

Minutes of the Scrutiny Committee

27 February 2019 at 10:00 a.m.
at Fire Service Headquarters, Vauxhall Road, Birmingham
B7 4HW

Present: Councillor Tranter (Chair).
Councillors Barlow, Barrie, Brackenridge, Spence,
and Young

Apologies: Councillor Jenkins
S Middleton

Observer: Nil

1/19 Declarations of Interest in contracts or other matters

There were no declarations of interest.

2/19 Minutes of the Scrutiny Committee held on 14 November 2018

Resolved that the minutes of the meeting held on the 14 November 2018 be approved as a correct record.

At the November meeting, it had been agreed that the following points would be addressed:

- a breakdown and profile of call challenge would be provided to Members

It was noted that a report of the Service's approach to call challenge had been submitted to the Committee under item 5 of the agenda (see below).

- in relation to PI 21 The total number of injuries, further information regarding Breathing Apparatus communications would be provided to Members.

Gary Taylor, Assistant Chief Fire Officer provided an update to Members regarding Breathing Apparatus (BA) communications:

There had been 13 near hits reported for BA communication failures, nine of which had been related to tactical ventilation training at the Oldbury high rise training facility. The Service had worked together with Drager to investigate the causes for the near hits, with the aim to improve the reliability of BA communications.

Investigations had discovered that the amount of heat generated was not an issue but had found that the metal casing that formed part of the construction of the facility generated communication black spots. It was noted that although the number of near hits was high, the figure represented a small percentage when compared to the approximate 1500 incidents involving BA over the last four years (equating to 0.8% of incidents for 2017/18, and 0.3% to date in 2018/19).

In answer to Members' questions, the following points were raised:

- The communication black spots were a result of how the facility had been built, in that it was effectively a metal box, which was convenient and effective for the Service, but was not a type of construction that would be found publicly.
- It was possible for communication black spots to be present in other buildings and where identified, would be recorded within the appropriate Site Specific Risk Information (SSRI) for that particular premises. The tunnels at the Black Country Museum were one such example, where the SSRI had identified the need for additional resources to be put in place if an incident involving the tunnels were to occur.

3/19 Update on the Review of Safeguarding

Alan Lotinga, Associate Consultant, West Midlands Association of Directors of Adult Social Care, provided an update and presentation on the progress made so far in the review of safeguarding.

The presentation covered the following areas:

- Overview of the brief and key lines of enquiry
- Outcomes expected
- Progress to date – current position
- Highlights – positives
- Highlights – areas for improvement
- Next steps

Mr Lotinga wished to thank Andrea Simmonds and Pete Wilson, plus all officers and Members who had contributed to and taken part in the review. Everyone involved had been open and constructive to improve, and keen to listen and learn. It was a sign of a healthy organisation.

It was noted that any outcomes of the review would remain proportionate (based on relatively limited resources serving a large population) and context would be provided to recommendations. The areas for improvement identified would be developed into recommendations.

The following points were raised as a result of the update and presentation:

- A Member noted that as a Service, safeguarding was not solely about the people it served, but also for those who delivered the services.
- A Member noted that it was vitally important that the outcomes of the review were raised and discussed with the representative bodies. In particular, considering the expanding roles of Fire and Rescue Services as a key part of the national framework. There needed to be sufficient training, guidance and support in place for staff.

- It was noted that a degree of clarity was required in terms of the difference between enforcing procedures with reference to the disciplinary policy and/or the conduct policy. It was not perceived that any individual would choose not to follow safeguarding procedures, but there was a risk that an individual did not follow such procedures due to a lack of awareness of them.
- The Metro Court Review highlighted an example of where the fire sector had not made the link between safeguarding and risk / vulnerability to fire. There was a need to educate the sector, as the innovative use of safeguarding legislation was another tool which Fire and Rescue Services could use to protect people from the risk of fire.
- It was confirmed that the recommendations from the review would be fed into the Competency Risk Assessments.

Gary Taylor, thanked Mr Lotinga for the work carried out to date and noted that the update and presentation had been very helpful and brought into focus a number of issues and that there was a need to fully understand safeguarding and the link with vulnerability to fire.

4/19 **Analysis of Progress of Quarterly Performance against The Plan Quarter Three 2018/19**

Gary Taylor, Assistant Chief Fire Officer provided an overview of the report:

PI 1 The risk based attendance standard: performance was below target and below the lower tolerance (rated blue) with a quarterly figure of 4 minutes 43 seconds.

Attendance times for category two, three and four incident types remained well within the respective targets:

- Category 2 incident types: 5 minutes 31 seconds (target is under 7 minutes)
- Category 3 incident types: 4 minutes 58 seconds (target is under 10 minutes)

- Category 4 incident types: 6 minutes 36 seconds (target is under 20 minutes)

PI 2 The number of accidental dwelling fires: there had been 1203 incidents year to date. The Home Office had acknowledged that nationally the number of incidents were increasing. However, in the West Midlands the number of incidents year to date were the lowest ever recorded. It was noted that although a data quality check on a small number of incidents had found no errors, a larger check would be carried out at the end of the financial year to ensure the figures were correct.

PI 3 Injuries from accidental fires in dwellings (taken to hospital for treatment): there had been 17 injuries during quarter three, 35 year to date.

PI 4 The number of deaths from accidental dwelling fires: there had been four fatalities experienced year to date.

PI 5 The percentage of Safe and Well visits referred by our partners: performance was below target and below the lower tolerance level (rated red). Examination of the data had shown that the system that was used to track partnership referrals had been used to track additional work streams including initiatives and faulty smoke alarms. This had inadvertently skewed the figures and resulted in a lower than previously expected number of partnership referrals. More work to understand the situation would continue and the Service would have a more informed view of the issue come the end of the year.

PI 6 The number of Safe and Well points achieved by the Service: 238,091 Safe and Well points had been achieved year to date, above the target and the upper tolerance level (rated blue).

PI 7 The number of people killed or seriously injured (KSI) in road traffic collisions: delays with the data continued. It was hoped that more timely and robust figures would be available in the near future. The Service was a key stakeholder in the recently published West Midlands Regional Road Safety Strategy.

The suite of performance indicators for deliberate fires (PIs nine to 12) were all classed as performing within the tolerance levels or over performing. This reflected the proactive work undertaken by staff and partners to reduce the number of incidents.

PI 8 The number of deliberate fires in dwellings: there had been 170 incidents experienced year to date, above target but within the tolerance levels (rated green).

PI 9 The number of deliberate fires in non-domestic premises: performance was below the target and below the lower tolerance level (rated blue). Significant reductions in the number of deliberate fires had been observed at HMP Birmingham.

PI 10 The number of deliberate vehicle fires: performance was below target and within the tolerance levels. Although the number of incidents had spiked nationally, the numbers in West Midlands remained low.

PI 11 The number of deliberate rubbish fires: performance was below the target and below the lower tolerance level.

PI 12 The number of deliberate fires in derelict buildings: performance was below the target and below the lower tolerance level. It was noted that in addition to the securing of sites / target hardening, a number of sites were now in the process of being redeveloped which reduced the potential for these types of incident.

PI 13 The number of accidental fires in non-domestic premises: performance was above target but within the tolerance levels (rated green).

PI 14 The number of false alarm calls due to fire alarm equipment in dwellings and non-domestic premises: performance was above target and above the upper tolerance level. However, a significant reduction in the number of incidents had been observed compared to the previous quarter. It was noted that it was accepted that there were limited tolerances for premises but the Service liaised

with site managers to try to ensure that the number of incidents remained at a minimum.

Helen Sherlock, Senior Business Partner, People Support Services provided an overview of the people related performance indicators:

PI 15 The percentage of employees that have disclosed their disabled status: performance remained relatively constant with a disclosure rate of 94.7%. Performance was with the tolerance levels (rated green).

PI 16 The number of female uniformed staff: performance was just one below target and within the tolerance levels (rated green).

PI 17 The percentage of all staff from Black Minority Ethnic (BME) communities: performance was just below the target and within the tolerance levels (rated green).

PI 17 The percentage of uniformed staff from BME communities: 9.8% of uniformed staff were from BME communities, the same figure as quarter two and within the tolerance levels.

PI 18 The average number of working days / shifts lost due to sickness – all staff: performance was above the target and the upper tolerance level (rated red). An average of 2.27 working days/shifts per person were lost due to sickness during quarter three, equating to 6.02 year to date. The figure was significantly higher than the target and the figures for the previous year. Work was being undertaken to break the figures down into areas with a view to develop better understanding.

PI 19 The average number of working days / shifts lost due to sickness – uniformed and Fire Control staff: performance was above the target and the upper tolerance level (rated red). An average of 2.17 working days/shifts per person were lost due to sickness during quarter three, equating to 5.75 year to date, significantly above the target (and a 17.1% increase compared to the same period during 2017/18).

PI 20 The average number of working days / shifts lost due to sickness – non-uniformed staff: performance was above the target and the upper tolerance level (rated red). An average of 2.64 working days/shifts per person were lost due to sickness during quarter three, equating to 6.93 year to date. Again, sickness levels were significantly above target (representing a 40.9% increase compared to the same period during 2017/18).

Missing sickness details/data remained an issue and work was continuing to understand and improve.

It was noted that the work being undertaken to address the significant under performance would be reported back to the Committee as part of the quarter four update.

PI 21 The total number of injuries: performance was above target but within the tolerance levels (rated green). Slips, trips and falls remained the main cause of injuries (22 of 91 injuries). A 15% increase in near hit reports had been observed, reflecting a positive culture towards health and safety, and that members of staff felt confident to raise such issues. Issues regarding satellite navigation remained one of the main trends; the Service had emphasised to staff that this was an assistive solution and was an additional tool to accompany topography/local knowledge.

PI 22 The total number of RIDDOR injuries: performance was slightly below target and within the tolerance levels (rated green). One significant safety event had been recorded which was being jointly investigated by the Service and Fire Brigade's Union, and would be followed up by the Health and Safety Executive.

In answer to Members questions, the following points were raised:

- With regard to staff declaring their disability status, it was possible that some staff members were not declaring their status as they may not be confident about the system that holds the data. However, some staff members may simply not wish to declare, and

there is no mandatory requirement for a member of staff to declare such information.

- A Member asked if the information on protected characteristics could be broken down further and reported to the Committee. It was noted that:
 - Information regarding protected characteristics were recorded via sub-PIs.
 - The information was collected and reported through the quarterly performance review framework, which flowed into the Scrutiny Committee via this report.
 - The Service reported annually against the set of equality objectives. This could potentially be reported through the Committee.
 - Ways in which further information on protected characteristics could be reported to the Committee would be explored.
- The Chair noted that there was an open invite to all Members if they wished to attend the quarterly performance review meetings.

Resolved that the Committee noted:

- the status of the Service's key performance indicators in the third quarter of 2018/2019
- the progress made in delivering the three strategic priorities contained in The Plan 2018-2021
- the update on the performance information system.

It was agreed that:

- Ways in which further information on protected characteristics could be reported to the Committee would be explored

5/19 **West Midlands Fire Service – Call Challenge**

Gary Taylor, Assistant Chief Fire Officer, presented a report on the Service's approach to call challenge:

The report had been submitted to the Committee as a result of a request raised by Members at the Committee's meeting held on 14 November 2018.

The report outlined the Service's Emergency Call Management protocol which was a generic system for the successful management of emergency calls based on the principle that an emergency call can be dealt with within three distinct stages (primary questions, assessment questions, and pre-arrival guidance). The overall aim of using the protocol was to ensure that the response was appropriate to the types of risk and calls attended, reducing the risk to responders and improving public safety.

6/19 **Scrutiny Committee Work Programme 2018-19**

The Committee noted the Work Programme for 2018/19.

The meeting finished at 11:56am.

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