West Midlands Fire and Rescue Authority

Scrutiny Committee

You are summoned to attend the meeting of Scrutiny Committee to be held on Monday, 06 June 2016 at 12:30

at Fire Service HQ, 99 Vauxhall Road, Nechells, Birmingham B7 4HW

for the purpose of transacting the following business:

Agenda – Public Session

1	To receive apologies for absence (if any)

Declarations of interests

3 Minutes	of the Scrutiny	Committee he	eld on 21st N	March 2016	3 - 12

4	Diversity Inclusion Cohesion Equality Update	13 - 20
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5 Analysis of Progress of Quarterly Performance Against The Plan Qtr **21 - 38** 4 2015-16

6 Annual Report of the Scrutiny Committee 2015-16 **39 - 46**

7 Scrutiny Committee Work Programme 2015-16 (June 16) 47 - 50

Distribution:

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Peter Hogarth - Member, Sybil Spence - Member, Chris Tranter - Chairman, Ann Young - Member, David Skinner - Member, David Barrie - Member, Bally Singh - Member

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This agenda and supporting documents are also available electronically on the West Midlands Fire Service website at www.wmfs.net

Agenda Item No. 3

Minutes of the Scrutiny Committee

21 March 2016 at 12.30pm at Fire Service Headquarters, Vauxhall Road, Birmingham

Present: Councillor Tranter (Chair);

Councillors Barrie, Hogarth, B Singh, and Skinner

Apology: Councillors Spence, Ward and Young

Observer: Councillor Shackleton

5/16 **Declarations of Interest**

There were no declarations of interest.

6/15 Consideration of the Annual Report of the Scrutiny Committee

It was agreed that Councillor Tranter and Stephen Timmington, WMFS Strategic Hub would meet to discuss the Annual Report of the Scrutiny Committee.

7/16 **Minutes**

Resolved that the minutes of the meeting held on 15 February 2016, be approved as a correct record.

Following the request at the previous Scrutiny Committee meeting on 15 February, a briefing paper on the age profile of WMFS employees had been circulated as part of the agenda pack and was noted by members (Appendix 1 to these minutes).

8/16 **Dispute Resolution Report**

The Committee noted the Dispute Resolution report for the period 1 June 2015 to 31 December 2015.

Wendy Browning Sampson, People Support Manager, provided an overview of the report. There had been eight grievances lodged during the period, six from grey book employees and two from green book employees. The majority of reasons had been due to disagreements with managers. Two were due to concerns identified surrounding transfers.

It was noted that the number of grievances was very low considering the size of the organisation and the number of employees. Additionally, the fact that grievances are being lodged could be seen as positive, reflecting that members of staff felt able to take that route if applicable.

A member enquired about the legal position surrounding transfers. It was confirmed that all contracts for employees included the caveat that they could be posted to any location within the Service area. The Service would always strive to ensure people are posted at locations as close to where they wished to be / close to their homes.

Resolved: -

That the report is to be submitted to the Joint Consultative Panel.

9/16 Scrutiny Committee Work Programme 2015/16

The Committee noted the progress of the work programme for 2015/16.

There was nothing to report on the Data Sharing Review. It was agreed that the provisional meeting on 28 April 2016 would not be utilised.

(Meeting ended at 13:15 pm)

Contact Officer: Stephen Timmington Strategic Hub West Midlands Fire Service 0121 380 6680

Briefing Paper – Scrutiny Committee 21st March 2016 Age profile of WMFS employees

It is recognised that the age structure of the UK workforce is rapidly changing and it is estimated that by 2020 nearly a third of the UK workforce will be over 50.

The age profile for WMFS, detailed at Appendix 1, demonstrates our ageing workforce.

Mitigating the Risks posed by an Ageing Workforce

Our workforce planning activity ensures that we are able to understand our age profile which is crucial for us to be able to ensure measures are in place to mitigate any potential risks associated with an ageing workforce. Interestingly, our workforce data indicates that there is no link between age and sickness. However, there does appear to be a link between gender and sickness and when this is looked at more closely, gender is a predictor of higher levels of sickness in one age category only, 35 – 44 years. In this age band, women are more likely to be sick with reproductive issues, joint problems and hospital in patient treatment.

Our approach to mitigating risk associated with an ageing workforce is a holistic one and includes:

1. Investment in training, Learning & Development and performance management All employees, regardless of age, need training and development to keep their skills up to date. Providing older employees with opportunities to retrain and develop is a vital part in ensuring that they continue to feel motivated, engaged and valued in their role.

2. Capability of Line Managers

Someone's decision to leave the Service can be the result of managers failing to appropriately support and understand the needs of their team. Our Business Partners support managers to not only understand the demographic profile of their team, but to ensure they are able to meet the needs of a diverse workforce. As a manager it is essential that they demonstrate positive leadership traits such as being flexible, approachable, trustworthy and encouraging of employee engagement which will support genuine wellbeing.

3. Support Employee Health and Wellbeing

Whilst good and effective line management is clearly important in ensuring that any health problems are flagged early on, our strategy and approach to wellbeing is crucial.

We have recently developed our Wellbeing Strategy which seeks to ensure that our employees are resilient, motivated, committed and flexible and prepared for change. Our strategy identifies that managing health, work and wellbeing is the responsibility of both the employer and employee.

We recognise that there are different elements of Wellbeing, and that it will mean different things to different people. Our strategy identifies 8 elements of Wellbeing including:

- MIND developing the mind and body
- BODY fit and healthy lifestyle
- SPIRIT Personal beliefs
- SOCIAL friends, family and community
- OCCUPATIONAL fitness for work and life balance
- RESILIENCE coping strategies
- ENVIRONMENTAL nature and surroundings
- FINANCIAL financial planning

We are currently working in partnership with MIND, the leading mental health charity in the UK and we have recently signed the MIND Blue Light Pledge. The Blue Light programme is a national initiative aimed at emergency service employees who are known to be more susceptible to stress and other mental health conditions than the general population. The programme has assisted WMFS in expanding and enhancing the good work we have already achieved in de-stigmatising mental health and providing fast-track assistance and support.

Our approach to Firefighter Fitness has been developed in line with CFOA research and guidance, and we are implementing annual fitness assessments for all operational personnel. This enables early intervention for any fitness related issues, provides bespoke 'work up' programmes for individuals as well as actively monitoring fitness levels. This will support our operational firefighters in maintaining good health and fitness as they get older.

We are currently looking at awareness around the menopause and its potential impact on our female workforce. During March, a range of activities are being undertaken to mark International Women's Day. Activities will include awareness sessions around the menopause as well as providing information / signposting for support.

4. Flexible working

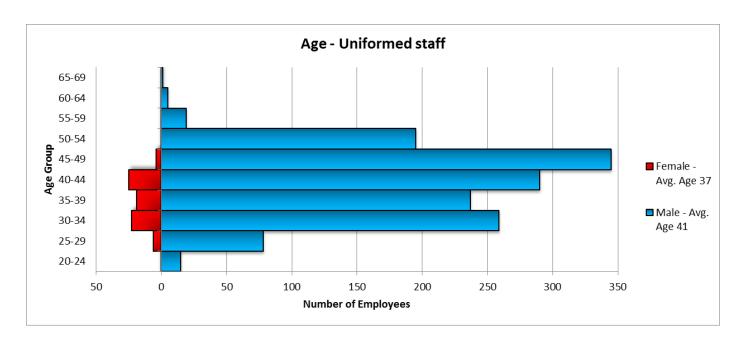
Providing flexible working arrangements for our employees forms a key component of our strategy to improve staff retention as our employees get older. We recognise that older employees may suffer ill health, have caring responsibilities and other commitments on their time. We understand the importance in helping our employees manage their work and home life.

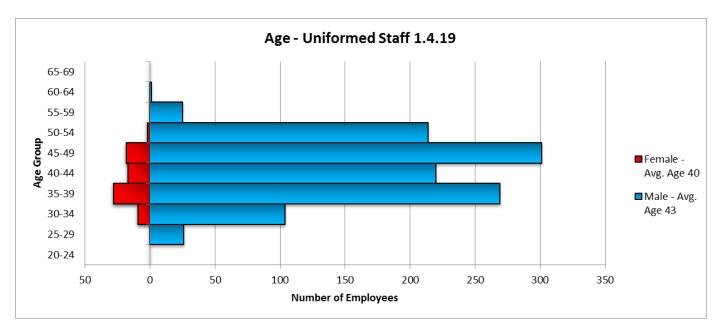
With an ageing workforce we will continue provide flexible working practices that match the employee demand and at the same time meet the requirements of the organisation.

We fully understand the importance and benefits of a healthy, safe, motivated and well workforce. We will continue to review our approach to ensure we are proactive in providing the right levels of support and guidance for all colleagues within West Midlands Fire Service.

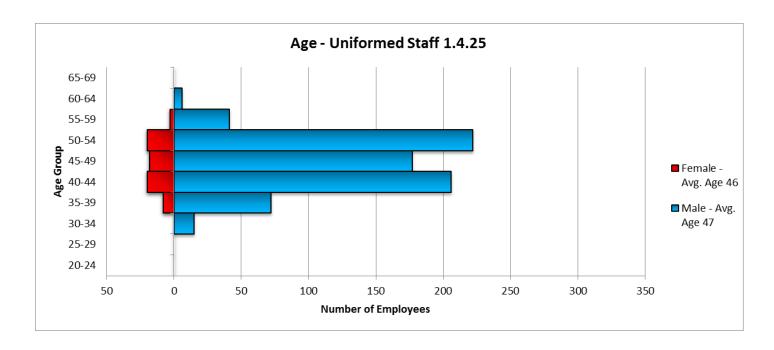
Uniformed staff

- The average age of Uniformed staff is 41, ranging from ages 21 to 66. 9% of the workforce are over 50.
- The workforce is an ageing one. In 2008 the average age was 38, with 6% over the age of 50.
- Average age will increase to 43 by April 2019 and 47 by April 2025 (assuming no recruitment).

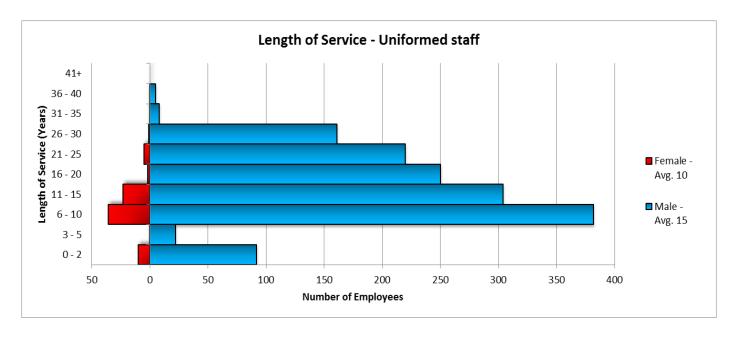




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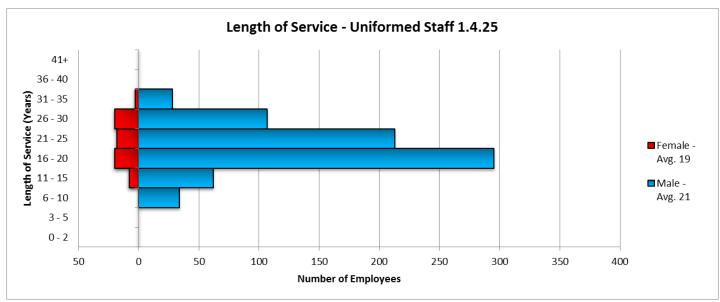


These charts show the shrinking workforce and the increasing length of service. The average length of service is currently 15 years and ranges from 1 to 40 years. By April 2019 this will increase to 17 years (range 4 to 36), and by April 2025 to 20 years (range 10 to 35).



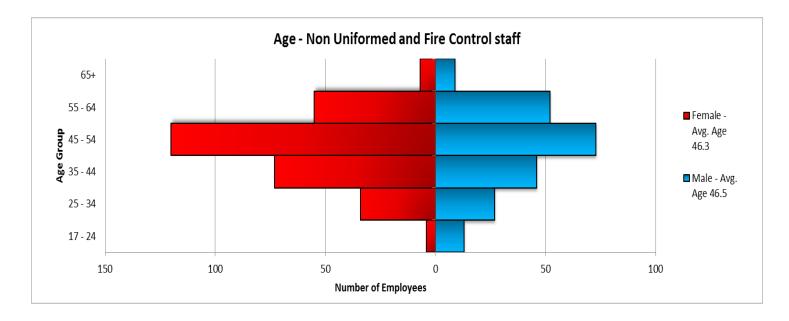
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Non Uniformed and Fire Control staff

- The average age of Non-Uniformed and Fire Control staff is 46, ranging from 18 to 72. 38% of the workforce are over 50.
- The workforce is an ageing one. In 2008 the average age was 43, with 28% over the age of 50.



The average length of service of Non-Uniformed staff is 12 years and of Fire Control staff 15 years.



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WEST MIDLANDS FIRE SERVICE

SCRUTINY COMMITTEE

6th JUNE 2016

1. <u>DIVERSITY INCLUSION COHESION EQUALITY (DICE)</u> <u>UPDATE</u>

Report of the Chief Fire Officer

RECOMMENDED

THAT Scrutiny Committee note the progress made by the Service in relation to DICE.

2. **PURPOSE OF REPORT**

To provide an update to Scrutiny Committee to review and consider the progress being made to support the Service in advancing DICE to support our equality objectives as well as our statutory requirements of the Public Sector Equality Duty and Equality Act 2010.

3. **BACKGROUND**

The DICE objectives contained within the DICE Report, were developed in consultation with functions and departments across the Service. The objectives not only fulfil our legal duties as a public sector organisation under the Equality Act 2010, but also help address areas of development towards achieving excellence in the Equality Framework.

This report details our continued progress towards achieving our objectives and is structured under four themes taken from the Equality Framework for FRS'.

4. Leadership, Partnership and Organisational Development

4.1 Our People priorities have been refreshed to include 'The Service will achieve diversity, inclusion, cohesion, and equality outcomes for its diverse community and workforce'. All SET members are responsible for achieving DICE

outcomes and the Strategic Enabler of People will seek to integrate DICE objectives into organisational development and level 3 plans across the Service.

- 4.2 Following a review of our maternity provision, a number of improvements have been made including a full review of our maternity policy, generation and publication of guidance documents for both line managers and employees, as well as additional support being provided via our People Support Services (PSS) Business Partners. Our maternity pay has been further enhanced, recognising the benefits of both employee retention and increasing our recruitment talent pool. This demonstrates our commitment to gender diversity and that the retention of our women employees is crucial and continues to be a priority for the organisation.
- 4.3 International Women's Day (IWD) took place on 8th March and to support this global event, our DICE team and other colleagues, developed a number of activities for employees to participate in throughout the month of March. Activities included Minerva observation and practice, Menopause drop in sessions, identifying domestic violence, Cancer Research Race for Life volunteer drive, Infant First Aid, Car Care sessions, RTC awareness as well as promotional display boards around HQ show casing influential women through the ages.
- 4.4 The approach taken to IWD and the programme of activity has been used during May for the run up to PRIDE, and will be used in October for Black History Month.
- 4.5 We have signed up to become a Stonewall Champion and will be working with Stonewall to further progress LGBT issues within WMFS. Stonewall will help us build on the steady progress LGBT declarations among our employees have doubled in the last 4 years. Stonewall will advise us on how best to implement various initiatives including an 'allies' scheme which has been successful in many organisations in both public and private sector, creating a more inclusive environment.

Stonewall will also carry out a full audit of WMFS in regards to LGBT issues which will be a key indicator into organisational culture following the impact of the Essex report on UK FRS.

- 4.6 The DICE team have started to re-energise our stakeholder groups including the Race Equality Forum (REF), Affinity and Asian Fire Service Association (AFSA). We have engaged with the stakeholder groups and gained their feedback regarding positive action and our statement of intent.
- 4.7 During April, May and July the DICE team will be delivering interview and selection skills training for managers. The training will be targeted at new managers. The sessions will reinforce and embed the Recruitment & Selection Framework, ensuring that our recruiting managers are able to assess behaviours during selection. The training will also include awareness of unconscious bias during recruitment activity.
- 4.8 The DICE team, in collaboration with colleagues from the E-Learning Team, have produced a disability video, 'Behind the Mask' which includes 6 employees talking openly about their disability. It is hoped that the video will encourage those with disabilities to come forward and disclose, as well as raise awareness amongst employees about disabilities.
- 4.9 The video has been launched internally and with regional partners, on the BBC Disability Network, via Social Media, and through MIND Mental Health Charity.
- 4.10 Working proactively with both managers and employees, the PSS Business Partners continue to raise awareness of the importance of disability disclosure. Disclosure is monitored and we have seen a steady increase in disclosure which is currently at 88% across the organisation.
- 4.11 Our workforce planning activity ensures that we are able to understand our age profile which is essential for us to mitigate any potential risks associated with an ageing workforce. We have recently developed our Wellbeing Strategy which seeks to ensure that our employees are resilient, motivated, committed and flexible and prepared for change.
- 4.12 We are currently working in partnership with MIND, the leading mental health charity in the UK, and we have recently signed the MIND Blue Light Pledge. The programme has assisted us in expanding and enhancing the good work we have already achieved in de-stigmatising mental health and

providing fast-track assistance and support.

4.13 Our approach to Firefighter Fitness has been developed in line with CFOA research and guidance and we are currently implementing annual fitness assessments for all operational personnel. This enables early intervention for any fitness related issues, provides bespoke 'work up' programmes for individuals as well as actively monitoring fitness levels. This will support our operational firefighters in maintaining good health and fitness as they get older.

5. Knowing and Involving our Communities

- 5.1 Working alongside the Community Safety teams and in collaboration with our stakeholder groups, we are developing a Careers Pack which will be launched in September 2016 in line with the new academic year. This will include a brochure as well as a presentation pack for use in both primary and secondary schools highlighting the wide range of positive impacts WMFS has on the community and profiling the diversity of our workforce and role models among BME employees and women firefighters.
- 5.2 It is the intention to liaise with colleges across the West Midlands who run Public Service Courses with the intention of organising a 'challenge cup' to take place during November / December. This will be in line with the colleges' curriculum. This will be done in collaboration with our stakeholder groups, Affinity, REF and AFSA.
- 5.3 Working alongside the Road Casualty Reduction team and through our links with the Placement Teams at Solihull College we have offered a number of work experience placements to students who are currently undertaking the Public Services Course. To date we have worked with 6 students. It is the intention to roll this out to other colleges across the West Midlands.
- 5.4 We see our Community Members, who both live and/or work in the West Midlands, as important ambassadors for our work. 2,200 community members receive communications from us in the form of invitations to events and newsletters about what's happening across the Service. Ongoing contacts are made and it is the expectation that this will continue and that

our community members will be reflective of the diverse communities of the West Midlands.

- 5.5 Our Community Safety Strategy (CSS) provides a wide and detailed view of the communities we serve and the risks that exist in them, so that we are able to effectively plan and allocate our front line resources in the right way to achieve our attendance standards, the most important being to attend all high risk incidents within 5 minutes.
- 5.6 Within the analysis that the CSS provides, we are able to effectively identify and target vulnerable community groups with the aim of informing and educating them of the risks that exist in their home and community, supporting the prevention of fire and road traffic collisions.

This kind of analysis from a prevention, protection and response perspective is important as risks will be different in different areas of the communities we serve. The CSS helps us to identify these differences.

The CSS then informs the development of our Corporate Strategy, The Plan. The Plan guides our staff and key stakeholders to the priorities and outcomes we want to achieve over a three year rolling period. These priorities built against the risks that we know we need to address, inform the development of internal work plans and the way in which we engage with other emergency services, public sector and other partners, including the NHS.

6. **Building a Skilled and Committed Workforce**

- 6.1 Detailed demographic data has been produced by the Workforce Planning team. This not only provides information with regard to our current workforce profile, but also provides forecasting data over the next 10 years.
- 6.2 Profile data is also being provided at a local level and is being used by our PSS Business Partners when discussing resource requirements and succession planning with local managers. Managers are being coached to raise awareness and understanding of the positive impact they can have on the profile of their teams and what measures they can put in place to actively encourage and support individuals from

under-represented groups.

- 6.3 Working alongside our colleagues in learning and development we are developing our approach to buddying, mentoring and coaching. These interventions will be aligned and more accessible to all. We will actively monitor the profile of our buddies and coaches as well as monitoring who is accessing this support.
- 6.4 Our Manager as Coach Programme includes how to approach coaching conversations with diverse groups. This programme has been delivered to our DTM team to enable them to support other managers across the organisation.
- 6.5 The next Reach for the Stars programme commenced in April 2016 with further cohorts running in May and June 2016. The programme focuses on personal development and enables development and growth towards individual potential enhancing empathetic awareness and emotional intelligence, assertiveness and confidence as well as personal resilience in managing change.

7. Responsive and Accessible Service

7.1 In support of our vulnerable people officers and 'safe and well' visits, our specialist deaf team carry out visits to homes among the deaf community. Since January 2016 (up to mid-March) 34 visits have been carried out. The team have also delivered presentations to professional groups, attended charity events and supported risk assessments in sheltered housing.

The specialist deaf team has 9 active members with varying accreditation levels, with a further two people studying. There continues to be interest amongst employees to develop skills.

- 7.2 Since its launch in November 2015, our crews have delivered over 8,000 Safe and Well Visits to some of the most vulnerable in our community.
- 7.3 Every primary school in the West Midlands (790) has been engaged with our 'Schools Safety Challenge' which promotes a positive attitude to safety among young people and promotes the Fire Service as a career choice for young

people from under-represented groups.

7.4 Our Community Members have recently been invited to take part in a focus group looking at our new internet site, along with visits to both Safeside and Fire Control. One of the key principles of being a Community Member is that the engagement received from us is meaningful.

Following feedback from internal discussions each Fire Station will now be able to identify more easily who their 'local' Community Members are and look to start the journey of building a 'relationship' through engaging, informing and educating them with the aim that some of these Community Members will in turn be able to support the station in some of their activities within the local communities and become our ambassadors.

Some stations e.g; Haden Cross have already started to have an impact and build that relationship with their Community Members by sending out their own electronic newsletter. This has already received positive feedback. Bloxwich, Tettenhall and Tipton Fire Stations are also working on building closer links with their local members.

8. **EQUALITY IMPACT ASSESSMENT**

This report responds directly to the General and Specific duties of the Equality Act and considers the DICE issues that are pertinent to the needs of the Service. In doing so a range of equality data has been analysed and considered with regard to all of the protected characteristics.

9. **RISK IMPACT ASSESSMENT**

The objectives identified in this report support the organisation in mitigating its risk with regard to claims of unlawful discrimination.

10. **LEGAL IMPLICATIONS**

The recommendations outlined in this report assists us to fulfil our duties under the Equality Act 2010 particularly to advance equal opportunities and eliminate behaviours that are unlawful under the Act.

11. FINANCIAL IMPLICATIONS

There are no financial implications arising from this report.

12. **ENVIRONMENTAL IMPLICATIONS**

There are no environmental implications arising from this report.

The contact name for this report is DCFO Phil Hales, telephone number 0121 380 6004.

Phil Loach Chief Fire Officer

WEST MIDLANDS FIRE AND RESCUE AUTHORITY

SCRUTINY COMMITTEE

06 JUNE 2016

1. AN ANALYSIS OF PROGRESS OF QUARTERLY PERFORMANCE AGAINST 'THE PLAN' – QUARTER FOUR 2015/2016

Report of the Chief Fire Officer.

RECOMMENDED

- 1.1 THAT the Committee note the status of the Service's key Performance Indicators in the fourth quarter of 2015/2016 (Appendix 1).
- 1.2 THAT the Committee note the progress made in delivering the three strategic objectives contained in 'The Plan' 2015-18 (Appendix 1).
- 1.3 THAT the Committee note the Aspireview performance information system update detailed in section 5 of this report.

2. **PURPOSE OF REPORT**

This report is submitted to provide the Committee with an analysis of the organisation's performance against 'The Plan' for 2015/2016.

3. **BACKGROUND**

The fourth Quarterly Performance Review Meeting of 2015/2016 took place on 24 May 2016. This quarterly meeting, attended by the Chair of the Scrutiny Committee, Principal Officers and Strategic Managers, provides a joined up method of managing performance and provides assurance around the ongoing performance of 'The Plan'.

4. **PERFORMANCE INDICATORS**

4.1 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 West Midlands safer and manage the resources allocated to this work. The Service is improving and meeting targets across a range of indicators.

4.2 Appendix 1 details the performance against our:

- Service Delivery Performance Indicators (Response, Prevention and Protection)
- People Support Services Performance Indicators
- Safety, Health and Environment Performance Indicators
- Strategic Objectives as outlined in 'The Plan' and milestones due for completion within the fourth quarter of 2015/2016.

4.3 Service Delivery Indicators

4.3.1 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 overall 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) is 4 minutes 47 seconds in Quarter 4, the same time as quarter 3 and remaining below the target of under 5 minutes.
- Average attendance times for Category 2, 3 and 4 Incident Types remain well within their respective targets:
 - Category 2 Incident Type: 5 minutes 25 seconds (a decrease of 1 second) – the target is under 7 minutes
 - Category 3 Incident Type: 5 minutes 35 seconds (a decrease of 6 seconds) – the target is under 10 minutes
 - Category 4 Incident Type: 6 minutes 27 seconds (an increase of 2 seconds) – the target is under 20 minutes
- The overall performance of PI 1 and the performance of the response times for all four categories of incident type have been rated as blue consecutively for each quarter of the year 2015/16.

4.3.2 Prevention:

- The performance indicators for the following areas demonstrate over performance against the tolerance levels (blue):
 - PI 6 The number of Home Safety Check points achieved by the Brigade
 - PI 8 The number of arson fires in dwellings
 - PI 11 The number of arson rubbish fires

With regard to PI 6 'The number of Home Safety Checks / Safe and Well visit points achieved by the Brigade' it was reported to the Committee in the quarter 3 update that the risk point scoring system had been revised during that quarter to better reflect the level and range of fire risk and to better align with the priority target groups identified in the Command Level 3 Plans. Additionally, the electronic workbook had been revised and implemented in November 2015, and the new scoring system applied retrospectively back to 1 April 2015.

The revision to the scoring system has had a positive effect on the overall points for the year resulting in a year-end figure of 204,445 (the year-end target of 130,000 was achieved during quarter 3). However, it does make comparison with previous years' inappropriate.

The number of Safe and Well visits completed during quarter 4 is 5300. This is a lower number than previous quarters (7940 in quarter 1, 8267 in quarter 2, 6350 in quarter 3). This is a result of the fact that the content of a Safe and Well visit is far wider than the previous Home Safety Checks and the visits can take up to one hour to complete. The following provides a breakdown of the average points achieved per visit:

- Q1 7.01 points per visit
- Q2 7.26 points per visit
- Q3 (October only) 6.99 points per visit (3029 visits)
- Safe and Well visits commenced on 1 November 2015:
- Q3 (November & December) 7.80 points per visit (3321 visits)
- Q4 7.59 points per visit

This demonstrates that whilst there has been a reduced number of visits, the risk points score has increased since the introduction of the Safe and Well visits.

- The performance indicator for the following three areas demonstrates 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 9 The number of arson fires in non-domestic premises
- There are three areas where under performance has been demonstrated against the tolerance levels (red):
 - PI 5 The percentage of Home Safety Checks referred by our partners (28.8% against a forecast/target of 40%)
 - PI 10 The number of arson vehicle fires (725 incidents recorded, 84 incidents above the upper tolerance level, reflecting that arson vehicle fires remain on the high side)
 - PI 12 The number of arson fires in derelict buildings (144 incidents, just 4 above the upper tolerance level)

The approach within all Command areas focussing on hotspots of arson and using local level 3 leads to tackle local issues appears to be working on the majority of arson related performance indicators. However, PI 10 'The number of arson vehicle fires', and PI 12 'The number of arson fires in derelict buildings', remain in exception, above target.

The Service will continue its approach within command areas of targeting these PI's where hot spots occur. The continued approach of referring abandoned vehicles and void buildings to Local Authorities will be closely monitored to ensure action is being taken when referrals are made.

In relation to arson derelict, efforts are being made to request that where possible, Local Authorities enact the Miscellaneous Provisions Act 1982 (section 29) and the Buildings Act 1984 (section 76-83) where structures are dangerous and a risk to firefighter safety (this approach will be trialled during quarter 1 2016/17).

All arson related performance indicators, particularly PI10 and PI12, are being reviewed as part of the year end and a thematic

review of arson vehicle fires is currently in progress, and will continue to be proactively monitored during 2016/17.

The following two PI's do not have a performance rating assigned:

- PI 4 The number of deaths from accidental fires in dwellings: the 9 fatalities is the lowest number since 2012/13
- PI 7 The number of people killed or seriously injured in Road Traffic Collisions: only limited figures for this performance indicator have been released at the time of writing (figures are only accurate up to November 2015), therefore no performance rating has been assigned.

4.3.3 Protection:

- PI 14 The number of false alarm calls due to fire alarm equipment continues to demonstrate over performance against the tolerance levels (blue).
- PI 13 The number of accidental fires in non-domestic premises demonstrates performance is within the tolerance levels (green).
- 4.4 People Support Services Performance Indicators
- 4.4.1 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 ethnic minority communities
 - PI 19 the average number of working days/shifts lost due to sickness (non-uniformed and Fire Control staff)
 - PI 20 The average number of working days/shifts lost due to sickness all staff.
- 4.4.2 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 18 The average number of working days/shifts lost due to sickness – uniformed employees

- 4.5 Safety, Health and Environment Performance Indicators
- 4.5.1 The performance indicators for the following areas demonstrate over performance against the tolerance levels (blue):
 - PI 21 The total number of injuries
 - PI 23 To reduce the Fire Authority's carbon emissions
 - PI 24 To reduce the gas use of Fire Authority premises
 - PI 25 To reduce the electricity use of Fire Authority premises
- 4.5.2 PI 22 The total number of RIDDOR injuries demonstrate under performance against the tolerance levels (red). The number of injuries reportable to the Health and Safety Executive under RIDDOR has been stable for the past three years (with figures of 22, 22, and 21 respectively). The performance rating is a result of a three year average being used to set the target, and the figures for year 2012/13 being low with fifteen occurrences.
- 4.6 Strategic Objectives
- 4.6.1 The Corporate Action Plans for Response and Protection currently indicate over performance against the tolerance levels (blue).
- 4.6.2 The Corporate Action Plan for Prevention currently indicates performance within the tolerance levels (green).

5. **ASPIREVIEW PERFORMANCE MANAGEMENT SYSTEM**

- 5.1 The Aspireview performance management system continues to be used for performance reporting. However, it should be noted that the performance management system InPhase has been purchased by the Service (in February 2016) which will supersede the Aspireview system. Initial training was provided to members of the implementation team (members of ICT and Strategic Hub) during March 2016 and implementation commenced in April.
- 5.2 The InPhase system not only provides all the performance management elements of the Aspireview system including planning, projects and risk, but also enhanced data retrieval and analysis functionality, and financial reporting, amongst other extra functionality.
- 5.3 All learning from the development of the Aspireview system will be incorporated into the implementation of InPhase, with the aim of ensuring a seamless transition to the new system.

- 5.4 The Aspireview system will continue to be used in the short term interim, having been used to facilitate the Quarterly Performance Review for guarter 4 2015/16.
- 5.5 The data feed to allow the automatic transfer of data continues to be progressed by ICT and forms part of the work involved in the development of a data warehouse.
- 5.6 Full engagement with staff and departments across the organisation continues, ensuring the involvement of all key stakeholders, and to allow end users input into the development and implementation of the system.

6. **CORPORATE RISK**

- 6.1 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.
- 6.2 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.
- 6.3 A report of progress against our Corporate Risks is submitted separately to the Audit Committee.

7. **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.

8. **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.

9. **FINANCIAL IMPLICATIONS**

9.1 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 2015/2016 budget setting process which established a total budget requirement of

£98.538million. Based on Best Value Accounting Code of Practice, the estimated cost of staff engaged in prevention work including an element for watch based firefighters for 2015/2016 is £13.1 million. The cost of delivering services which contribute to the performance achievements comprise 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.

9.2 Expenditure on smoke alarms and other supporting materials in 2015/16 is £256k

BACKGROUND PAPERS

'The Plan 2015-18' Strategic Objectives – Level 2 Action Plans. Corporate Action Plan updates.

Corporate Risk Quarter 4 Position Statement May 2015/16 (exception report).

The contact name for this report is Gary Taylor (Assistant Chief Fire Officer), telephone number 0121 380 6006.

PHIL LOACH
CHIEF FIRE OFFICER

Performance Indicator Performance – Quarter Four 2015/16



Response

Our Response Service protects life, properties and the economies of the West Midlands by delivering assertive, safe and effective fire fighting through timely response, across a range of emergencies we attend.

To support the delivery of the following Strategic Objective:

 We will deliver an assertive, safe, economic, efficient and effective emergency response service.

Overall assessment of performance:

Over performance against the tolerance levels





The Risk Based Attendance Standard

Target: under 5 minutes
Actual: 4 minutes 47 seconds

Over performance against the tolerance levels

The median attendance time to high-risk (Cat 1) incidents in Q3 is 4 minutes 47 seconds, the same figure as reported in quarter 3. This continues the improvement shown all year, ending the year with the best performance seen in several years. Reaction times have remained stable.

Attendance times for Category 2, 3 & 4 incidents remain well within target:

- Category 2: 5 minutes 25 seconds (target is under 7 minutes)
- Category 3: 5 minutes 35 seconds (target is under 10 minutes)
- Category 4: 6 minutes 25 seconds (target is under 20 minutes)

Prevention

Our Prevention Services focus on public involvement and education, engaging with our partners, targeting schools, communities and vulnerable people, with advice and guidance which will give particular attention to social inequalities.

- We will improve the safety of our communities at risk from fire.
- We will improve road safety through targeted action.
- We will improve the quality of life and economic prosperity of local communities.

Overall assessment of performance:

Performance is within the tolerance levels

PI 2



The number of accidental dwelling fires Forecast YTD: 1704 (1619 – 1738)

Actual to date: 1702

Performance is within the tolerance levels

Performance is green, within the tolerance bands. The year-end figure of 1702 is almost exactly the same as last year and just two under target. 62% of fires started in the kitchen. The wards with the highest deprivation levels had the highest number of incidents, such as Aston, Ladywood and Nechells.

PI 3



Injuries from accidental fires in dwellings (taken to hospital for treatment)

Forecast YTD: 61 (49 – 67)

Actual to date: 63

Performance is within the tolerance levels

The number of injuries (taken to hospital) in accidental dwelling fires is above target but within the tolerance levels, so green (also reflecting an improvement from quarter 3 which saw the number of injuries above the upper tolerance limit and therefore rated as red). Most serious injuries resulted from kitchen fires, including 19 where cooking oil was responsible. Two thirds were male, but there were also a number of injuries to elderly individuals. Over half of individuals were sole occupants of the property.

PI 4



The number of deaths from accidental dwelling fires

Forecast YTD: N/A Actual to date: 9

There were 3 fatalities during quarter 4, and 9 fatalities in all during 2015/16. This is significantly fewer than the previous year (19), and the lowest since 2012/13. Six individuals were over 60 years of age, and four were over 70. Seven were sole occupants of the property. The principal cause of the fire was smoking related in six of the nine incidents.



The percentage of Home Safety Checks referred by our partners

Forecast YTD: 40% Actual to date: 28.8%

Under performance against the tolerance levels

Analysis has shown that the highest risk Safe & Well (S&W) visits are predominantly the result of referrals from partner agencies. The target of 40% has not been reached and the year to date (YTD) percentage has fallen slightly compared to the previous year. Commands are continuing to place an emphasis on developing and maintaining effective partnership referral pathways and some commands continue to achieve 25% plus S&W referrals, with Black Country North achieving 38% YTD (Wolverhampton 38.5% and Walsall 37.6%).

PI 6



The number of Home Safety Check / Safe & Well Visit points achieved by the Brigade

Forecast YTD: 130000 Actual to date: 204445

Over performance against the tolerance levels

During Q2 and 3 the risk point scoring system has been revised to better reflect the level and range of fire risk and to better align with the priority target groups identified in the Command Level 3 plans. The electronic workbook was revised and implemented in early November and the new scoring system applied retrospectively back to the 1st April 2015. There are a small number of new risk elements that have been added that could not be scored retrospectively. It can be seen that this has had a positive effect on the overall points for the year with the total target for the year achieved during Q3. This revision to the scoring system makes the comparison with the previous years' inappropriate.

The number of S&W visits completed during Q4 is 5300. This is a lower number than 6,350 in Q3, 8,267 in Q2 and, 7,940 in Q1. However, the content of the S&W visit is far wider than the previous Home Safety Check and the visits can take up to 1hr to complete.

The average points score per visit is:

Q1 = 7.01 points per visit

Q2 = 7.26

Q3 Oct only = 6.99 points per visit over 3,029 visits

Safe and Well visits started on 1st November:

Q3 Nov + Dec = 7.80 points per visit over 3,321 visits

Q4 = 7.59

This shows that whilst there is a reduced number of visits that the risk points score has increased since the introduction of Safe and Well visits.



The number of people killed or seriously injured in road traffic collisions

Forecast YTD: Not applicable

Actual to date: 469

The road safety data indicates 469 KSI from 1 April to date, however these figures are not up to date or accurate for this time period and are only accurate up to November 2015. The general trend, compared to the same time frame in 2014/15 (669) and 2013/14 (641), is that the figures are slightly lower.

PI8



The number of arson fires in dwellings

Forecast YTD: 185 (215 – 251)

Actual to date: 239

Over performance against the tolerance levels

Arson dwelling fires are 17 below the lower tolerance limit. The figure is 25 lower than last year and almost half the number attended in 2011/12. As with arson vehicle fires, incidents tend to occur late, with peak times between 18:00 and 02:00 hrs.

PI9



The number of arson fires in non-domestic premises

Forecast YTD: 159 (143 – 167)

Actual to date: 151

Performance is within the tolerance levels

There were fifty one deliberate fires in non-domestic premises during quarter 4, which is high for the period. However, the year-end figure remains on target and therefore rated green. A significant number occur in the prison, HMP Winson Green, and in psychiatric wards of hospitals. Businesses most affected are within the retail and entertainment categories.

PI 10



The number of arson vehicle fires

Forecast YTD: 610 (549 - 641)

Actual to date: 725

Under performance against the tolerance levels

The number of arson vehicle fires is the highest year-end figure since 2011/12 and well above the upper tolerance level of 641. As expected, the majority of incidents occur in Birmingham but there have been more than 100 incidents in Sandwell, which is high given its relative size and population. Some wards are particular hotspots and these are identified in previous comments and the incident map provided at quarter 3. Arson vehicle fires typically occur at night, with very few incidents reported in daylight hours.

PI 11



The number of arson rubbish fires Forecast YTD: 2304 (2189 – 2350)

Actual to date: 2133

Over performance against the tolerance levels

The number of arson rubbish (outdoor) fires is still high compared to other incident types, but lower than the annual target and it continues to reduce year on year. There were approximately half the number of incidents in 2015/16 compared to 2011/12, when there were more than 4000 incidents.



The number of arson fires in derelict buildings

Forecast YTD: 133 (120 – 140)

Actual to date: 144

Under performance against the tolerance levels

Unlike the majority of the performance indicators, the number of arson fires in derelict buildings has increased, from 137 in 2014/15 to 144 this year (which is one more incident than 2013/14 and lower than the number of 171 in 2012/13). Nearly a third of incidents occurred in Sandwell, but there were also 25 incidents in Walsall and 20 in Dudley, which are relatively high when compared to the 32 incidents recorded in Birmingham.

Protection

Our Protection Service prioritises the risks to the business sector, focusing on the provision of advice and importantly the enforcement of legislation with a mind set of continuing to support the economic wellbeing of the West Midlands.

To support the delivery of the following Strategic Objective:

 We will advise and enforce on fire safety issues across the West Midlands to comply with fire safety legislation.

Overall assessment of performance:

Over performance against the tolerance levels

PI 13



The number of accidental fires in non-domestic premises

Forecast YTD: 507 (456 – 532)

Actual to date: 461

Performance is within the tolerance levels

The year-end total of 461 is inside the tolerance levels and lower than the target for the year. As with many incident types, it also decreasing year on year, with fifty fewer incidents than 2014/15, and 180 fewer incidents compared to 2011/12. There are hotspots, such as the Nechells and Ladywood wards, where 66 accidental non-domestic fires have occurred.

PI 14



The number of false alarm calls due to fire alarm equipment

Forecast YTD: 6334 (6018 – 6461)

Actual to date: 5735

Over performance against the tolerance levels

The number of false alarm calls due to fire alarm equipment has remained well below the lower tolerance level and remains blue for year-end. As recorded in quarter 3, this reduction has been at least partly attributed to the introduction of the Business Support Vehicles.

People Support Services

PI 15



The percentage of employees that have disclosed their disabled status

Target: 100%

Actual to date: 88.8%

Under performance against the tolerance levels

The percentage of staff who have disclosed their disability status has increased by 13% since April 2015, to 88.8%.

PI 16



The number of female uniformed staff

Target: 79 (75 – 83) Actual to date: 78

Performance is within the tolerance levels

There will be little movement on this performance indicator due to the recruitment freeze. Progression and retention continues to be a focus through our positive action strategy.

There are 78 female uniformed staff. This is one less than last year: 2 female firefighters have joined us on secondment from Hereford and Worcester; 2 female uniformed staff have taken career breaks in 2015/16, and 1 is on secondment at the Fire Service College. We are soon to lose three female uniformed staff - 2 to return to Hereford and Worcester, and 1 to transfer to another Brigade. We will then have 75 female firefighters.

PI 17



The percentage of all staff from ethnic minority communities

Target: 14.0 (13.30 – 14.70)

Actual to date: 13.33

Performance is within the tolerance levels

The percentage of staff from BME communities has decreased very slightly from 13.5% to 13.33%. A number of BME staff have retired, others have reclassified their ethnic status on the HRMS. This indicator is to be redefined: 'White Irish' and 'White – any other White background' are to be categorised as 'White', not as 'BME'. This is to bring the Service into line with national and local recording.

With the continuing recruitment freeze, progression and retention continues to be the focus of the Service.

PI 18



The average number of working days/shifts lost due to sickness – uniformed employees

Target: 5.51 (5.43 – 6.00)

Actual to date: 6.13

Under performance against the tolerance levels

Overall, the year-end figure for Uniformed sickness has seen an increase of 2%. However, as per quarter 3, Uniformed sickness has continued to decrease in quarter 4, (a large increase was experienced at the start of the year but the figures have decreased, particularly during December to March). The figures for quarter 4 have followed expected seasonal trends against previous reporting periods.

The top 5 absences are Mental Health, Post-Operative, Joint Problems, Gastrointestinal and Musculoskeletal.

The balance between Long Term Sickness and Short Term Sickness for 2015/16 is 62% of sickness for uniformed employees is Long Term Sickness.



The average number of working days/shifts lost due to sickness – non-uniformed and Fire Control staff Target: 6.95 (6.60 – 7.29)

Actual to date: 6.85

Performance is within the tolerance levels

Non-Uniformed and Fire Control sickness has decreased by 6%. The figures for quarter 4 have been slightly higher than previous months but remain within target (quarter 1, 2 & 3 were all reported as blue). There will continue to be targeted discussion with managers at team meetings around sickness issues to ensure that appropriate support and monitoring of sickness is in place, and we will pro-actively continue with this strategy through the local business partners. Top 5 absences are Mental Health, Musculoskeletal, Joint problems, Respiratory (Cold/Flu), and Post-Operative, accounting for 59% of the days lost to sickness during 2015/16. 7.9% of sick days have no reason for sickness recorded n HRMS, a slight reduction on the previous quarter. 12% of back to work interviews have not been recorded on HRMS.

PI 20



The average number of working days/shifts lost due to sickness – all staff

Target: 6.01 (5.71 – 6.32)

Actual: 6.31

Performance is within the tolerance levels

As per PI 18 & 19. This indicator is just within the upper tolerance level and has been reported as green for the first time since quarter 1 (previously red during quarters 2 & 3).

Safety, Health and Environment

PI 21



The total number of injuries

Forecast YTD: 148 (141 – 155)

Actual to date: 131

Over performance against the tolerance levels

The total number of injuries have fallen by 22% on the previous year. This is the first fall in injuries since 2012/13. A detailed analysis though has shown that the two most common types of injury by cause (slips/trips/falls and manual handling) actually showed a slight increase this year. The major reason for the reduction has been a large reduction in the 'struck against/struck' by injury type which has fallen from 49 the previous year to 24. These are generally minor types of injury where someone has bumped into an object.

The main reductions by Command area are in Birmingham (61 injuries to 45) and in non-commands (52 to 26). The SHE Team will continue to focus on slips/trips/falls and manual handling as these are the main causes of the more serious injuries. 94% of employee injuries occurred in the 25-55 year age range reflecting the age profile of the Service.



The total number of RIDDOR injuries

Forecast YTD: 18 Actual to date: 22

Under performance against the tolerance levels

The number of injuries reportable to HSE under RIDDOR has been stable for the past 3 years (22-22-21). This indicator has been rated as red due to the use of a 3 year average and the 2012-13 RIDDOR figure being very low at 15. Within this category (RIDDOR), there are specified injuries which are the more serious fractures (the main category is an over 7 day absence from work following an injury). The specified injury figure has remained static over the past 4 years (3-2-3-3). This year, the 3 specified injuries all occurred on station (2 broken ankles whilst dismounting the appliance and a fracture to the arm lifting suction hose whilst training). THE HSE have not followed up any of the reports made. The SHE Team have issued a Bulletin raising awareness about dismounting injuries. Overall, the main cause of RIDDOR reports remains slips/trips/falls (10 reports) and manual handling (7 reports) and the SHE Team will continue to make these the main area of prevention/awareness work. Of the 22 reports, seven occurred at incidents which is a low historical figure but the number of non-incident reports (15) where there is a controlled environment indicates that some further improvement is possible.

PI 23



To reduce the Fire Authority's carbon emissions Forecast YTD: 6813 (6426 – 7140) Actual to date: 6276 (provisional)

Over performance against the tolerance levels

This indicator is only reported on annually. The carbon footprint includes gas and electricity emissions but also factors in those from diesel, air and rail journeys, heating oil and so on. Some utility bills are still outstanding but will not make a significant impact. This year's figure is especially low. Some factors include a very mild winter lowering use of gas and electricity, less air journeys and a wider use of Brigade Response Vehicles that are more fuel efficient.

PI 24



To reduce gas use of Fire Authority premises

Forecast YTD: 13315 - 13980MWh

Actual to date: 11210MWh

Over performance against the tolerance levels

Further positive reporting for overall gas usage on station. The high majority of returns were under target. Only slightly poorer performance on usage seen at Ladywood and Brierley Hill. As previously reported, these sites are due further upgrades to the gas heating system. Overall savings to gas usage can be attributed to a very mild winter.

PI 25



To reduce electricity use of Fire Authority premises

Forecast YTD: 5885 - 6180MWh

Actual to date: 5526MWh

Over performance against the tolerance levels

Electricity usage for Qtr 4 remains under projected targets, with the best two performing stations being Erdington and Kings Norton., with no known associated reason.

The worst two sites were Solihull and Tipton. Solihull, as previously reported has long term partnership tenants which will have an impact on increased usage. Tipton appears to have peaked since October but appears to have lower targets, so this may be a data issue. We have successfully secured ongoing payments for electricity from the partners in Haden Cross. These charges were back dated.

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WEST MIDLANDS FIRE AND RESCUE AUTHORITY 6 JUNE 2016

1. ANNUAL REPORT OF THE SCRUTINY COMMITTEE 2015/16

Report of the Chair of the Scrutiny Committee.

RECOMMENDED

That the Committee gives consideration to the content and format of its Annual Report 2015/16 for submission to the next full meeting of the Authority.

2. **PURPOSE OF REPORT**

This report is submitted to Members to seek approval to the Annual Report of the Scrutiny Committee 2015/16.

3. **BACKGROUND**

- 3.1 The Scrutiny Committee was established at the Annual Meeting of the Authority in June 2012. The Committee was to undertake performance management functions and would also scrutinise HR matters, equality and diversity and health and safety across the service. Its purpose is to:-
 - inform policy development
 - hold officers and the Service to account
 - conduct reviews into specific issues
- 3.2 A draft Annual Report for 2015/16 has been prepared by the Chair of the Scrutiny Committee and is attached for comments by the Committee in preparation for submission of the report to the next Authority meeting.

Ref. SC/2016/June/118051610

4. **EQUALITY IMPACT ASSESSMENT**

In preparing this report an initial Equality Impact Assessment is not required and has not been carried out because the matters contained in this report do not relate to a policy change.

5. **LEGAL IMPLICATIONS**

There are no particular legal requirements for the Authority to establish a Scrutiny Committee; it is however considered good practice for authorities to have a vehicle through which monitoring and review of the Authority's policies and practices can be undertaken.

6. FINANCIAL IMPLICATIONS

The Scrutiny Committee can, if required, access resources to be able to engage external professional advice. Most of its work however is undertaken by officers within the employ of the Authority and therefore no additional costs are incurred.

BACKGROUND PAPERS

Authority and Scrutiny Reports.

Chris Tranter
Chair of the Scrutiny Committee

WEST MIDLANDS FIRE SERVICE

Annual Report of the Scrutiny Committee 2015/16

1. Background

The Scrutiny Committee was established by the Fire Authority at its Annual General Meeting in 2012. Its purpose is to:

- inform policy development
- hold officers and the Service to account
- conduct reviews into specific issues

The key benefits of the Committee can be seen as:

- Complementing the strategic and policy formulation and development work of the Authority and Service.
- Developing the skills of members to enable them to investigate below the surface of policies, strategies and processes.
- Providing a useful oversight and an element of 'challenge' to performance improvement processes and continuous improvement.
- Encouraging public involvement in the policy process.
- Supporting the development of an environment that stimulates a more reflective, evaluative and evidence based culture within the Authority and Service.

The Terms of Reference for the Committee can be found at Appendix A of this report.

2. Meetings

During 2015/16, the Committee met on the following dates:

- 17 August 201512 October 2015
- 16 November 2015
- 15 February 2016
- 21 March 2016
- 06 June 2016

3. Members & Attendance Record

	27/08/15	12/10/15	16/11/15	15/02/16	21/03/16	06/06/16
Councillor Barrie	1	X	1	1	1	
Councillor Hogarth	1	X	X	1	1	
Councillor B Singh	1	√	1	1	1	
Councillor Skinner	1	1	1	1	1	
Councillor Spence	1	1	1	X	X	
Councillor Tranter	1	1	1	1	1	
Councillor Ward	1	X	1	X	X	
Councillor Young	X	1	1	1	X	

Senior Officers from the Authority are also present as appropriate.

Working Groups are also appointed to consider scrutiny reviews. The Committee must undertake a minimum of two such reviews each year. Each Working Group has four or five members allocated to it.

4. Business

During the year the Committee conducted the following business:

- Quarterly Analysis of Corporate Performance against 'The Plan'
- Diversity, Inclusion, Cohesion and Equality quarterly updates
- Dispute Resolution Monitoring
- Review of Human Resources Policies (People Support Services) that relate to positive action strategies
- Work programme selection
- Working Group Review of Partnerships (review completed with proposals submitted and agreed, progress of outcomes monitored)
- Working Group Review of Data Sharing (initial scoping document submitted and working group established)

Note: A working group was established to undertake a review of data sharing with partners. This review is expected to be complete in 2016/17.

5. The Committee's main achievements

The Committee believes its key achievements during the year included:-

- The Service's partnership working arrangements had been identified by senior Officers as a potential area for concern and improvement. The Committee agreed to examine this area and undertook a review of partnership working. The review led to a number of recommendations to be implemented, the outcomes of which will continue to be monitored by the Committee as progress is made.
- One area identified for improvement by the review of partnership working was data sharing. Therefore, as a direct result of this review, a review of data sharing will be undertaken including the examination of the associated protocols and procedures, analysing their effectiveness, and identifying and removing barriers where present. The review has been scoped and a Member led working party has been agreed. It is intended that the review will be completed, and its findings submitted, during year 2016/17.
- The robust monitoring of the Service's performance in the areas of Equality and Diversity, analysis of Corporate Performance against 'The Plan', workforce profile indicators and the Prevention Strategy, including Safe and Well visits.

Terms of Reference for the Scrutiny Committee

Scrutiny Committee

To carry out a maximum of two scrutiny reviews per annum selected by the Committee. Such reviews will be member-led and evidence based, and will produce SMART (specific, measurable, attainable, realistic and timely) recommendations to the Executive Committee.

To track and monitor the implementation of review recommendations that are accepted by the Executive Committee.

To summon any officer or member of the Authority to give account in respect of reviews or any other relevant matter.

To manage, in consultation with the Strategic Enabler for Finance and Resources, a specific budget for the purpose of buying in any necessary external advice and support in connection with the reviews.

To receive and scrutinise performance information including progress against the Community Safety Strategy and 'The Plan', the Service's objectives and corporate performance indicators and review performance targets.

To have responsibility for scrutiny of Diversity, Inclusion, Cohesion and Equality and diversity throughout the West Midlands Fire Service and to review policies and monitor performance in relation thereto.

To monitor and scrutinise as appropriate the Authority's HR policies.

To monitor and scrutinise sickness levels, promotion policies and employee exit information.

To receive information and statistics on grievance monitoring and to report outcomes to the Joint Consultative Panel.

To ensure that the Authority is meeting its duties under Health & Safety and environmental and other relevant legislation.

Ref. AU/SC/2016/June/118051610

To deal with any matters referred to it by the full Authority, the Policy Planning Forum or Executive Committee, the Chief Fire Officer, Clerk, Monitoring Officer or Treasurer, not within its work programme.

To refer any matter for consideration by the Authority, another Committee or an officer where considered appropriate.

To submit its minutes and an Annual Report to the Authority.

In order to allow for separation of the scrutiny and decision making functions, members of the Scrutiny Committee shall not sit on the Executive Committee.

The Committee will sit in public with minimum exceptions.

In addition to its programmed meetings, the Committee will hold additional meetings, as and when required, in order to efficiently manage its workload.

WEST MIDLANDS FIRE AND RESCUE AUTHORITY SCRUTINY COMMITTEE WORK PROGRAMME 2015/16

Date of Meeting	Item	Responsible Officer	Completed
	2015		
17 August 2015	Analysis of Progress of Corporate Performance against The Plan for Quarter 1 2015/2016 (including performance indicators; strategic objectives; corporate risk and programmes and projects)	Director of Service Delivery	
	Update on the progress of the Partnerships Review	Chair Of Scrutiny Committee	
	Review of Human Resources Policies (People Support Services) that relate to positive action strategies	Area Commander, Strategic Enabler for People	
	Consideration of Work Programme	Director of Service Delivery	

Agenda Item 7

Date of Meeting	Item	Responsible Officer	Completed
October 2015	Review working group (if required)		
12 October 2015	Progress on the Partnerships Review	Chair Of Scrutiny Committee	
	Dispute Resolution Monitoring	People Support Services	
16 November 2015	Consideration of Scoping Document for Review of Data Sharing	Director of Service Delivery	
	Report on the Partnerships Review	Chair of Scrutiny Committee	
	Analysis of Progress of Corporate Performance against The Plan for Quarter 2 2015/2016 (including performance indicators; human resources indicators strategic objectives; corporate risk and programmes and projects)	Director of Service Delivery	
	Progress on implementation of the Equality Objectives 2012-2015	Strategic Enabler DICE	
	Public Sector Equality Duty and the Equality Act (2010)	Strategic Enabler DICE	

Agenda Item 7

	Diversity, Inclusion, Cohesion & Equality Quarterly Update – Quarters 1 & 2 2015/16	Strategic Enabler DICE	
December 2015	Review Working Group (if required)		
	2016		
Date of Meeting	Item	Responsible Officer	Completed
January 2016	Review Working Group		
15 February 2016 (after Authority meeting)	Analysis of Progress of Corporate Performance against The Plan for Quarter 3 2015/2016 (including performance indicators; strategic objectives; corporate risk and programmes and projects)	Director of Service Delivery	
February 2016	Review Working Group (if required)		
9 March 2016	Review Working Group (if required)		
21 March 2016	Dispute Resolution Monitoring Report Consideration of the Annual Report of the Scrutiny Committee	People Support Services Chair of Scrutiny	

Agenda Item 7

Date of Meeting	Item	Responsible Officer	Completed
28 April 2016	Review Working Group		
6 June, 2016	Analysis of Progress of Corporate Performance against The Plan for Quarter 4 2015/2016 (including performance indicators; human resources indicators strategic objectives; corporate risk and programmes and projects)	Director of Service Delivery	
	Diversity, Inclusion, Cohesion & Equality Quarterly Update – Quarters 3 & 4 2015/16 Annual Report of the Scrutiny Committee	Strategic Enabler DICE Chair of Scrutiny	

To report as appropriate:

 Review of data sharing practices (a working group to be established upon the completion of the Partnerships Review, as resolved at meeting on 16th February 2015)