

WEST MIDLANDS FIRE AND RESCUE AUTHORITY

SCRUTINY COMMITTEE

20 FEBRUARY 2017

1. AN ANALYSIS OF PROGRESS OF QUARTERLY PERFORMANCE AGAINST 'THE PLAN' – QUARTER THREE 2016/2017

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 2016/2017 (Appendix 1).
- 1.2 THAT the Committee note the progress made in delivering the three strategic objectives contained in 'The Plan' 2016-19 (Appendix 1).
- 1.3 THAT the Committee note the update on the performance information system 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 2016/2017.

3. BACKGROUND

The third Quarterly Performance Review meeting of 2016/2017 was held on 7 February 2017. 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 continues

to improve and meet targets across a range of indicators.

4.2 Appendix 1 details the performance against our:

- Service Delivery Performance Indicators (Response, Prevention and Protection)
- People Support Services Performance Indicators
- Safety, Health and Environment Performance Indicators
- Strategic Objectives as outlined in 'The Plan' and milestones due for completion within the fourth quarter of 2016/2017.

4.3 Service Delivery Performance Indicators

4.3.1 Response:

- PI 1 – the risk based attendance standard; performance continues to be positive, with the targets having been met for all four categories of incident type. The overall performance is rated as over performance against the tolerance levels (blue).
- Average attendance times for Category 1 incidents (the most critical and important of the four categories) is 4 minutes 42 seconds in Quarter 3, the same time as per the previous quarter.
- Average attendance times for Category 2, 3 and 4 Incident Types remain well within their respective targets:
 - Category 2 Incident Type: 5 minutes 45 seconds (an increase of 36 seconds) – the target is under 7 minutes.
 - Category 3 Incident Type: 5 minutes 01 seconds (an increase of 8 seconds) – the target is under 10 minutes.
 - Category 4 Incident Type: 6 minutes 51 seconds (an increase of 18 seconds) – the target is under 20 minutes.

4.3.2 Prevention:

- The overall performance is rated as performance within the tolerance levels (green).
- The performance indicators for the following areas demonstrates over performance against the tolerance levels (blue):
 - PI 2 The number of accidental dwelling fires.
 - PI 6 The number of Safe and Well points achieved by the

Brigade.

- PI 11 The number of arson rubbish fires.
- The performance indicator for the following two areas demonstrates performance is within the tolerance levels (green):
 - PI 3 Injuries from accidental fires in dwellings, taken to hospital for treatment.
 - PI 5 The percentage of Safe and Well visits referred by our partners.
- There are four areas where under performance has been demonstrated against the tolerance levels (red):
 - PI 8 The number of arson fires in dwellings.
 - PI 9 The number of arson fires in non-domestic premises.
 - PI 10 The number of arson vehicle fires.
 - PI 12 The number of arson fires in derelict buildings.
- The following two performance indicators do not have a performance rating assigned:
 - PI 4 The number of deaths from accidental fires in dwellings: two fatalities during quarter two.
 - PI 7 The number of people killed or seriously injured in Road Traffic Collisions.

4.3.3 Protection:

- The overall performance is rated as performance is within the tolerance levels (green).
- PI 13 – The number of accidental fires in non-domestic premises demonstrates performance is within the tolerance levels (green).
- PI 14 – The number of false alarm calls due to fire alarm equipment demonstrates performance is within the tolerance levels (green).

4.4 People Support Services Performance Indicators

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

- PI 16 – The number of female uniformed staff.
- PI 17 – The percentage of all staff from ethnic minority communities.

4.4.2 The performance indicator for the following area demonstrates 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 19 – the average number of working days/shifts lost due to sickness (non-uniformed and Fire Control staff).
- PI 20 – The average number of working days/shifts lost due to sickness – all staff.

4.5 Safety, Health and Environment Performance Indicators

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

- PI 22 – The total number of RIDDOR injuries.
- PI 24 – To reduce the gas use of Fire Authority premises.
- PI 25 – To reduce the electricity use of Fire Authority premises.

4.5.2 The performance indicator for the following area indicates performance within the tolerance levels (green):

- PI 21 – The total number of injuries.

4.5.3 PI 23 – To reduce the Fire Authority's carbon emissions, is reported on an annual basis.

4.6 Strategic Objectives

- 4.6.1 The Corporate Action Plan for Response currently indicates over performance against the tolerance levels (blue).
- 4.6.2 The Corporate Action Plans for Prevention and Protection currently indicate performance within the tolerance levels (green).

5. **PERFORMANCE MANAGEMENT SYSTEM**

- 5.1 The implementation of the InPhase performance management system continues with work progressing on the automated data feed (including the development of the data warehouse), structure of the system for performance and planning, and the design of the relevant dashboards to display performance information in an intuitive and user friendly style.
- 5.2 InPhase was successfully utilised for the quarter three 2016/17 quarterly performance review, during both the preparation and in the actual meeting to display the performance and corporate risk information.
- 5.3 Development of the project management capability has commenced, which will be developed in line with the progression of the new project framework. A pilot to allow testing and further development which commenced in November, concluded 10 February. The progress and outcomes of the pilot will be reported to the Strategic Enabling Team on 22 February for consideration. The proposed 'go live' date of 1 April 2017 for the project element of InPhase remains at this current time but it will be dependent on the outcomes of the pilot.
- 5.4 Full engagement with staff and departments across the organisation continues ensuring the involvement of all key stakeholders and to allow end users input into the development and implementation of the system.

6. **CORPORATE RISK**

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

separately to the Audit Committee.

7. **EQUALITY IMPACT ASSESSMENT**

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

8. **LEGAL IMPLICATIONS**

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

9. **FINANCIAL IMPLICATIONS**

- 9.1 The level of response, protection and prevention resources required to achieve the targets for the operational indicators shown in Appendix 1 were considered as part of the Authority's 2016/2017 budget setting process which established a total budget requirement of £97.413 million. As at the end of December 2016 actual expenditure was £71.411 million compared to a profiled budget of £71.588 million resulting in a £0.177 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 2016/2017 is £14.3 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 2016/2017 is £355,900. Actual expenditure as at the end of December 2016 was £234,400. Expenditure for the third quarter is in line with the profiled budget.

BACKGROUND PAPERS

'The Plan 2016-19' Strategic Objectives – Level 2 Action Plans.
Corporate Action Plan updates.

Corporate Risk Quarter 3 Position Statement January 2017 (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