of

business recovery to new established ways of working.

#### 4. **PERFORMANCE INDICATORS**

##### 4.1 Appendix 1 details the performance against our:

- Performance against our programmes of Community Risk Reduction, Enabling Services, and People, covering:
  - Response, Prevention and Protection
  - People
  - Health, Safety and Wellbeing
  - Finance and Resources
- Strategic Objectives as outlined in 'Our Plan'.

Note: due to ongoing issues with data as well as outstanding workbooks, figures reported may be subject to change, although no significant changes are anticipated

##### 4.2 Community Risk Reduction

###### 4.2.1 Response:

- PI 1 – the risk-based attendance standard; performance continues to be positive, with the targets having been met for all four categories of incident type. The performance is rated as over performance against the tolerance levels (blue).
- Average attendance times for Category 1 incidents (the most critical and important of the four categories) were 4 minutes 45 seconds in quarter two.
- Average attendance times for Category 2, 3 and 4 Incident Types remain well within their respective targets:
  - Category 2 Incident Type: 5 minutes 26 seconds (target of 7 minutes)
  - Category 3 Incident Type: 4 minutes 54 seconds (target of 10 minutes)
  - Category 4 Incident Type: 7 minutes 01 seconds (target of 20 minutes)

#### 4.2.2 Prevention:

- The performance indicators for the following areas demonstrate performance is within the tolerance levels (green):
  - PI 2 The number of accidental dwelling fires.
  - PI 3 Injuries from accidental fires in dwellings, taken to hospital for treatment.
  - PI 6 The number of Safe and Well points achieved by the Brigade.
  - PI 8 The number of deliberate fires in dwellings.
  - PI 9 The number of deliberate fires in non-domestic premises.
  - PI 10 The number of deliberate vehicle fires.
- The performance indicators for the following areas demonstrate under performance against the tolerance levels (red):
  - PI 5 The percentage of Safe and Well visits referred by our partners.
  - PI 11 The number of deliberate rubbish fires.
  - PI 12 The number of deliberate fires in derelict buildings.
- The following two performance indicators do not have a performance rating assigned:
  - PI 4 The number of deaths from accidental fires in dwellings.
  - PI 7 The number of people killed or seriously injured in Road Traffic Collisions.

#### 4.2.3 Protection:

- The performance indicator for the following area demonstrates performance is within the tolerance levels (green):
  - PI 13 The number of accidental fires in non-domestic premises.
- The performance indicator for the following area demonstrates under performance against the tolerance levels (red):

- PI 14 – The number of false alarm calls due to fire alarm equipment in dwellings and non-domestic premises.

### 4.3 People

4.3.1 The performance indicators for the following areas demonstrate performance is within the tolerance levels (green):

- PI 16 – The number of female uniformed staff.
- PI 17 – The percentage of all staff from black and minority ethnic (BAME) communities.
- PI 17a – The percentage of uniformed staff from BAME communities.
- PI 18 – The average number of working days/shifts lost due to sickness – All staff
- PI 19 – The average number of working days/shifts lost due to sickness – Uniformed and Fire Control

4.3.2 The performance indicators for the following areas demonstrate under performance against the tolerance levels (red):

- PI 15 – The percentage of employees that have disclosed their disabled status.
- PI 20 – The average number of working days/shifts lost due to sickness – Non Uniformed.

### 4.4 People - Health, Safety and Wellbeing

4.4.1 No targets or tolerances are set for the performance indicators for the total number of injuries or the total number of RIDDOR injuries. This is because any injury report is unwanted and the Service encourages an open reporting culture that facilitates learning and improvement.

### 4.5 Enabling Services - Finance and Resources

4.5.1 The performance indicators for the following areas demonstrate over-performance against the tolerance levels (blue):

- PI 24 – To reduce the gas use of Fire Authority premises.
- PI 25 – To reduce the electricity use of Fire Authority premises.

## 5. **CORPORATE RISK**

- 5.1 Corporate Risks are those risks that, if realised, would seriously affect the Service's ability to carry out its core functions or deliver key objectives.
- 5.2 In accordance with the Corporate Risk Management Strategy, all risks maintained within the Corporate Risk Register have been reviewed by Senior Risk Owners in order to update the relevant triggers, impacts and control measures and determine a relevant risk score, if appropriate, based on assessment of likelihood and impact.
- 5.3 A report of progress against our Corporate Risks is submitted separately to the Audit and Risk Committee.

## 6. **EQUALITY IMPACT ASSESSMENT**

In preparing this report, an initial Equality Impact Assessment is not required and has not been carried out. The matters contained within this report will not lead to a policy change.

## 7. **LEGAL IMPLICATIONS**

The course of action recommended in this report does not raise issues which should be drawn to the attention of the Authority's Monitoring Officer.

## 8. **FINANCIAL IMPLICATIONS**

The level of response, protection and prevention resources required to achieve the targets for the operational indicators shown in Appendix 1 were considered as part of the Authority's 2022/2023 budget setting process which established a total revised net budget requirement of £108.303 million. As at the end of September 2022 actual expenditure was £53.425 million compared to a profiled budget of £52.783 million resulting in a £0.642 million overspend.

The delivery of services which contribute to the performance achievements comprise of goods such as smoke alarms and staff time. The staff time includes those who are solely engaged in prevention work and watch based staff that provide emergency response as well as prevention services.

The full year budget for smoke alarms and other supporting materials in 2022/2023 is £326,600. Actual expenditure as at the end of September 2022 was £149,200. Expenditure to the second quarter is in line with the profiled budget.

9. **ENVIRONMENTAL IMPLICATIONS**

There are no environmental implications arising from this report.

**BACKGROUND PAPERS**

- 'Our Plan 2022-25' Strategic Objectives.
- Corporate Action Plan updates.
- Corporate Risk Update Quarter 1 and 2 2022/23 (exception report).

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