WEST MIDLANDS FIRE AND RESCUE AUTHORITY COLLABORATION AND TRANSFORMATION COMMITTEE

5TH September 2022

1. PROGRESS UPDATE REDUCING HEALTH INEQUALITIES CRMP PROJECT

Report of the Chief Fire Officer

RECOMMENDED

1.1 THAT Members note the progress that is being made in delivering the Reducing Health Inequalities CRMP Project.

2. **PURPOSE OF REPORT**

To provide an update on the progress made so far with delivering the tasks and intended outcomes of the Reducing Health Inequalities CRMP Project.

3. **BACKGROUND**

- 3.1 The National Fire and Rescue Framework 2018 requires all FRS to produce an Integrated (Community) Risk Management Plan (CRMP). The plans analyse a wide range of data to assess all foreseeable risks and provide evidenced based strategy that demonstrates how Response, Prevention and Protection activities reduce and mitigate the impacts of fire and other emergency incidents.
- 3.2 The Reducing Health Inequalities (RHI) project is one of six projects that specifically support the delivery of the WMFS CRMP.
- 3.3 There is significant overlap between the health inequalities and social determinants that cause reduced mortality and those that increase the risk and vulnerability to fire and other emergencies. The aim of the RHI project is to develop a co-ordinate suite of Prevention activities, across the life course, that reduce health

inequalities and therefore reduce risk and vulnerability to fire and other emergencies.

3.4 Building on the Prevention activities currently delivered and the and digital system transformation that has already started, the project aims to deliver outcomes across four thematic areas which are People, Digital, Data and Partnerships & Collaboration.

4. **Project Progress and Update**

4.1 **General Updates**

In July 2022 there was a change of Project Manager and the project is now being managed by Station Commander Ryan Forrester. Ryan has the vulnerable persons reference within Coventry and Solihull Command. Ryan is passionate and knowledgeable about Prevention.

The project is being delivered using a collaborative approach across teams and functions within WMFS and with external partners. Teams made up of relevant stakeholders are being formed to undertake the tasks within the project.

To evaluate and evidence difference that the resources and activities within the project make, a comprehensive logic model and evaluation plan has been created. This sets out, the short and medium outcomes along with what and how we will measure the intended impact of the activities within the project.

4.2 **Digital Outcomes Update**

The digital outcomes of the project are:-

- Digital technology enables prevention activity to be accurately recorded and data collected which allows the impact and outcome of prevention activity to be measured, monitored, quality assured and evaluated.
- Education activities will become more effective through different ways of working utilising digital technologies.

- Advances in assistive technology enable prevention activities to be delivered proactively or for the risk to be reduced by the technology itself.
- Improved access to diverse digital services allows the community to take actions that reduce health inequality and reduce their risk of fire and other emergencies.

Progress against the Digital outcomes from the project are detailed below:-

Service User evaluation of Safe & Well (SAW) is now integral to delivery of the service with surveys being sent to all service users who received a visit the end of each financial quarter. The results from the surveys are monitored and accessed through a Power Bi dashboard.

The data from the surveys indicates that SAW is improving people's health, wellbeing, and quality of life and reducing risk and vulnerability to fire. Some examples of what the data is telling include:

- 91% of the 2,278 respondents to date say that they have a greater understanding of the risks of falling
- 95% of those who smoke from the 2,278 respondents say they have a greater understanding of the risks of smoking
- Of those who smoke 145 people were referred to stop smoking services and 60 (41%) of those who were referred told us they have stopped smoking
- Just under a third of those who responded told us that they had been referred to services for further support for one or more of the following; smoking cessation, child safety, loneliness, winter warmth and alcohol services.

The development of the Tymly system to record SAW visits and innovate business processes to support delivery has been work in progress with the system being piloted in Black Country South Operations Command. At the start of lockdown in March 2020, this pilot was suspended to support business continuity arrangements.

One such business continuity arrangement was remote SAW engagement which became a priority to ensure that the service was able to continue to engage with those in our communities who are at risk and vulnerable to fire. The outcome of which was the creation Remote SAW recording and business processes using the Tymly system.

Work to develop the Tymly system to innovate and transform the delivery Prevention activities continues with the further development of Tymly for SAW. This is being informed by learning from the pilot in Black Country South and the COVID pandemic.

Work to transform the way that Prevention Education is provided has commenced with the decommissioning of 'the chip pan demonstration unit' which was used to highlight to the community the impact of chip pan fires and tackling them incorrectly by creating a controlled chip pan fire.

The service has replaced the unit through the purchase of virtual reality headsets and commissioned the development of an 'oil pan fire' film. Individuals across the service have been trained to create video films so that the number of educational messages delivered using virtual reality can be increased over the coming months and years.

4.3 **Data Outcomes**

The data outcome is:

 Data is shared and governed between partner organisations and is used effectively to identify people at risk of fire and other emergency incidents.

Progress against the digital outcome to date:-

The service has developed Membership arrangements for SAW. These arrangements will support a collaborative approach to data sharing data and two-way referrals between WMFS and its partners.

Membership arrangements will ensure that data sharing is done in accordance with GDPR and will make clear to both parties the

principle of 'SAW membership arrangements' have been introduced.

These arrangements set out the expectations and benefits for both parties and SAW service users and provide an efficient real time referral and feedback mechanism between the parties. They enable information gathered from SAW, recommendations, and outcomes to be shared by both parties for the purpose of minimising risk and evidencing the impact of the SAW for the service user.

Full benefit realisation from the Membership arrangements will take effect with the full implementation of Tymly for SAW. However, to date 5 partners have signed up to SAW membership. These partners are Housing and Social Care providers who refer high numbers of their tenants and service users for SAW.

4.4 Partnership & Collaboration Outcomes

The Partnership & Collaboration Outcomes are:-

- WMFS works effectively with partners across the wider health and social care sector to reduce health inequalities and the role of the fire service is valued by those partners.
- WMFS is commissioned to deliver activities that contribute to reducing health inequalities.

Progress against the Partnership & Collaboration outcomes to date:

WMFS is a member of the 3 new Integrated Care Partnerships (ICP) in our service area (Birmingham & Solihull, Black Country, and Coventry & Warwickshire).

ICPs bring together providers and commissioners of NHS services across a geographical area with local authorities and other local partners to collectively plan health and care services to integrate this across different organisations and settings to meet the needs of their population.

As a result of the meetings, WMFS is a member of all three ICPs. WMFS were represented at the inaugural Birmingham & Solihull ICS on 19th July, where it was recognised. The service has been recognised for the success in our shift from response to prevention and opportunities for the service to be engaged in local 'place based' working arrangements that will help to embed Prevention activities to improve, health, wellbeing and quality of life whilst reducing fires and other emergencies.

Membership of the Coventry & Warwickshire ICP has required renewed collaboration between WMFS and Warwickshire FRS which will support both services to engage with partners that cross both service footprints.

In March 2022, a request for support from and discussions with University Hospitals Coventry & Warwickshire (UHCW), WMFS put a proposal forward to start a new pilot for Back Home Safe & Well (BHSAW).

BHSAW is a service, funded by UHCW. The objective is to avoid hospital admissions and re-admissions by conveying people from the Emergency Department at the Coventry site to their home, undertaking a SAW and connecting service users with local reablement services. The outcome for WMFS is to be able to maximise the opportunity to conduct SAWs for those who are at risk and vulnerable to fire.

UHCW were not able to take the proposal through there governance arrangements in time to secure finding from their 20/21 budget. The proposal did go through WMFS governance processes and therefore remains on the table for UHCW and we are hopeful that the hospital will review again as part of the preparedness for winter pressures in the Autumn.

4.5 **People Outcomes**

The People outcomes are:-

 All staff understand and appreciate that health inequalities impact on risk and vulnerability to fire and other

emergencies and see reducing health inequalities as an essential service delivery requirement.

- We attract and recruit staff that are skilled in the delivery of this work as a major part of the role.
- Staff delivering prevention activities are ready, willing, and able to have conversations with people about their health and wellbeing and understand when to refer on to other agencies for support.
- WMFS can evidence the impact it has on reducing health inequalities and subsequently on the risk and vulnerability to fire and other emergencies.

Progress against the people outcomes to date:-

The performance targets for SAW have been revised to improve the focus on and support crews to target their resources to those most at risk and vulnerable to accidental dwelling fires deaths and injuries.

Communication and engagement is ongoing to support these changes and includes regular improvement and update to the information and guidance available on the Prevention MESH pages. The latest update includes guidance to support the delivery of the NFCC Person Centred Framework (PCF) for Home Fire Safety Visits (HFSV).

The PCF supports all FRS to deliver a standardised and evidence-based approach to a person-centred HFSV. The PCF has been developed by the National Fire Chiefs Council (NFCC) in consultation with UKFRS and with the support of the Home Office.

The service is also nearing the completion for the onboarding process for the online home fire safety check (OHFSC).

Available free of charge to all FRSs in England, this user-friendly resource has been developed in collaboration with Fire Kills and Safelincs under the NFCC's Prevention Programme.

The OHFSC has been developed to complement the PCF, which underpins the work of remote and face to face Home Fire Safety Visits and deliver a product available to households who may not reach the threshold for a physical visit, or to be used when and where physical visits are restricted or not possible. It has been designed to provide a person-centred self-assessment of fire risk for individuals that may have low or medium fire risk.

To ensure that those most at risk and vulnerable are not overlooked, the tool has a mechanism to flag a user to their local FRS where a physical visit would be recommended as a consequence of completing the self-assessment. It has been designed to be used by either the home occupant directly, a third party (police, social worker, paramedic etc) who may have concerns to an occupant's welfare or safety, or simply aid the FRS directly with home visits.

It supports the provision of universal home fire safety guidance proportionate to risk and vulnerability enabling WMFS to target its resources to provide face to face SAW to those who are at highest risk and vulnerability.

4.6 **Next Steps**

For **Digital outcomes** work continues to develop and build the Tymly system for SAW. This will see the PCF fully integrated in to SAW.

The next key area of focus will be the development of a Social Media Strategy for Prevention messages which will include the use of local influencers and geo targeting of messages to ensure maximum and targeted reach of the messages

For **Data outcomes** work continues to sign more partners up to the SAW Membership Arrangements.

For **People outcomes**, the next area of focus will be creating a proactive contact strategy and protocols to enable better use of and access to individuals that data sets indicate are at risk and vulnerable to fire and other emergencies.

When available, the service will also onboard the e-learn package that the NFCC are making available to support the delivery of the PCF for home fire safety visits.

And

For **Partnerships & Collaboration** outcomes, work will continue to build our relationships, brand, and value with the ISPs. To support this work is commencing on developing a clear offer of what WMFS can contribute with health partners.

5. **EQUALITY IMPACT ASSESSMENT**

- 5.1 In preparing this report, an initial Equality Impact Assessment is not required and has not been conducted.
- 5.2 Throughout the life of the project, initial Equality Impact
 Assessments will be undertaken and where appropriate full
 Equality Impact Assessments will take place. WMFS Networking
 and working groups, will be engaged, and consulted to ensure that
 the outcomes are effective, fit for purpose and understood by all.

6. **LEGAL IMPLICATIONS**

6.1 There are no direct legal implications.

7. **FINANCIAL IMPLICATIONS**

7.1 There are no direct financial implications.

8. **ENVIRONMENTAL IMPLICATIONS**

8.1 Positive impact on the environment is being enabled through the digital outcomes in the project, including but not limited to the decommissioning of the chip pan demonstration and replacing it with virtual reality technology.

The contact for this report is Pete Wilson, Strategic Lead Prevention, telephone number 07973 810 262.

Phil Loach
CHIEF FIRE OFFICER