

# West Midlands Fire and Rescue Authority

## Scrutiny Committee

**You are summoned to attend the meeting of Scrutiny Committee to be held on  
Monday, 15 February 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)                                    |                |
| 2 | Declarations of interests  |                |
| 3 | Minutes of the Scrutiny Committee held on 16th November 2015                 | <b>3 - 18</b>  |
| 4 | Update on Partnership Review   | <b>19 - 34</b> |
| 5 | Analysis of Progress of Quarterly Performance Against The Plan Qtr 3 2015-16 | <b>35 - 50</b> |
| 6 | Scrutiny Committee Work Programme 2015-16 (Feb 16)                           | <b>51 - 54</b> |

### **Distribution:**

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

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**Agenda Item No. 3**

**Minutes of the Scrutiny Committee**

**16 November 2015 at 12.30pm**  
**at Fire Service Headquarters, Vauxhall Road, Birmingham**

**Present:** Councillor Tranter (Chair);  
Councillor Spence (Vice Chair);  
Councillors Barrie, B Singh, P Singh (substitute for Hogarth), Skinner, Young and Ward

**Apology:** Councillor Hogarth

**Observer:** Not applicable

22/15      **Minutes**

**Resolved** that the minutes of the meeting held on 17 August 2015, be approved as a correct record, subject to the following amendments:

- Apology: removal of Councillor Barrie (who had been noted as having been present and having sent apologies)
- Minute 20/15 Dispute resolution: the sentence 'It was acknowledged that the next stage following an appeal would be industrial tribunal' amended to read 'It was acknowledged that the next stage following an appeal would be employment tribunal'

A Member enquired if the 'Effective Manager Series' training had been confirmed. Sarah Warnes, Strategic Enabler People Support Services, confirmed that the training would be delivered and that the opportunity had also been offered to members of the Joint Consultative Panel.

With reference to minute 21/15, David Gardiner, Facilities Manager, had provided a briefing note on the Estates Strategy which had been circulated to Members prior to the meeting (attached to these minutes).

A Member enquired about the 'Old Bank' property in Bloxwich which was seemingly in a state of disrepair and asked if there were any plans to address this.

David Gardiner advised that the 'Old Bank' property had been discussed. It was believed that it would cost approximately £50,000 to make the property habitable. Cyclical maintenance is planned but not until spring 2016, due to the weather and the work that is required to be carried out.

Gary Taylor, Assistant Chief Fire Officer, advised that the Service currently did not wish to sell any of its properties with the exception of the Academy. The review of estates is undertaken on a yearly basis, and the views raised could be taken to the Fire Authority as part of this review at the relevant meeting.

**Agreed** the 'Old Bank' property in Bloxwich, and the views that have been raised, to be included in the estates review and presented to the Fire Authority.

23/15

### **Review of Partnerships**

The Committee received a report on the 'Review of Partnerships'.

Jim Whittingham, WMFS Strategic Hub, presented an overview of the report, its findings and proposals:

A Member led working group was established in March 2015 comprising Councillors Tranter, Spence and Hogarth, to review all aspects of the Service's partnerships arrangements.

Partnerships are a key priority of the Service, integral to the delivery of the outcomes of 'The Plan', delivering our services, making our communities safer. Governance is important in ensuring the Service initiates and develops the correct partnerships and in the correct manner.

It is important that the Service has the right people and systems in place to deliver these activities. Fire Service personnel contribute 40% of their time delivering prevention work within partnerships, for

example firefighters delivering Home Safety Checks (recently re-launched as 'Safe and Well Checks'), and the additional work undertaken by Partnership Officers and Risk Reduction Officers.

Having already made savings of £28 million, the future financial landscape will need to be taken into consideration, in maintaining the 5 minute response standard and the vital element of prevention work (upstream firefighting), of which partnerships have an essential part to play. It was acknowledged that this area is becoming more difficult and complex and the continuing cuts mean that the Service may not be able to deliver services in the same way.

There is a requirement to consider commissioning as part of the review, ensuring the correct systems and governance are in place in readiness for, and to support, this area of work.

An action plan will need to be developed and the Service will need to identify the best way to achieve these improvements.

The Command partnerships structure reflects the best structure at a service delivery level, promoting effective engagement and liaison with partners and enabling local relationships. However, there may be a requirement for new skills and methods to be adopted, whilst ensuring that the service delivery model is maintained.

It is clear that there is need for improvement of the governance arrangements, including clear terms of reference, a greater understanding of not only why the Service is involved in specific partnerships but also an understanding of the required outcomes, and the development of exit strategies.

The proposals that have been identified fit broadly into three areas:

- Recognising the need for WMFS to make savings.
- A leaner and more effective management structure.
- The opportunity for change, including the opportunity to consider commissioning.

Going forward, subject to approval of the report by the Committee, the following next steps had been identified:

- The development of an action plan, to include the enabling of high level strategic ownership, progress of which will be monitored by the Scrutiny Committee.
- Submission of the report to the Executive Committee for approval.

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

- With regard to 40% of firefighters time delivering prevention activities, there is a need to expect more from firefighters from the balance of the budget, such as the delivery of commissioning activities, working with firefighters to deliver different things.
- 40% of a firefighter's time dedicated to delivering prevention activities will not change, however, the number of staff will. It will be a question of how does the Service maximise the time available to firefighters. The 40% will remain under the current model and if the proposed additional shifts are implemented. However, if there is a reduction in fire cover in the future, there would be a reduction in prevention and protection work, with reductions experienced across the board.
- The Strategic Enabling Team (SET) has identified commissioning as a source of revenue and it is planned into the next three years to help meet the Service's financial deficit.
- With regard to commissioning, the Service acknowledges that the majority of partners are in a similar position financially, with most subject to cuts in their respective budgets. Fire and Rescue Services are gradually building capability, for example formal recognition by Marmot, and working nationally to engage with and gain access to health services.
- The best method of working with health services is to engage with them regarding the problems they face, and to work in close liaison to identify solutions, rather than to provide an 'off the shelf' solution. Evidence of this approach can be seen in some of the pilots that WMFS are currently trailing.

- The Telecare pilot in Coventry continues to be progressed and the possibility of similar projects in other areas have been and continue to be explored. The possibility of providing a service for the discharge of patients from hospitals is being explored, with the potential for this to naturally fall in line with the 'Safe and Well' checks that firefighters already provide (a 'Safe and Well' visit could be carried out which would allow an individual to be discharged from hospital). There is the potential for such an arrangement to be beneficial to both organisations.
- With regard to the 40% of a firefighters time dedicated to delivering prevention activities, the amount of time taken up by commissioning work will not have a derogatory effect. It is not an either / or situation for the Service. When carrying out a safety visit, this will be adding value to it. The Service is advocating to the health sector that if an individual is a priority for them, then that person is most likely a priority of the Service as well. It is common for both the health sector and fire sector to be dealing with the same people. Additionally, the health sector is gaining the experience that firefighters have, and the trusted band that they represent.
- The Service is considering the employee change journey carefully. The pilots are being closely monitored to gauge the potential impact of these new areas of work. People Support Services Business Partners will work closely with staff to support them during this period. Change is inevitable, and all public services are currently facing similar situations and challenges. The Service is identifying those areas where a natural synergy exists.
- The Service has a desire to engage with the most vulnerable persons in our communities. These are potentially the next fire related injuries or fatalities. Commissioning could equal £2 million per year which would help maintain the service delivery model. Training has been implemented (online and in the form of a video) and WMFS is leading nationally in this area on behalf of Chief Fire Officer's Association. The relation with our staff and the representative bodies is critical. The National Joint Council has been involved as part of the trial, the outcomes of which are being fed back at the national level. This has been recognised by the Fire Brigades Union.

- The Service is currently engaging predominantly with local authorities and the health sector, where natural synergies already exist. However, the commissioning strategy is broader in its approach and the Service is also exploring opportunities in the education sector and those agencies that work with and support vulnerable adults. Social value also promises to provide opportunities, for example, under the guise of corporate social responsibility. Additionally, all procurement contracts now include a 2% social value element.
- Engagement with the private sector, for example the provision of risk management services, is a possibility. There are examples nationally, one particular Fire and Rescue Service provides such services but the local geography / composition of business in that area have mainly enabled this (the area the Service covers features a number of large petrochemical plants and installations). However, the makeup of the West Midlands is somewhat different but large multi-national businesses are located in /operating within the area, which WMFS are working with to promote a better understanding of what the Service can do for them.
- There is no prospect for the commissioning of a firefighting /rescue capability at airports. Airports have their own fire services as part of the requirements for a civil licence. For example, Birmingham International Airport has the resources in place for an incident 'on site' but WMFS has a duty to have adequate response plans in place. However, it is important to note that the most significant aircraft incidents occur off site.
- There is a risk that the Service does not share enough data with other agencies, and vice versa. There is a need for a consistent data sharing protocol. It would seem logical that the sharing of data would be enabled via integrated ICT systems, although it is acknowledged that ICT integration has been fraught with problems in the public sector and would require an appropriate level of scrutiny. The review of partnerships highlights the need to review the area of data sharing (previously agreed by the Scrutiny Committee to follow the review of partnerships).

**Resolved** that the review of partnerships report and its proposals be approved.

**Resolved** that the review of partnerships will be submitted to the Executive Committee for approval (meeting scheduled 14 December 2015).

It was agreed that the action plan would be developed in accordance with the minutes above and presented back to the Scrutiny Committee, along with a progress update, at the next meeting, scheduled for 15 February 2016.

24/15

**DICE Performance Report 2012 – 2015 Objectives 2016 - 2019**

Preith Shergill, Strategic Enabler for Diversity, Inclusion, Cohesion, Equality (DICE) presented an overview of the report to Members:

The Equality Objectives were established four years ago and the report detailed the progress made against those objectives. Additionally, the report sought agreement of the DICE objectives for the next four years. The report is required to be published in January 2016. It was noted that any changes in the workforce profile may alter the contents of the report submitted to the Committee, but no significant change was predicted.

The report highlighted a number of key areas of performance:

- Education and youth team work, including the Youth Emergency Services (YES).
- A team dedicated to issues surrounding deafness, working in close liaison with Vulnerable Persons' Officers (VPOs).
- A number of awards have been received including HR Distinction, Marmot, and a Royal Society of Public Health award.
- Wide range of specialist officers and the front line staff constantly developing their knowledge and understanding.
- The sharing of best practice and knowledge with other agencies and how to deliver the best services to end users, as part of the continuous every day work.
- Leadership and inclusion identified the work of the Chief Fire Officer and the founding of SET which is a large step for the Fire and Rescue Service, with the move away from a Corporate Board (previously 5 people including 1 black and

minority ethnic (BME) staff member, now 14 people covering the majority of the protected characteristics). The approach taken has gained significant interest from other agencies / organisations because of its radical nature.

- Enabling leadership at all levels, identifying how to engage with people from different communities and who represent the protected characteristics. Initiatives include the establishment of a Race Equality Forum, Dyslexia Champions, and a broader disability awareness campaign (currently in the preparation phase). Additionally, the Community Membership Scheme was launched at the end of 2014 and approximately 4000 members have registered up to date. The aim of the scheme is to exchange information with members of the public, informing the public what the Fire Service does (more than just response), what is happening in their local area, and allowing the opportunity for members of the public to become more engaged with the Service.
- Improve accountability and increase emphasis of the DICE agenda with regard to the workforce profile. Challenges include the freeze on recruitment, but this does not mean that there isn't anything that can be done. There are many examples of positive work being undertaken including building confidence amongst female uniformed staff regarding promotion (previously a problem area but there are now a number of female staff in supervisory roles), the 'Unusual Suspects' campaign which was recognised by the Department of Health, and improvements made in recent recruitment campaigns (although it is acknowledged that there has been a limited amount of recruitment during the last 4 years). Progress has included focussing on efficiencies have a disproportionate impact upon female members of staff. There has been an increase in the number of female uniformed members staff and there have been improvements in the number of BME staff, although it is acknowledged this will be impacted upon in the future.
- A key method of tackling the challenges posed by a recruitment freeze is the focus on progression, removing barriers and encouraging role models. Additionally, there is a focus on positive action in readiness for when the Service is in a position to recruit again, including the promotion of female

firefighters and engaging with pupils in a school quiz. DICE are also using data and working with various departments to identify opportunities for vulnerable people in our communities.

- There has been a conscious effort to encourage all members of staff to declare their disability status. The number of Lesbian, Gay, Bisexual, Transgender disclosures has increased.
- An area of progress identified was work surrounding social inequality, not just in terms of the DICE team, but including other groups of staff such as service delivery staff and those working within prevention. This will be a significant area of progress going forward.

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

- The report will be made available and communicated in the public arena in a number of different ways, using a mixture of traditional methods plus the use of social media and interactive content available via online.
- There is a dedicated team that work closely with VPOs engaging with and supporting people who are deaf / suffer from hearing loss, allocating resources to them including advice and specialist equipment.
- An outcome of the Community Membership Scheme is to ensure that the membership is reflective of our communities. There is an aim to have firefighters engaging with community members, bringing them onto stations. This happens on occasion with stations liaising with community members but it is more of a vision; with the aim to engage more. A breakdown of community members, including a breakdown by ward, will be circulated to members. It was also confirmed that should members wish to become more involved in the scheme or attend one of the events, they can contact the DICE team or Corporate Communications who will be able to assist.
- The buddy scheme and mentor scheme were labelled together under the umbrella term of a buddy scheme. Previously, the 'Reaching for the Stars' scheme had been a huge success and the Service did not want to finish there and

wished to continue with the progress that had been made. However, due to engagement with members of staff who were potentially disengaged with the Service, it was felt that a formal coaching scheme might put people off from continuing or applying, to take part. The buddy scheme is complimented by a very active coaching and mentoring scheme, plus personal effectiveness courses, and a 'Managing Excellence' program.

- Social class may not be included as a national requirement but it is important to understand that people do come from different social backgrounds. This is an example where the Service differentiates from what it has to do, to what it considers it can do in addition to the mandatory requirements.

25/15

### **Analysis of Progress of Quarterly Performance Against The Plan Quarter 2 2015/16**

Gary Taylor, Assistant Chief Fire Officer presented an overview of the report to Members:

The portfolio and performance management system, Aspireview, is in place, having been utilised at the last two Quarterly Performance Review meetings. Very good feedback had been received regarding the system.

There had been a focus on PI 1 'The risk based attendance standard' this year, performance of which had improved by 1 second for category 1 incidents.

Performance within prevention (PIs 2 to 12) remains largely positive with the exception of PI 5 'The percentage of Home Safety Checks referred by our partners', and PI 10 'The number of arson vehicle fires', both of which had under-performed.

PI 5 'The percentage of Home Safety Checks referred by our partners': Black Country North was the only the Command to meet the target of 40%, and then that was only due to Walsall over-performing.

PI 10 'The number of arson vehicle fires' was an anomaly compared to the other prevention performance indicators, including those indicators related to arson. However, the direction of travel was good, with performance improving. A task and finish group had been commissioned to examine this area in more detail, exploring

how the Police and Local Authorities work, and the approach taken to hardening historical hotspots. The Arson Task Force work effectively within the local Police and are supported by the WMFS Fire Investigation Team which has been enhanced, including an increase in capacity.

Performance within protection remains very good:

- PI 13 'The number of accidental fires in non-domestic premises', one less incident and this indicator would have been blue (over-performance against the upper tolerance level).
- PI 14 'The number of false alarm calls due to fire alarm equipment', performance demonstrated the role of the Business Support Vehicles in protecting more appropriate resources for the Service Delivery Model.

Sarah Warnes provided an overview of the People Support Services performance indicators:

PI 15 'The percentage of employees that have disclosed their disabled status', the direction of travel was good with positive progress having been made. The PI remained red but it was acknowledged that the target of 100% disclosure was ambitious.

PI 16 'The number of female uniformed staff' and PI 17 'The percentage of all staff from ethnic minority communities', were both on target. The recruitment freeze means that there is little room for change but progression and retention are areas for focus. 15% of female uniformed staff and 28% of BME staff are now in managerial roles. These members of staff will be positive role models. Work is being undertaken to identify how positive action can be implemented, encouraging confidence and resilience for staff to progress through the organisation.

PI 18 'The average number of working days / shifts lost due to sickness – uniformed staff', remained off-target but attendance levels are still very positive across the organisation. A task and finish group has been set up, looking at people, systems, support and trends within Commands to enable attendance to be examined on a case by case basis.

PI 19 'The average number of working days / shifts due to sickness (non-uniformed and Fire Control staff)', performance is above the

tolerance level (blue) and a noticeable improvement in sickness within Fire Control had been observed.

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

- The disparities between different Commands regarding performance against PI 5 'The percentage of Home Safety Checks referred by our partners' are being explored and reasons identified, such as relationships with social housing providers. Cases of best practice and lessons learned are to be shared across Commands. It is hoped that the performance of PI 5 will improve following the sharing of lessons learned and the implementation of the proposals resulting from the Partnerships Review.
- With regard to PI 15 'The percentage of employees that have disclosed their disabled status', there is a potential that the remaining 15% of members of staff who have not declared their status may fear it could reflect on their employability. All members of staff should feel that they can disclose their disability status, but it is acknowledged that barriers do exist. Additionally, there is the potential for a member of staff to not class a condition as a disability and a lot of work is being carried out to promote this subject including the continued development of the Wellbeing strategy in the organisation, campaigns such as the Unusual Suspects (highlighting dyslexia), and discussing these issues with managers.
- There is a potential risk that new ways of working may affect sickness levels. However, it is likely to be a short term effect if there is one, and changes are managed by line managers in consultation with members of staff. The new shift system will build in more flexibility regarding staffing and sickness should reduce as a result. The majority of absences due to sickness are short term, and support is provided to members of staff via various means including Occupational Health.
- The figures quoted in the report for PI 19 'The average number of working days / shifts due to sickness (non-uniformed and Fire Control staff)', were queried by Members. This was double-checked and the correct figures were circulated as follows:

Figures as reported	Correct figures
Target: 3.195 (3.14 – 3.25)	Target: 3.42 (3.25 – 3.59)
Actual to date: 3.59	Actual to date: 3.14

\* Figures in brackets are the lower / upper tolerance levels

- Additionally, the actual to date figure of 3.16 was queried for PI 20 'The average number of working days / shifts lost due to sickness – all staff', as it was the same figure as quoted for PI 18 'The average number of working days / shifts lost due to sickness – uniformed employees'. It was confirmed that the figure quoted was correct; all staff sickness was normally very similar to the uniformed sickness rate due to 75% of staff being uniformed personnel.

26/15

### **Scrutiny Committee Work Programme 2015/16**

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

Members of the committee agreed that:

- Action Plan and progress update on the Partnerships Review would be presented at the meeting in February.

(Meeting ended at 12:45 pm)

<p>Contact Officer: Stephen Timmington Strategic Hub West Midlands Fire Service 0121 380 6680</p>
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## **Scrutiny Committee 16.11.15 - Briefing Note**

### **Residential Property Update October 2015**

A survey to review WMFS residential properties was undertaken during 2014 following recommendations made within the Property Asset Management Plan 2014

Typical factors that were considered;- cost benefits, complexities, aspects of the property regards disposal, practicalities of disposal, including sitting tenants and any on-going issues of disposal.

#### **Sites reviewed:**

- King Norton - Flats
- Perry Barr - Houses
- Erdington - Flats
- Bloxwich – The old Bank.

#### **Kings Norton:**

Four self-contained apartments and two offices (ground floor) situated adjacent to the station driveway.

Although the apartments are self contained in a stand alone block the main issues are;

- Compromised access via the main station driveway to gain entry at all apartment front doors.
- Parking issues for residents

Options were considered to alter the front door access; the cost to alter the building would be (circa £20k).

Parking for the apartments is not an option as the existing car park forms part of the station facility accessed by the one driveway.

The risk of the only vehicle side entry access being blocked by tenants is high.

In addition if the side access was shared it would have further implications if/when Kings Norton Station was sold in the future.

There is also concern that six three bedroom flats sold with no parking may have a negative effect on the surrounding area with streets/car parks and shop frontages being used by the flat residents for ad-hoc car parking.

### **Perry Barr:**

Eight self contained houses to the rear of the station.

Although the houses are contained within a stand alone block the main issues are

- Compromised access via the station driveway to gain entry to the front doors.
- Parking for residents

It would be difficult to dispose of the assets due to access; therefore further consideration should be given to utilising these properties, possibly cold training or converting to hospitality properties.

It should be noted that there are two existing WMFS secure tenants housed within these buildings and it has been presumed that the tenants will remain, therefore for clarity six properties are available for further consideration.

### **Erdington:**

Due to the complex and expensive nature of trying to create a separate pedestrian access to these properties and the restricted vehicle parking the flats at Erdington are not considered to be a viable option for disposal.

In addition there may be considerable legal implications around each separate flats leasehold and our freehold if we were to sell the site in the future as the flats are integral to the station building.

Possible cold training or refurbishing them and utilising them as hospitality flats or similar would be an option.

### **Bloxwich – ‘The Old Bank’:**

The property referred to as the old bank building stands alone in front of Bloxwich station, the building is currently in a state of dilapidation. The cost to refurbish this property would be circa £50k

The site also lies within the Bloxwich Conservation Area although the fire station behind does not. As a consequence of this designation any proposals to demolish the building would require Conservation Area Consent, and because this building is identified as a focal building within the Council's Conservation Area Appraisal it is considered unlikely that consent would be forthcoming for its demolition.

As a former bank the site falls within Class A2 use (Professional Services). This means it could be used for any other purpose within class A2 (e.g. financial services, estate agents, employment agencies, betting offices etc) without the need for planning permission. It would also be possible for the building to be changed into retail use (A1) without the need for a planning application.

There may be scope for potential alternative uses of this building including a training facility for the WMFS.

**Conclusions/recommendations:**

- King Norton – Flats – No further action
- Perry Barr - Houses – No further action
- Erdington – Flats – No further action
- Bloxwich – The Old Bank – Option to rent/lease

**WEST MIDLANDS FIRE AND RESCUE AUTHORITY**

**SCRUTINY REPORT**

**15 FEBRUARY 2016**

1. **UPDATE ON PROGRESS OF OUTCOMES FROM THE PARTNERSHIP REVIEW**

Report of the Chief Fire Officer.

RECOMMENDED

THAT members note the initial direction of travel in implementing the recommendations made following the review of partnerships.

2. **PURPOSE OF REPORT**

This report is submitted to update members on the actions to date to meet the outcomes of the Scrutiny Committee report on the review of partnerships. The full report was submitted to the Executive Committee on 14 December 2015.

3. **BACKGROUND**

3.1 The review made recommendations in 6 strategic areas:

- Leadership
- HQ Resources
- Mainstreaming Commissioning
- Governance
- Embed Commissioning
- Data Quality

3.2 The ACFO Service Delivery and the Strategic Enabler for Prevention have absorbed the findings of the review and established an understanding of possible improvements and a plan of action in meeting the strategic recommendations.

3.3 The main actions to date are as follows:

- Identified the key stakeholders

- Established an implementation team
  - Engagement with key stakeholders
  - Review of responsibilities and job description for HQ partnership officer in preparation for recruitment
  - Engaged with Business Development Officer
- 3.4 In addressing the recommendations within the scrutiny report consideration should be given to the external and internal aspects of the risk reduction team and the partnership teams. The internal aspect will be the realignment of managerial positions, such as the Operations Commander for fire investigation, responsibilities and accountabilities for improved leadership and day to day direction. There will be a requirement to influence and respond to the external environment and relationships with Chief Fire Officers' Association (CFOA) and the wider health environment as we build our relationships and embed Fire as a health asset. The post of the Community Safety Manager will lead on this to provide greater leadership and influence.
- 3.5 In order to provide sufficient leadership each area will require a sustainable and efficient structure that will provide local support to aide delivery and ensure alignment to The Plan. The formalisation of a health advisor within the team, to report to the Community Safety Manager will enable the transition from national strategy through to local delivery. The current resourcing structure can support this approach and is anticipated to be achieved within 3 months.
- 3.6 Delivery of local service is key to maintaining and improving local partnerships and the absence of any framework that provides a governance structure has been identified within the review. This will require a restructure of the Partnership Officers that provides central coordination and support that can be flexible and adapt to new opportunities through commissioning. This will be achieved through the repositioning and rationalisation of Partnership Officer roles and provide a consistent approach to enhance local delivery. The anticipated timescales for completion is expected to be 5 months.
- 3.7 To provide continued support to local Operational Managers and the Business Development Team, the role of the Community Risk Reduction Officers will be redefined to

increase the effectiveness in local partnership arrangements and supported centrally to improve governance. The anticipated timescales for completion are expected to be 5 months.

- 3.8 The current partnership policy will be rescinded and replaced with a partnership framework that promotes local flexibility, ensuring value for money through a performance framework and central coordination. This is anticipated to be completed following the establishment of a central partnership support team.
- 3.9 In addressing the recommendations from the scrutiny report there will be a requirement to follow the employee engagement framework and engage with representative bodies through the recognised structures and all effected employees informed. It is anticipated that this will have commenced week commencing 8 February 2016.
- 3.10 Corporate Risk 4 has been amended to reflect the recognition of the scrutiny review and the delivery of the outcomes of the review in Appendix 1.
- 3.11 A summary of an action plan is included in Appendix 2 of this report.

#### 4. **EQUALITY IMPACT ASSESSMENT**

In preparing this report an initial Equality Impact Assessment is required and attached to the report as Appendix 3

#### 5. **LEGAL IMPLICATIONS**

In delivering the recommendations within the scrutiny report will improve corporate governance and monitoring of partnership agreements across Service Delivery.

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.

#### 6. **FINANCIAL IMPLICATIONS**

Additional resources will not be required to implement the

recommendations as this will be achieved through existing structures. There will be a requirement to review and refresh job descriptions to reflect any change in the structures. There will be no increase in budget requirements but the restructure will seek to identify efficiencies in resources. Any resource capacity will be realigned and redirected to support the business development team.

## 7. **ENVIRONMENTAL IMPLICATIONS**

There are no environmental impacts

## **BACKGROUND PAPERS**

Executive Committee report 14<sup>th</sup> December – Review of Partnerships

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

PHIL LOACH  
CHIEF FIRE OFFICER

## Appendix 1 – Scrutiny Report

### Corporate Risk:

Corporate Risk 4: The Fire Authority would be unable to ensure that proper controls are established whilst working in partnership with other agencies/groups, resulting in a significant impact upon the organisation's financial standing, reputation and ability to deliver key objectives.

Emerging Issues	The risk score associated with this risk was raised to $3 \times 2 = 6$ following the August 2015 interim findings of the Scrutiny Committee review of our partnership arrangements. The Scrutiny Working Group delivered its final report to Scrutiny Committee in December 2015, following which the Executive Committee formally approved the findings and proposals for change on 14 December 2015. The findings of the final report were as outlined in the interim report so the current risk rating remains unchanged.
Changes to control measures	The Scrutiny Review recognises that the control environment to enable for the effective management, monitoring and governance of partnerships requires improvement. An action plan for improvement to address the range of proposals set out in the Review of Partnerships report is currently being developed by the SE Prevention. As part of this approach the SE is currently consulting staff and key stakeholders (ops commanders for example) in respect of potential structure, processes and resources that will enable for the more effective control and governance of partnerships. Therefore there are no changes to control measures at this time. The SE Prevention is committed to implementing the proposals for change and will provide regular updates to Scrutiny Committee who will monitor performance in delivering the action plan.
Assurance updates	The Scrutiny Committee report provides for a level 3 independent assurance of the control environment and this is reflected on the assurance map.

## Appendix 2 – Scrutiny Report

### Action Plan Summary:

Outcome	Action	Lead Officer	Expected Timeframe
Increased Leadership and accountability	Realignment of posts to reflect and internal and external focus	Strategic Enabler for Prevention	April 2016
HQ Resourcing	Establish a health Advisor post	Head Of Community Safety	March 2016
HQ Resourcing	Role reviews of the partnership teams across each area and the central support. Redesign the central Community Safety Team (CST) to adopt a business partner approach for increased consistency	Operations Commander for Community Safety	June 2016
Increased Governance, future proof Commissioning and Shared best practice	Establish a central partnership support team to provide co-ordination of commissioning work, local governance and central guidance.	Head of Community Safety	June 2016

## Appendix 3 – Scrutiny Report

### **FULL EQUALITY IMPACT ASSESSMENT**

Name of policy/activity/project
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Implementation of the findings of a Scrutiny Committee review of partnerships.

Is this a new or an existing policy/activity/project?
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This is a new review following a report sent to Executive Committee on the 14<sup>th</sup> December

Scope/timescales for project or activity (including review date)
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In March 2015, Scrutiny Committee agreed to undertake a review of all aspects of partnerships activity. In enabling this, a Scrutiny Members working group, comprising Councillors, Tranter, Hogarth and Spence was established. The review process was facilitated by officers from the Strategic Hub.

In leading the review the Members working group has been engaged throughout and has:

- ☐ Met all Partnership Officers
- ☐ Met a cross section of Community Risk Reduction Officers
- ☐ Met regularly with the (then) Community Safety Manager
- ☐ Spoken to a limited number of station personnel
- ☐ Participated in a home safety check.

As is common with all reviews, a number of opportunities for improvement have been identified. However, whilst responding to such opportunities will be necessary to secure continuous improvement and value for money, it is perhaps more appropriate at this time to fundamentally re-think what the Service requires of its partnerships systems, structures and functionality. The scope of the review, quite rightly, looked at the 'as is' in terms of our accepted thinking regarding what Fire Service partnerships have traditionally delivered – generally working with a range of multi-agency partners to deliver improved outcomes and support the delivery of The Plan in 'making West Midlands safer'.

However, due to the changing political and funding landscape commissioning (bidding to supply services) has emerged as a viable means of contributing towards balancing our budget whilst improving the lives of the most vulnerable by providing services that have traditionally been provided by public health agencies. Therefore, the Service must re-consider its current approach to identifying and supporting partnerships and focus upon the

structure, processes and resources required to maximise and sustain a commissioning model. The need for sustainable organisational commissioning expertise will be of primary consideration in developing proposals for change as a result of this review.

The review has examined partnerships from a strategic perspective right through to the delivery of local partnership activity. As a consequence of this, proposals have been submitted to enable for:-

- ☐ consideration and confirmation of the Leadership Team in community safety and the role of this team in reinforcing and enabling the delivery of partnerships.
- ☐ the appropriate role and structure of the HQ Community Safety team to be developed in line with the organisation's commissioning ambitions.
- ☐ the establishment of effective governance arrangements both locally and centrally to enable for assurance to be provided that partnerships are provided in line with expectations.
- ☐ the role of command partnerships resources to be considered in supporting a commissioned based approach.
- ☐ Evaluation-quantifying and qualifying success methodologies to be developed.

It is expected that all aspects of the recommendations within the scrutiny report will have been delivered by June 2016 following consultation and engagement with all stakeholders. The achievement of recommendations will result in an internal restructure of roles and responsibilities to maximise the effective and efficient use of resources.

Department/Directorate
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Service Delivery

Policy/project lead
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Area Commander Simon Shilton (WMFS)

Author of EIA
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Area Commander Simon Shilton

## **STAGE 1 – AIMS**

What are the aims of the activity or policy?

The aim of this review was to improve the leadership, accountability and quality of the corporate risk control environment to effectively govern, monitor and manage partnership performance.

What are your outcomes (what is it that you hope to achieve)?

The outcome of the review is to implement the recommendations of the scrutiny board findings in areas such as leadership. Resources, mainstreaming commissioning, future proofing, governance and data quality.

How does this project or policy align with 'The Plan'

The proposal aligns with the plan in the following areas:

### **Priorities:**

- Partnership working
- People
- Value for Money

### **Strategic Objectives:**

- Protection
- Prevention
- Response

### **Outcomes**

- 1- Improved governance for partnership arrangements for Prevention
- 2- Deliver value for money by making best use of our resources through effective team structures
- 3- Increased leadership and central support to deliver local priorities against the Plan

- 4- Create a consistent approach to prevention based initiatives
- 5- Respond to commissioning activities to support business development opportunities

## **STAGE 2 – DATA COLLECTION**

For each of the protected characteristics listed below, provide data to evidence that you have researched the possible impact of your policy on WMFS staff and/or the community. (Please refer to guidance notes on sources of data). Your data collection must be **robust**. Further help and advice from the Equality and Diversity team is available:-

Note: Both options include the same workforce.

Note: Data collection for Agency personnel within FC and HSC is not available via HRMS.

Some characteristics are known and will be included in this instances this will includes 74 personnel – data set 1,

Where this is not known, this data set will include 62 personnel – data set 2.

### **Ethnicity (including race, national or ethnic identity)**

<b>Ethnicity</b>	<b>Number</b>	<b>Percentage</b>
White British	13	76.5%
BME	4	23.5%
<b>Total</b>	<b>17</b>	<b>100.0%</b>

### **Gender (including transgender)**

<b>Gender</b>	<b>Number</b>	<b>Percentage</b>
Female	12	70.6%
Male	5	29.4%
<b>Total</b>	<b>17</b>	<b>100.0%</b>

### **Disability**

<b>Disabled?</b>	<b>Number</b>	<b>Percentage</b>
No	16	94.1%
Yes	1	5.9%
<b>Total</b>	<b>17</b>	<b>100.0%</b>

### Religion and Belief

Religion	Number	Percentage
Christian	8	47.1%
Hindu	1	5.9%
None	4	23.5%
Prefer Not To Say	3	17.6%
Not stated	1	5.9%
<b>Total</b>	<b>17</b>	<b>100.0%</b>

### Age

Age group	Number	Percentage
25 - 34	4	23.5%
45 - 54	9	52.9%
55 - 64	4	23.5%
<b>Total</b>	<b>17</b>	<b>100.0%</b>

### Sexual Orientation

Sexual Orientation	Number	Percentage
Heterosexual	12	70.6%
Prefer Not To Say	3	17.6%
Not stated	2	11.8%
<b>Total</b>	<b>17</b>	<b>100.0%</b>

### Maternity/Paternity

There are no members of staff that are on maternity or paternity

### **STAGE 3 – ASSESS AND ANALYSE IMPACT**

Having gathered sufficient data you now need to analyse any potential or real impact.

#### **Who benefits?**

Local command areas would benefit from increased support and consistency to enable effective services to be delivered to our communities. The Business Development Team would be provided with greater support from initial concept to delivery. Partners would benefit from greater governance arrangements along with improved management of corporate risk and reputation.

#### **Who doesn't benefit and why not?**

Changes to structure may impact on individuals and a review of job roles and descriptions may require posts to be re-advertised. Local partnership resources will need to be reviewed to achieve organisational effectiveness.

#### **What consultation have you carried out or plan to carry out? (Attach evidence)**

Engagement is a key factor to the success of this review, demonstrating openness and transparency whilst building trust and it is also important that this review either maintains or improves on the Service Delivery model. To date the following engagements have been undertaken in the initial review

- Partnership Officers
- Cross section of Community Risk reduction Officers
- Regular meetings with the temporary community safety manager
- A selection of station based personnel
- Participation in a Home Safety Check

Further engagement with stakeholders is planned following the announcement of the intended outcomes at Joint Consultative Committee on the 4<sup>th</sup> February.

Is there any evidence of higher or lower participation by different groups?  
(If this is a new function how are you going to gather data on this and when do you plan to review it?)

N/A.

If there is a greater impact on one group, is that appropriate and consistent with the policy's objectives?

As we have only 1 person who has declared a disability any options presented to staff for engagement could potentially put this person at risk of redundancy / redeployment.

As this workforce is predominantly women this proposal could be seen as having the greater impact on this group.

Could any part of the activity discriminate unlawfully?

No

Does the policy/activity meet the communities varied needs?  
(If yes, detail how.)

Yes- Delivering prevention activities within our communities

Does the policy/activity support WMFS in fulfilling its general or specific duties under the Equality Act 2010? (Advance, Eliminate, Foster)

Yes- Greater effectiveness and governance in:

- Service Delivery
- Value for Money
- Safer communities.

#### **STAGE 4 – ADDRESS ISSUES/REDUCE ADVERSE IMPACTS**

Staff engagement sessions are planned and the possibility of a redirection of resources to other areas of the organisation in support of Business Development.

#### **STAGE 5 – FINDINGS, COMMUNICATION REVIEW AND MONITORING**

You should now be ready to make an **informed** judgement about the impact of your policy/activity. Please select and complete the **single** most appropriate section below:-

##### **No major change needed**

How does your analysis support this conclusion?

What are your monitoring/review arrangements?

##### **Adjust the policy/activity**

What is your evidence for the need to adjust the policy/activity?

.....  
.....  
.....

How are you planning to adjust the policy to reduce potential impact?  
What are your timescales on this?

.....  
.....  
.....

What are your monitoring/review arrangements?

.....  
.....  
.....

**Continue the policy/activity (despite potential or actual adverse impact)**

What are your justifications for continuing policy/activity despite potential or actual adverse impacts?

From the analysis above, there appears to be no addition adverse impact on specific individuals or groups. The restructuring of resources and increased leadership will enhance our service to the community.

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What are your monitoring/review arrangements?

The monitoring arrangements will be continuous to ensure effective service delivery

.....

.....

.....

**Stop and remove the policy/activity**

What is your justification for this? What potentially unlawful discrimination has your analysis indicated?

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.....

.....

What is your next step? Is the policy/activity still needed? If still needed what is going to replace it and when?

.....

.....

.....

**Equality and Diversity feedback**

.....EIA agreed evaluation of potential impact is thorough as is potential benefits of different shift system. No indication of this stage of any equality impacts beyond what has been identified in the above report subject to the review at 6 months after implementation as detailed above. TDP 09.10.25.....



**WEST MIDLANDS FIRE AND RESCUE AUTHORITY**

**SCRUTINY COMMITTEE**

**15 FEBRUARY 2016**

1. **AN ANALYSIS OF PROGRESS OF QUARTERLY PERFORMANCE AGAINST 'THE PLAN' – QUARTER THREE 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 third 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 third Quarterly Performance Review Meeting of 2015/2016 took place on 2 February 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 third 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 performance is within the tolerance levels.
- Average attendance times to Category 1 incidents (the most critical and important of the four categories) have increased by 5 seconds to 4 minutes 47 seconds in Quarter 3, 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 26 seconds (an increase of 2 seconds) – the target is under 7 minutes
  - Category 3 Incident Type: 5 minutes 41 seconds (remaining the same as per Quarter 2) – the target is under 10 minutes
  - Category 4 Incident Type: 6 minutes 25 seconds (a reduction of 1 second) – the target is under 20 minutes
- It should be noted that performance has stabilised to some extent, with minor increases and decreases in the attendance times across all four categories of incident type. Analysis has demonstrated that reaction times (the time from initial mobilisation by Fire Control to the appliance being mobilised) have remained stable. The small increase in attendance times mirrors a seasonal trend observed in previous years where the travel times appear to be affected in the winter months.

#### 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 9 The number of arson fires in non-domestic premises
  - PI 11 The number of arson rubbish fires

With regard to PI 6 'The number of Home Safety Check points achieved by the Brigade', it should be noted that in addition to the introduction of the Safe and Well visit, the risk point scoring system was revised during quarter 3 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 has been revised and was implemented in early November. The new scoring system has been applied retrospectively back to 1 April 2015.

The overall target for the year of 135,000 points has been achieved during quarter 3 (163,711.3), a direct result of the change to the scoring system.

Although the performance indicator target will remain, as agreed under the target setting process, it will be reset internally for quarter 4 to enable WMFS to baseline performance, and to enable informed target setting for the year 2016/17.

With regard to the quantity of Safe and Well visits undertaken, whilst recognising the quantity versus quality perspective, currently the Service achieves an average of 0.8 Safe and Well visits per watch per day and output performance is variable across the West Midlands. Additionally, there is a backlog of 2500 Safe and Well referrals within the Contact Centre which the Service is seeking to address, therefore, there is an intention to increase output across the Service.

- The performance indicator for the following area demonstrates performance is within the tolerance levels (green):
  - PI 2 The number of accidental dwelling fires
- There are four areas where under performance has been

demonstrated against the tolerance levels (red):

- PI 3 Injuries from accidental fires in dwellings, taken to hospital for treatment (47 in total, 5 above the target and 2 above the upper tolerance level)
- PI 5 The percentage of Home Safety Checks referred by our partners (27.9% against a forecast/target of 40%)
- PI 10 The number of arson vehicle fires (540 incidents recorded compared to a forecast/target of 470, 47 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

The approach within all Commands 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, albeit showing improvement.

The Service will refocus its efforts in these areas and identify approaches that will support improvement in PI10 and PI12 performance including placing an emphasis on improving referrals to Local Authorities of abandoned vehicles, fly tipped rubbish and derelict / void buildings, and working more closely with the Police.

All arson related performance indicators, particularly PI10 and PI12, will continue to be proactively monitored and will be reviewed at the end of quarter 4 2015/16.

- PI 4 – The number of deaths from accidental fires in dwellings: there is no target for this performance indicator.
- 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, therefore no performance rating has been assigned.

#### 4.3.3 Protection:

- PI 13 – The number of accidental fires in non-domestic premises demonstrates performance over performance against the tolerance levels (blue), having previously been rated as green in quarter 2.

- PI 14 – The number of false alarm calls due to fire alarm equipment continues to demonstrate over performance against the tolerance levels (blue).

#### 4.4 People Support Services Performance Indicators

4.4.1 PI 19 – the average number of working days/shifts lost due to sickness (non-uniformed and Fire Control staff) demonstrates over performance against the tolerance levels (blue). However, it should be noted that the two associated performance indicators regarding sickness, PI's 18 and 20, are both red (please see 4.4.3).

4.4.2 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

4.4.3 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
- PI 20 – The average number of working days/shifts lost due to sickness – all staff

#### 4.5 Safety, Health and Environment Performance Indicators

4.5.1 PI 21 – The total number of injuries demonstrates over performance against the tolerance levels (blue).

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

- PI 24 – To reduce the gas use of Fire Authority premises
- PI 25 – To reduce the electricity use of Fire Authority premises demonstrates performance within the tolerance levels.

4.5.3 PI 22 – The total number of RIDDOR injuries demonstrate under performance against the tolerance levels (red). Performance I has

improved in quarter 3 with one incident above the upper tolerance level. The gap between actual performance and the annual target has narrowed.

- 4.5.4 The performance for PI 23 – to reduce the Fire Authority's carbon emissions, is reported annually.

#### 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 Good progress continues to be made on the Aspireview performance management system with corporate planning and performance reporting, operations planning and performance reporting, corporate risk and project management continuing to be established with a view to wider implementation across the organisation.

- 5.2 Dashboards for Command Areas continue to be developed with stakeholders and rolled out across the Service:

- Following the initial trial of the draft Command Area dashboard at the Black Country South Performance Indicator Meeting in October 2015, Aspireview was successfully utilised at the Command's performance meeting for quarter 3.
- 'Show and Tell' visits have been scheduled with the other Command Areas during quarter 4 to demonstrate Aspireview.
- Additionally, Aspireview was used effectively at the Operations Commander Performance Indicator Meeting.

- 5.3 Station dashboards will now be progressed and trialled later in the year 2015/16.

- 5.4 The project management function has been tested and the Aspireview workstream is now live and managed using the system. The project element will continue to be scoped and developed to incorporate strategic projects.

- 5.5 The data feed to allow the automatic update of information continues to be progressed by ICT and Callcredit, the supplier of Aspireview.

- 5.6 The potential use of Aspireview by other departments including Fire Control and Fire Safety continues to be explored.

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 £98.538 million. As at the end of December 2015 actual expenditure was £71.547 million compared to a profiled budget of £71.683 million resulting in a £0.136 million underspend. 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.
- 9.2 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.

- 9.3 The revised full year budget for smoke alarms and other supporting materials in 2015/2016 is £237,100. Actual expenditure as at the end of December 2015 was £151,900. Expenditure for the third quarter is in line with the profiled budget. The majority of expenditure will be incurred in the final quarter of the financial year due to smoke and carbon monoxide alarms being received at the start of the financial year following the allocation of DCLG grant in March 2015.

## **BACKGROUND PAPERS**

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

Corporate Risk Quarter 3 Position Statement January 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 Three 2015/16**

<b>Key:</b>	
<b>Blue</b>	<b>Over performance against the tolerance levels</b>
<b>Green</b>	<b>Performance is within the tolerance levels</b>
<b>Red</b>	<b>Under performance against the tolerance levels</b>

**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

<b>PI 1</b>		<b>The Risk Based Attendance Standard</b> Target: under 5 minutes Actual: 4 minutes 47 seconds <b>Over performance against the tolerance levels</b>
<p>The median attendance time to high-risk (Cat 1) incidents in Q3 is 4 minutes 47 seconds, a slight increase of 5 seconds compared to Q2 although remaining well within the 5 minute target. This mirrors a trend seen in previous years as travel times appear to be affected in the winter months. Reaction times have remained stable.</p> <p>Attendance times for Category 2, 3 &amp; 4 incidents remain well within target:</p> <ul style="list-style-type: none"><li>• Category 2: 5 minutes 26 seconds (target is under 7 minutes)</li><li>• Category 3: 5 minutes 41 seconds (target is under 10 minutes)</li><li>• Category 4: 6 minutes 25 seconds (target is under 20 minutes)</li></ul>		




## 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

<b>PI 2</b>		<b>The number of accidental dwelling fires</b> Forecast YTD: 1275 (1211 – 1301) Actual to date: 1252 <b>Performance is within the tolerance levels</b>
Performance is green, within the tolerance bands. No major changes from last quarter and broadly similar to Q3 last year. The number of fires remains approximately 140 per month in Q3. The majority of fires start in the kitchen and there is a peak in incidents at midday and again between 5.00pm and 9.00pm. Aston and Northfield wards have had 24 accidental dwelling fires since April; much higher than the ward average of just below 8.		
<b>PI 3</b>		<b>Injuries from accidental fires in dwellings (taken to hospital for treatment)</b> Forecast YTD: 42 (33 – 45) Actual to date: 47 <b>Under performance against the tolerance levels</b>
Performance has slipped and is now two above the higher tolerance limit. There were 10 injuries in October, the highest in one month so far this year. The time and geographical location of serious fire injuries appear quite randomly spread. Two thirds of the victims are male and the majority occur whilst tackling kitchen fires.		
<b>PI 4</b>		<b>The number of deaths from accidental dwelling fires</b> Forecast YTD: N/A Actual to date: 6
There was one fatality in an accidental dwelling fire during Q3. The incident occurred in October in Bordesley Green, Birmingham. The year to date figure of 6 is 4 lower than the same periods for the last 2 years (2013/14 and 2014/15).		

<b>PI 5</b>		<b>The percentage of Home Safety Checks referred by our partners</b> Forecast YTD: 40% Actual to date: 27.9% <b>Under performance against the tolerance levels</b>
<p>Analysis has shown that the highest risk Safe &amp; Well visits are predominantly the result of referrals from partner agencies. The target of 40% has not been reached and the 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&amp;W referrals. Black Country North Command has achieved 38% YTD (Wolverhampton 38.3% and Walsall 38.9%).</p>		
<b>PI 6</b>		<b>The number of Home Safety Check / Safe &amp; Well Visit points achieved by the Brigade</b> Forecast YTD: 97500 Actual to date: 163711.3 <b>Over performance against the tolerance levels</b>
<p>The annual target of 135000 points for 2015/16 has been achieved in Q3, in part as a result of the positive effect on the figures due to the application of the new scoring system (applied retrospectively back to 1 April 2015) as part of the implementation of the revision to the electronic workbook and the roll-out of the Safe &amp; Well visits. The number of HSCs completed during Q3 is 6158, a lower number than Q1 and Q2 although this could reflect the introduction of Safe &amp; Well visits which take longer to carry out than HSCs. Q3 also covers the festive period, where it can prove difficult to book the same level of visits compared to other times in the year.</p>		
<b>PI 7</b>		<b>The number of people killed or seriously injured in road traffic collisions</b> Forecast YTD: 889 Actual to date: 291
<p>The road safety data indicates 291 people killed or seriously injured from 1 April 2015 to date. However, these figures are not up to date or accurate for this time period (only accurate up to July 2015). The general trend is that figures are slightly lower compared to the same time frame in 14/15 and 13/14.</p>		
<b>PI 8</b>		<b>The number of arson fires in dwellings</b> Forecast YTD: 185 (165 – 192) Actual to date: 155 <b>Over performance against the tolerance levels</b>
<p>Arson dwelling fires are 10 below the lower tolerance limit. This is the lowest figure for 4 years. However, Q3 has the highest number this year - at 60 - and that's 11 more than the same period last year. Unlike accidental dwelling fires, the peak times are between 6.00pm and 1.00am. Foleshill ward in Coventry has had 20 incidents since April, which is much higher than any other ward. The ward average is just over two.</p>		

<b>PI 9</b>		<b>The number of arson fires in non-domestic premises</b> Forecast YTD: 128 (114 – 133) Actual to date: 100 <b>Over performance against the tolerance levels</b>
Arson fires in non-domestic properties are 14 below the lower tolerance level. As with arson dwelling fires, this is the lowest figure for four years. Half of the arson fires in non-domestic properties occur between 6.00pm and midnight. Nine were in prisons and another eight in psychiatric hospitals.		
<b>PI 10</b>		<b>The number of arson vehicle fires</b> Forecast YTD: 470 (422 – 493) Actual to date: 540 <b>Under performance against the tolerance levels</b>
The number of arson vehicle fires has continued to rise to its highest level for three years. It is now almost 50 incidents above the upper tolerance level. There were spikes in October (72) and November (70) but December has returned to more typical levels, with 49 incidents. The highest number of arson vehicle fires are predominantly to be found in the south and west of Birmingham.		
<b>PI 11</b>		<b>The number of arson rubbish fires</b> Forecast YTD: 1904 (1808 – 1942) Actual to date: 1742 <b>Over performance against the tolerance levels</b>
Arson rubbish fires are comfortably below the lower tolerance level and remain blue. This is the lowest Quarter 3 number for three years. These types of incidents are typically affected by the weather. There were only 84 in December, which was a wet month.		
<b>PI 12</b>		<b>The number of arson fires in derelict buildings</b> Forecast YTD: 111 (100 – 116) Actual to date: 118 <b>Under performance against the tolerance levels</b>
There have been 118 deliberate fires in derelict buildings since April. This is two higher than the upper tolerance level, so a red RAG rating is indicated. However, the number is only six higher than this time last year and lower than the previous three years. 39 of the 118 incidents (33%) were in Sandwell, which is more than the whole of 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



<b>PI 13</b>		<b>The number of accidental fires in non-domestic premises</b> Forecast YTD: 392 (352 – 410) Actual to date: 342 <b>Over performance against the tolerance levels</b>
The number of incidents is 35 fewer than this time last year. Ladywood ward have had 29 and Nechells 21 accidental non-domestic fires since April, which is significantly more than the average of just under three per ward. However, some wards will have a higher proportion of non-domestic premises within their boundaries. Premises to typically have more of these fires include hospitals, fast food outlets, pubs, and nursing / old people's homes.		
<b>PI 14</b>		<b>The number of false alarm calls due to fire alarm equipment</b> Forecast YTD: 4896 (4653 – 4996) Actual to date: 4406 <b>Over performance against the tolerance levels</b>
Performance is blue and the actual number of false alarms electrical (FAEs) is 250 below the lower tolerance level. This general trend has been at least in part attributed to the effective introduction and use of the Business Support Vehicles within the Service Delivery Model.		




## People Support Services

<b>PI 15</b>		<p><b>The percentage of employees that have disclosed their disabled status</b></p> <p>Target: 100%</p> <p>Actual to date: 88%</p> <p><b>Under performance against the tolerance levels</b></p>
<p>The percentage of staff who have disclosed their disability status has increased by 12% since April 2015 (with an increase from 85% last quarter).</p>		
<b>PI 16</b>		<p><b>The number of female uniformed staff</b></p> <p>Target: 79 (75 – 83)</p> <p>Actual to date: 79</p> <p><b>Performance is within the tolerance levels</b></p>
<p>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. Members of People Support Services and the Diversity, Inclusion, Cohesion, Equality team continue to work together to evaluate the Service's approach and embed the ethos of positive action across the organisation.</p> <p>21% of our uniformed women currently occupy a managerial position: 12 supervisory, 3 middle and 1 strategic.</p> <p>The gender profile of our volunteers and community members is positive, with females comprising 38% of our volunteers and 56% of our community members.</p>		
<b>PI 17</b>		<p><b>The percentage of all staff from ethnic minority communities</b></p> <p>Target: 14.0 (13.30 – 14.70)</p> <p>Actual to date: 13.5</p> <p><b>Performance is within the tolerance levels</b></p>
<p>The percentage of staff from BME communities has decreased slightly from 14% to 13.5%. There has been a reduction of 10 Uniformed staff declaring themselves BME since 01.04.15. 5 Uniformed BME staff have left the Service, 8 have changed their status from BME to White British, and 2 have changed from BME to prefer not to state. 5 Uniformed staff have changed their status from White British to BME.</p> <p>Progression and retention continues to be the focus of the Service. 36% of our BME staff occupy a managerial position: 89 supervisory, 7 middle and 3 strategic.</p>		
<b>PI 18</b>		<p><b>The average number of working days/shifts lost due to sickness – uniformed employees</b></p> <p>Target: 4.09 (3.89 – 4.29)</p> <p>Actual to date: 4.71</p> <p><b>Under performance against the tolerance levels</b></p>
<p>93 specific reasons for sickness were recorded in the last 9 months. The top three causes of sickness were:</p> <ul style="list-style-type: none"> <li>• Mental health, anxiety and depression</li> <li>• Musculoskeletal: Back</li> <li>• Joint problems</li> </ul> <p>8% of sick days have no reason for sickness recorded on HRMS, which is a positive improvement.</p> <p>'Unknown' has been stated as the reason for 3 periods of sickness; these are due to mis-recording by the line manager and are being addressed by the Business</p>		

<p>Partners.</p> <p>Whilst Uniformed sickness has increased by 10% in Q3, an improvement in performance, against the general trend has been observed for December 2015 (the figure is lower than the same period for several previous years).</p>		
<b>PI 19</b>		<p><b>The average number of working days/shifts lost due to sickness – non-uniformed and Fire Control staff</b></p> <p>Target: 5.23 (4.97 – 5.49)</p> <p>Actual to date: 4.96</p> <p><b>Over performance against the tolerance levels</b></p>
<p>Non-Uniformed and Fire Control sickness was 10% lower in Apr-Dec'15, than in Apr-Dec'14. 71 specific reasons for sickness were recorded in the last 9 months. The top three causes of sickness were:</p> <ul style="list-style-type: none"> <li>• Mental health, anxiety and depression</li> <li>• Musculoskeletal: Back</li> <li>• Joint problems</li> </ul> <p>13% of sick days have no reason for sickness recorded on HRMS. Two sickness episodes had the reason for sickness as 'unknown'; this was due to mis-recording by the line manager and is being addressed by the Business Partners.</p>		
<b>PI 20</b>		<p><b>The average number of working days/shifts lost due to sickness – all staff</b></p> <p>Target: 4.36 (4.14 – 4.58)</p> <p>Actual: 4.78</p> <p><b>Under performance against the tolerance levels</b></p>
<p>As per PI 18 &amp; 19 – all staff sickness was 4% higher in Apr-Dec 2015 than in Apr-Dec 2014.</p>		

## Safety, Health and Environment

<b>PI 21</b>		<p><b>The total number of injuries</b></p> <p>Forecast YTD: 105 – 117</p> <p>Actual to date: 101</p> <p><b>Over performance against the tolerance levels</b></p>
<p>Quarter 3 has seen a further improved performance for the total number of injuries reported. The main causes of workplace injury continue to be slips, trips and falls and manual handling. 68% of injuries are occurring in a controlled environment i.e. away from incidents. The Safety, Health &amp; Environment Team are continuing to try to influence reductions and changes in these trends. The vast majority of employee injuries are occurring in the 31-50 age range reflecting the workforce profile.</p>		
<b>PI 22</b>		<p><b>The total number of RIDDOR injuries</b></p> <p>Forecast YTD: 14 – 16</p> <p>Actual to date: 17</p> <p><b>Under performance against the tolerance levels</b></p>
<p>There has been an improved performance in quarter 3 and the gap between actual performance and the annual target has narrowed. It is likely that the annual target will be exceeded (18 against current performance of 17). None of the reports have been followed up by the HSE to date. Slips trips and falls (7 of 17 RIDDOR injuries) and manual handling (6 of 17 RIDDOR injuries) continue to be the main cause of injury and the focus of raising awareness for injury prevention. Quarter 3 saw 2 broken</p>		

ankles arising from dismounting the appliance on station and stumbling onto fire boots. A safety notice has been issued to raise awareness.		
<b>PI 23</b>		To reduce the Fire Authority's carbon emissions Forecast YTD: Actual to date:
This indicator is reported on annually.		
<b>PI 24</b>		<b>To reduce gas use of Fire Authority premises</b> Forecast YTD: 6461 – 7141MWh Actual to date: 6801MWh <b>Performance is within the tolerance levels</b>
<p>Positive reporting, as overall usage is still below target, providing a Green RAG rating. This is very positive for the seasonal time of year. The heating was switched back on, on the 7th October.</p> <p>With the heating switched on, combined with the drop in temperature, we would expect to see higher gas consumption, but levels have remained under target. This may be due to the milder winter we have had to date.</p> <p>Top two stations with the greatest saving below their forecast of consumption were: Perry Barr and Erdington. The worst stations for over target consumption were Highgate (and Occupational Health) and Ladywood. Investigation into this evidenced that both Perry Barr and Erdington have both had new boiler plant within the past 18 months. This may account for the efficiencies. The worst two, have not had recent upgrades and Highgate also runs a hot air system which is not energy efficient.</p>		
<b>PI 25</b>		<b>To reduce electricity use of Fire Authority premises</b> Forecast YTD: 4026 – 4450MWh Actual to date: 4238MWh <b>Performance is within the tolerance levels</b>
<p>Overall positive reporting, with consumption reflecting an overall below target usage. We have seen a slight increase in consumption from last quarter, and this may be due to the winter months and darker nights.</p> <p>The top two stations for efficiencies below target were West Bromwich and Binley. The worst two were Oldbury and Solihull. Further investigation into this revealed that Oldbury has two watches and a Training hub, with increased foot fall coming and going. Solihull also has a partnership working tenant- with increased personnel activity.</p> <p>We have also progressed with Haden Cross partners, to reclaim utility costs from them, and have back dated charges. Billing will be on an annual basis going forward.</p>		

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

<b>Date of Meeting</b>	<b>Item</b>	<b>Responsible Officer</b>	<b>Completed</b>
<b>2015</b>			
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 6

<b>Date of Meeting</b>	<b>Item</b>	<b>Responsible Officer</b>	<b>Completed</b>
October 2015	Review working group (if required)		
12 October 2015	Progress on the Partnerships Review  Dispute Resolution Monitoring	Chair Of Scrutiny Committee  People Support Services	
16 November 2015	Consideration of Scoping Document for Review of Data Sharing  Report on the Partnerships Review  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)  Progress on implementation of the Equality Objectives 2012-2015  Public Sector Equality Duty and the Equality Act (2010)	Director of Service Delivery  Chair of Scrutiny Committee  Director of Service Delivery  Strategic Enabler DICE  Strategic Enabler DICE	

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Agenda Item 6

	Diversity, Inclusion, Cohesion & Equality Quarterly Update – Quarters 1 & 2 2015/16	Strategic Enabler DICE	
December 2015	Review Working Group (if required)		
<b>2016</b>			
<b>Date of Meeting</b>	<b>Item</b>	<b>Responsible Officer</b>	<b>Completed</b>
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	People Support Services	
	Consideration of the Annual Report of the Scrutiny Committee	Chair of Scrutiny	

[ILO: UNCLASSIFIED]  
February 2016

<b>Date of Meeting</b>	<b>Item</b>	<b>Responsible Officer</b>	<b>Completed</b>
28 April 2016	Review Working Group		
6 June, 2016	<p>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)</p> <p>Diversity, Inclusion, Cohesion &amp; Equality Quarterly Update – Quarters 3 &amp; 4 2015/16</p> <p>Annual Report of the Scrutiny Committee</p>	<p>Director of Service Delivery</p> <p>Strategic Enabler DICE</p> <p>Chair of Scrutiny</p>	

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 16<sup>th</sup> February 2015)