



EAST SUSSEX FIRE AUTHORITY

SCRUTINY & AUDIT PANEL

THURSDAY 4 FEBRUARY 2016 at 10:00 hours

MEMBERS

East Sussex County Council

Councillors Buchanan, Galley, Lambert, Taylor and Wincott.

Brighton and Hove City Council

Councillors Peltzer Dunn and Penn.

You are requested to attend this meeting to be held at East Sussex Fire & Rescue Service Headquarters, 20 Upperton Road, Eastbourne, at 10:00 hours.

AGENDA

Item No.	Page No.	
006.	1.	In relation to matters on the agenda, seek declarations of any disclosable pecuniary interests under Section 30 of the Localism Act 2011.
007.	1.	Apologies for absence.
008.	1.	Notification of items which the Chair considers urgent and proposes to take at the end of the agenda / Chair's business items.

(Any Members wishing to raise urgent items are asked, wherever possible, to notify the Chair before the start of the meeting. In so doing they must state the special circumstances which they consider justify the matter being considered urgently).

009. 3. Non-confidential Minutes of the last Scrutiny & Audit Panel meeting held on 5 November 2015 (copy attached).
010. 2. Callover
The Chair will call the item numbers of the remaining items on the open agenda. Each item which is called by any Member shall be reserved for debate. The Chairman will then ask the Panel to adopt, without debate, the recommendations and resolutions contained in the relevant reports for those items which have not been called.
011. 9. 2015/16 Third Quarter Performance Results – report of the Chief Fire Officer (copy attached).
012. 21. 2015/16 Third Quarter Corporate Projects and Programmes Progress Report – report of the Chief Fire Officer (copy attached).
013. 23. 2015/16 Third Quarter Corporate Risk Register Review – report of the Treasurer (copy attached).
014. 35. Aerial Rescue Pump – Implementation review and future crewing arrangements – report of the Chief Fire Officer (copy attached).
015. 45. Counter Fraud Project Outcomes – joint report of the Chief Fire Officer, Treasurer and Deputy Monitoring Officer (copy attached).
016. 2. Exclusion of the Press and Public

To consider whether, in view of the business to be transacted or the nature of the proceedings, the press and public should be excluded from the remainder of the meeting on the grounds that, if the public and press were present, there would be disclosure to them of exempt information. NOTE: Any item appearing in the confidential part of the Agenda states in its heading the category under which the information disclosed in the report is confidential and therefore not available to the public. A list and description of the exempt categories are available for public inspection at East Sussex Fire & Rescue Service Headquarters, 20 Upperton Road, Eastbourne, and at Brighton and Hove Town Halls.
017. 49. Confidential Minutes of the last Scrutiny & Audit Panel meeting held on 5 November 2015 (copy attached). (Exempt categories under paragraphs 2 and 3 of the Local Government Act 1972).
018. 51. Counter Fraud Project Outcomes – Confidential Appendix – confidential report of the Chief Fire Officer (copy attached). (Exempt categories under paragraphs 1 & 2 of the Local Government Act 1972).
019. 53. St Michael’s Hospice Fire – Joint Operational Learnings – confidential report of the Chief Fire Officer (copy attached). (Exempt categories under paragraphs 1 and 2 of the Local Government Act 1972).

ABRAHAM GHEBRE-GHIORGHIS
Monitoring Officer
East Sussex Fire Authority
c/o Brighton & Hove City Council

EAST SUSSEX FIRE AUTHORITY

Minutes of the meeting of the SCRUTINY & AUDIT PANEL held at East Sussex Fire & Rescue Service Headquarters, 20 Upperton Road, Eastbourne, at 10:00 hours on Thursday 5 November 2015.

Members Present: Councillors Barnes, Buchanan, Lambert (Chair), Peltzer Dunn, Scott, Taylor and Wincott.

N.B. Councillor Barnes attended the meeting in place of Councillor Galley, and Councillor Scott attended in place of Councillor Penn, having been nominated by the Group Leaders and approved by the Deputy Monitoring Officer.

Also present:

Councillor Howson (Chairman East Sussex Fire Authority), Mr. G. Walsh (Chief Fire Officer & Chief Executive), Mr. S. Apter (Deputy Chief Fire Officer), Mr. G. Ferrand, (Assistant Chief Fire Officer), Mrs. C. Rolph (Assistant Chief Officer), Ms. L. Woodley (Deputy Monitoring Officer), Mr. D. Savage (Treasurer), Mr. W. Tricker (Head of Finance & Procurement), Mrs. L. Ridley (Head of Performance Management), Mr. P. King (Ernst & Young Auditors) and Mrs. S. Klein (Clerk).

991. **DISCLOSABLE PECUNIARY INTERESTS**

991.1 It was noted that, in relation to matters on the agenda, no participating Member had any disclosable pecuniary interest under Section 30 of the Localism Act 2011.

992. **APOLOGIES FOR ABSENCE**

992.1 Apologies for absence were received from Councillors Galley and Penn; Members sent their best wishes to Councillor Galley for a speedy recovery

993. **ANY OTHER ITEMS CONSIDERED URGENT BY THE CHAIR / CHAIR'S BUSINESS**

993.1 The Chair welcomed Steve Apter to his first meeting. Steve had been seconded from Hampshire Fire & Rescue Service as Deputy Chief Fire Officer and Members extended a warm welcome to him.

994. **NON-CONFIDENTIAL MINUTES OF THE SCRUTINY AND AUDIT PANEL MEETING HELD ON 17 SEPTEMBER 2015**

994.1 **RESOLVED** – That the non-confidential minutes of the meeting of the Scrutiny & Audit Panel held on 17 September 2015 be approved as a correct record and signed by the Chair. (Copy in Minute Book).

995. **CALLOVER**

995.1 Members reserved the following items for debate:

- 996. Annual Audit Letter 2014/15
- 997. 2014/15 Service Benchmarking
- 998. 2015/16 2nd Quarter Performance Results
- 999. Corporate Projects and Programmes Quarter 2 Progress Report
- 003. IMD Transformation Programme Progress

995.2 **RESOLVED** – That all other reports be resolved in accordance with the recommendations as detailed below.

996. **ANNUAL AUDIT LETTER 2014/15**

996.1 Members considered a joint report of the Chief Fire Officer & Chief Executive and Treasurer that presented the recently published Annual Audit letter 2014/15. (Copy in Minute Book).

996.2 Paul King, from the Authority's external auditors, Ernst & Young, was welcomed to the meeting. The Letter had recently been published, summarising the external auditors' work relating to 2014/15, the majority of which had already been reported to this Panel in the Audit Results Report for 2014/15.

996.3 The Chair asked Mr. King to clarify the newly added Section 4 of the Letter – Looking Ahead. Mr. King explained that the first point referred to payments to be made to individuals affected by the Pensions' Ombudsman's determination in the case of GAD v Milne; the Auditors were not anticipating any financial impact on the Fire Authority as any liabilities incurred were to be fully funded by top up grant from Central Government.

996.4 The Treasurer confirmed that he was continuing to provide information requested to DCLG and had an indicative cost in relation to ESFRS pensioners of £933k – he was waiting for DCLG to clarify whether payments would be compensation or pension payments, and the mechanism for repayments to be made to the Fire Authority.

996.5 Mr. King explained that the second part of Section 4 of the Letter gave details about the new timetable for the preparation, approval and publication of accounts from the 2017-18 financial year. This would mean that the Fire Authority would have to produce draft accounts by 31 May and these would need to be audited by 31 July. The Auditors were already working on ways to meet these logistical challenges, including doing more work before the end of the financial year, with less to do after the end of the year.

996.6 Mr. King reassured Members that the Fire Authority's financial position was sound, with proper arrangements to secure economy, efficiency and effectiveness in the use of its resources, and a structured and planned use of its reserves.

996.7 **RESOLVED** – That the recently published Annual Audit Letter be approved on behalf of the Fire Authority.

997. **2014/15 SERVICE BENCHMARKING**

- 997.1 Members considered a report of the Chief Fire Officer & Chief Executive that presented Fire Statistics for 2014/15 and benchmarking information. (Copy in Minute Book).
- 997.2 The report provided the results of an Annual Benchmarking Report that compared the Service to its peers, in particular, the thirteen fire and rescue services that made up Family Group 2. The report also provided a number of comparisons of ESFRS against demographic information and current performance measures, as well as organisational resourcing. The report contained information of the position as at 31 March 2015, other than the attendance time data which was for 2013/14.
- 997.3 The Chair commented on a very well set-out and comprehensive presentation of the statistics against the Family Group, and Councillor Peltzer Dunn was encouraged by the fall in the number of shifts lost to sickness. He asked whether additional information could be included to provide a more complete picture, such as age and vulnerability profiles with accidental dwelling fires; and the ethnic make-up of the population, when looking at the ethnic make-up of staff. Mrs. Ridley agreed to see what could be provided for next year's report.
- 997.4 Councillor Wincott asked whether actual numbers could be included to give a clearer picture of, for instance, the numbers of ethnic minority and female firefighters, and Councillor Barnes suggested including an arrow to show the direction of travel of the various comparators.
- 997.5 Councillor Barnes also suggested having a briefing at a future meeting of how the 'Family Group' is selected, and what characteristics are used – ACO Rolph agreed to bring this to a future Members' Seminar.
- 997.6 Councillor Howson was pleased to note the decrease in the number of false alarms, and asked whether the list of offenders was still maintained – Mrs. Ridley would look into this. He was also pleased to note that ESFRS ranked first for average response times, and wished to see this promoted as a positive outcome.
- 997.7 **RESOLVED** – That the report be noted.

998. **2015/16 2ND QUARTER PERFORMANCE RESULTS**

- 998.1 Members considered a report of the Chief Fire Officer & Chief Executive that presented a summary of service performance information for the second quarter of 2015/16. (Copy in Minute Book).
- 998.2 Councillor Wincott had been contacted by a number of firefighters concerned about the response to AFAs being reduced to one pump, following the Policy & Resources Panel's decision in May 2014. There had been a number of occasions when the first pump had arrived, to find 'persons reported', and then having to wait 8-10 minutes for a second pump.

- 998.3 The CFO&CE confirmed that firefighters had raised some concerns with him, and that officers were monitoring this on a monthly basis. He had also had discussions with the FBU regarding the development of a protocol to identify high risk premises, which would attract an increased pre-determined attendance to an AFA – this would take some time to develop and he would bring a report back to a future meeting of the Fire Authority. A report on a specific incident was due to come before Members at the February meeting of the Fire Authority.
- 998.4 Councillor Scott was encouraged by the CFO&CE's response and Councillor Barnes suggested that such discussions might be more appropriately directed to Members of the Policy & Resources Panel; the CFO&CE noted Councillor Barnes comments.
- 998.5 Councillor Peltzer Dunn asked Mrs. Ridley to look into the way arrows are shown on the tables showing national quartile positions – these do not show up against the blue background.
- 998.6 **RESOLVED** – That
- (i) the 2015/16 performance results for Quarter 2 as set out in the report and complementary separate Appendix A be noted; and
 - (ii) the move to reporting average response times until the new standards are set with public and staff consultation through the Authority's next Integrated Risk Management Plan be approved.
999. **CORPORATE PROJECTS AND PROGRAMMES QUARTER 2 PROGRESS REPORT**
- 999.1 Members considered a report of the Chief Fire Officer & Chief Executive that set out project and programme progress against key milestones, identified slippage, and reported compliance with project governance in terms of documentation. (Copy in Minute Book).
- 999.2 Members particularly noted:
- IMD Transformation is 61 days behind schedule.
 - SCC is waiting for confirmation of next steps.
 - HQ Move milestones have been added after the initial Programme Board meeting on 02/10/2015; programme management arrangements are behind schedule.
 - Newhaven Fire Station build progressing on schedule and on budget.
- 999.3 The ACFO explained that the IMD Transformation Project had slipped following changes to the Public Contracts Regulations earlier in the year. He confirmed that no additional costs had been incurred through the utilisation of a third party.
- 999.4 He also confirmed that Newhaven Fire Station was due to be 'handed over' week commencing 9 November 2015, with a ceremony on 7 December, and occupation earmarked for the first week in January 2016.
- 999.5 **RESOLVED** – That the report be noted.

001. **2015/16 2nd QUARTER CORPORATE RISK REGISTER REVIEW**

001.1 Members considered a report of the Treasurer that reported on the latest quarterly review of Corporate Risk and sought agreement of the outcomes. (Copy in Minute Book).

001.2 **RESOLVED** – That the latest Corporate Risk Register be approved.

002. **EMERGENCY SERVICES MOBILE COMMUNICATIONS PROGRAMME (ESMCP) UPDATE**

002.1 Members considered a report of the Chief Fire Officer & Chief Executive that provided an update following the initiation of the Emergency Services Mobile Communications Programme (ESMCP) and future steps. (Copy in Minute Book).

002.2 **RESOLVED** – That the update report following the initiation of the ESMCP project that will replace the FireLink contract be noted.

003. **IMD TRANSFORMATION PROGRAMME PROGRESS**

003.1 Members considered a report of the Chief Fire Officer & Chief Executive that advised the Panel of the progress of the IMD Transformation Programme. (Copy in Minute Book).

003.2 **RESOLVED** – That the progress of the programme be noted.

004. **EXCLUSION OF THE PRESS AND PUBLIC**

004.1 **RESOLVED** – That item number 005 be exempt under paragraphs 2 & 3 of Schedule 12A to the Local Government Act 1972 as amended by the Local Government (Access to Information) (Variation) Order 2006 and accordingly is not open for public inspection on the grounds that it includes (para 2) information which is likely to reveal the identity of an individual and (para 3) information relating to the financial or business affairs of any particular person (including the authority holding that information).

The Panel meeting concluded at 10:45 hours

Signed

Chair

Dated this

day of

2016

EAST SUSSEX FIRE AUTHORITY

Panel Scrutiny & Audit

Date 4 February 2016

Title of Report 2015/16 Third Quarter Performance Results

By Chief Fire Officer

Lead Officer Liz Ridley – Head of Performance Management

Background Papers None

Appendices Appendix A – Quarter 3 Performance Report 2015/16
Appendix B – Exceptions Report

Implications

CORPORATE RISK	✓	LEGAL	
ENVIRONMENTAL		POLICY	
FINANCIAL		POLITICAL	
HEALTH & SAFETY		OTHER (please specify)	
HUMAN RESOURCES		CORE BRIEF	
EQUALITY IMPACT ASSESSMENT			

PURPOSE OF REPORT To present the third quarter performance results 2015/16.

EXECUTIVE SUMMARY This report provides the Panel with a summary of service performance information for the third quarter of 2015/16. It contains the revised measurement for response standards as agreed by the Panel in November 2015. This is an interim measure pending a comprehensive review of attendance standards to be undertaken in this year’s IRMP.

RECOMMENDATION The Panel is asked to:

- i. note the 2015/16 performance results for Quarter 3 as set out in the report and complementary separate Appendix A; and
- ii. consider the information included within the exception report set out as Appendix B.

1. **INTRODUCTION**

- 1.1 This report contains the Quarter 3 performance indicator results for 2015/16, compared with the results for the same quarter in 2014/15 and provides projected year end results against the agreed targets.
- 1.2 The report provides a simple Red, Amber, Green traffic light system. Where particular indicators show two or more reds, explanations are required from the relevant responsible officers to form the exception report.

2. **MAIN ISSUES**

- 2.1 Performance for the third quarter of 2015/16 has shown an improved performance over quarter 1, as only two indicators now have two or more reds:
- (i) Number of Inspections of high risk premises completed.
 - (ii) Number of working days/shifts lost due to sickness absence for all staff.
- 2.2 The Fire Authority has five priority areas:
- (i) Percentage of HSVs to the vulnerable members of our community
 - (ii) Number of accidental fires in dwellings
 - (iii) Percentage of accidental dwelling fires confined to room of origin
 - (iv) Percentage reduction of automatic fire alarms
 - (v) Number of working days/shifts lost due to sickness absence for all staff
- 2.3 In terms of the overall performance for 2015/16, of the Fire Authority's priority areas, two are on target and two are within 10% of the target and one is currently projected to miss the target. The performance outcome summary is set out in Appendix A attached as a separate document.

3. **RECOMMENDATION**

- 3.1 Note the 2015/16 performance results for Quarter 3 as set out in the report and complementary separate Appendix A with the Exceptions report set out in Appendix B.



East Sussex Fire & Rescue Service





East Sussex Fire & Rescue Service Performance Results Quarter 3 2015/16

JANUARY 2016

Strategic Aim 1 - To deliver quality services within available resources

1.1 Prevent loss of life and injuries in our communities

Indicator No.	How will we measure performance?	2014/15 Q3 result	National Quartile Position 2014/15	2015/16 Quarter 3	2015/16 Projected year end result	Target	Target met	Direction of travel from 2014/15 result
1 Priority	% of Home Safety Visits to vulnerable people	93.0%	This is an ESFRS indicator only, no National data is available for comparison	90.6%	90.9%	90.0%	Yes	Declined
7	Home Safety Visits	2,277		2,425	9,839	10,000	No	Improved
36	% of fires in dwellings with no smoke alarm	19.5%	This is an ESFRS indicator only, no National data is available for comparison	18.9%	18.3%	32.0%	Yes	Improved
9	Number of deaths in primary fires	1		0	2	Aspirational Target zero fire deaths		Improved
11	Deaths in Accidental Dwelling Fires	0		0	0	Aspirational Target zero fire deaths		Same
10	Number of injuries in primary fires	7		5	42	52	Yes	Improved
12	Injuries in Accidental Dwelling Fires	6		4	31	37	Yes	Improved
2 Priority	No of accidental dwelling fires	165		151	561	534	No	Improved

Indicator No.	How will we measure performance?	2014/15 Q3 result	National Quartile Position 2014/15	2015/16 Quarter 3	2015/16 Projected year end	Target	Target met	Direction of travel from 2014/15 result
8	Number of primary fires	295		292	1,222	1,244	Yes	Improved
13a	Deliberate primary fires not in vehicles	27		33	157	159	Yes	Declined
13b	Deliberate primary fires in vehicles	19		16	76	141	Yes	Improved
14	Deliberate secondary fires	73		65	392	500	Yes	Improved
4a Priority	A reduction of automatic fire alarms (AFA) from the base year result of 2009/10	-34.9%	This is an ESFRS indicator only, no National data is available for comparison	-36.9%	-40.4%	-32.0%	Yes	Improved
4b	% of AFA calls challenged by ESFRS	22.4%	This is an ESFRS indicator only, no National data is available for comparison	11.8%	10.6%	Monitor only	Monitor only	Declined
4c	% of AFA calls turned back by ESFRS	6.1%	This is an ESFRS indicator only, no National data is available for comparison	8.9%	8.8%	Monitor only	Monitor only	Improved
4d	% of AFA mobilised calls to properties covered by the RRO that were classified as a primary fire	2.4%	This is an ESFRS indicator only, no National data is available for comparison	1.9%	2.4%	Monitor only	Monitor only	Improved

1.2 Protect our communities against economic, property or heritage loss

Indicator No.	How will we measure performance?	2014/15 Q3 result	National Quartile Position 2014/15	2015/16 Quarter 3	2015/16 Projected year end result	Target	Target met	Direction of travel from 2014/15 result
15	No of fires in non-domestic properties	45		41	166	176	Yes	Improved
16	Inspections of high risk premises completed	59		44	222	480	No	Declined

1.3 Respond effectively and safely to incidents with appropriate planned resources

Indicator No.	How will we measure performance?	2014/15 Q3 result	National Quartile Position 2014/15	2015/16 Quarter 3	2015/16 Projected year end result	Target	Target met	Direction of travel from 2014/15 result
3 Priority	% of accidental dwelling fires confined to room of origin	93.9%	This is an ESFRS indicator only, no National data is available for comparison	92.1%	93.6%	94.0%	No	Declined
22	% of incidents attended within 20 minutes	98.4%	This is an ESFRS indicator only, no National data is available for comparison	98.8%	99.0%	95.0%	Yes	Improved

Average first attending appliance response times

First arriving appliance	2013/14 England Average	2013/14 FG2 Average	Q3 2014/15	Q3 2015/16	Q1 to Q3 2015/16
Primary fires	8.4	9.6	7.7 (288)	7.4 (293)	7.9 (900)
Dwellings	7.4	8.6	6.9 (171)	7.0 (159)	7.5 (453)
with any casualty or rescue	7.1	N/a	7.2 (6)	6.6 (4)	6.6 (21)
without any casualty or rescue	7.4	N/a	6.9 (165)	7.2 (154)	7.5 (432)
Other Buildings	8.1	9.4	7.9 (58)	6.9 (58)	7.7 (185)
Other Residential	7.6	N/a	7.2 (16)	7.5 (10)	7.3 (39)
Non-Residential	8.2	N/a	8.2 (42)	6.8 (48)	7.8 (146)
Road Vehicles	9.3	10.2	9.0 (48)	8.3 (56)	8.6 (192)
Other (Outdoor Primary)	10.3	11.3	9.9 (11)	7.9 (20)	10.0 (70)
RTC Persons trapped / enhanced	N/a	N/a	9.8 (77)	9.4 (73)	9.9 (218)

Bracketed numbers are the total number of attended incidents for each category

Average second attending appliance response times

Second arriving appliance	2013/14 England Average	2013/14 FG2 Average	Q3 2014/15	Q3 2015/16	Q1 to Q3 2015/16
Primary fires	N/a	N/a	10.4 (205)	9.8 (185)	10.9 (564)
Dwellings	N/a	N/a	9.3(151)	9.5 (131)	10.0 (371)
with any casualty or rescue	N/a	N/a	11.3 (5)	10.5 (4)	12.3 (21)
without any casualty or rescue	N/a	N/a	9.2 (146)	9.5 (127)	9.9 (350)
Other Buildings	N/a	N/a	13.2 (49)	9.9 (42)	10.7 (132)
Other Residential	N/a	N/a	9.7 (14)	10.2 (7)	10.8 (33)
Non-Residential	N/a	N/a	14.6 (35)	9.9 (35)	10.7 (99)
Road Vehicles	N/a	N/a	15.4 (5)	12.9 (9)	15.8 (34)
Other (Outdoor Primary)	N/a	N/a	N/a (N/a)	13.3 (3)	19.1 (27)
RTC Persons trapped / enhanced	N/a	N/a	12.9 (60)	12.9 (62)	13.5 (207)

Bracketed numbers are the total number of attended incidents for each category

1.4 Deliver cost effective services, which focus on community risk and customer needs at a price the local community can afford and within available resources

Indicator No.	How will we measure performance?	2014/15 Q3 result	National Quartile Position 2014/15	2015/16 Quarter 3	2015/16 Projected year end result	Target	Target met	Direction of travel from 2014/15 result
6	Expenditure per head of the population	£46.90	This is an ESFRS indicator only, no National data is available for comparison	N/a	Annual	£45.42	Annual	Annual
34	To achieve a 3.5% reduction in CO2 emissions against 2010/11	N/a	This is an ESFRS indicator only, no National data is available for comparison	N/a	Annual	14.00%	Annual	Annual
35	Percentage of people satisfied with the service received during the 999 call	98%	This is an ESFRS indicator only, no National data is available for comparison	N/a	Annual	Monitor only	Annual	Annual
36	Percentage of people satisfied with the service received at the scene of the incident	99%	This is an ESFRS indicator only, no National data is available for comparison	N/a	Annual	Monitor only	Annual	Annual

Strategic Aim 2 - Ensure a competent, diverse, safe and valued workforce

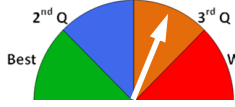



2.1 Embed and embrace equality and diversity principles in all that we do

Indicator No.	How will we measure performance?	2014/15 Q3 result	National Quartile Position 2014/15	2015/16 Quarter 3	2015/16 Projected year end result	Target	Target met	Direction of travel from 2014/15 result
24	Achievement of excellence in the Equality Standard in Local	Excellent	This is an ESFRS indicator only, no National data is available for comparison	Excellent	Annual	Monitor only	Annual	Annual
26	Retained (RDS) female firefighters as new entrants	8.7%	This is an ESFRS indicator only, no National data is available for comparison	N/a	Annual	15.0%	Annual	Annual
27	Minority ethnic staff as new entrants to the FRS	3.6%	This is an ESFRS indicator only, no National data is available for comparison	N/a	Annual	3.5%	Annual	Annual
28	Disabled employees as new entrants to the FRS	3.6%	This is an ESFRS indicator only, no National data is available for comparison	N/a	Annual	5.0%	Annual	Annual

2.2 Attract and retain high calibre and committed staff, and help them develop professional skills and competence to meet our business needs

Indicator No.	How will we measure performance?	2014/15 Q3 result	National Quartile Position 2014/15	2015/16 Quarter 3	2015/16 Projected year end result	Target	Target met	Direction of travel from 2014/15 result
To be developed	Number of operational staff completing development programmes		This is an ESFRS indicator only, no National data is available for comparison	To be developed in 2015/16	To be developed in 2015/16	To be developed in 2015/16	To be developed in 2015/16	To be developed in 2015/16

2.3 Maintain and improve the standards of health, safety and welfare of our staff and provide a safe and secure workplace

Indicator No.	How will we measure performance?	2014/15 Q3 result	National Quartile Position 2014/15	2015/16 Quarter 3	2015/16 Projected year end result	Target	Target met	Direction of travel from 2014/15 result
5 Priority	The number of working days/shifts lost due to sickness	2.1	This is an ESFRS indicator only, no National data is available for comparison	2.6	9.1	7.5	No	Declined
29	Number of RIDDOR incidents	2		0	2	12	Yes	Improved
30	Number of injuries sustained by Wholetime and Retained firefighters during operational activities	24		Annual	Annual	Monitor only	Annual	Annual
31	Total number of injuries sustained by Wholetime and RDS firefighters during training activities	28		Annual	Annual	Monitor only	Annual	Annual
30	Number of workplace reported accidents / injuries	58		18	108	124	Yes	Improved

EXCEPTIONS REPORT – QUARTER 3 2015/16

Indicator	Commentary	Actions to be taken
<p>16. Inspections of high risk premises completed</p>	<p>44 Audits were completed in quarter 3 2015/16, this gives a projected year end result of 222 against a target of 480.</p>	<p>Staff have recently been recruited into permanent positions following resignations from the Service.</p> <p>Training courses are scheduled for new staff to enable more inspections to be undertaken.</p> <p>Business engagement activities have continued – these activities reach far greater numbers of people than individual inspections.</p> <p>This year has been the first year in the development of the ‘fire risk assessment’ training by using business rates funding, as agreed by the Authority. This supports business compliance with fire safety law.</p>
<p>5. The number of working days/shifts lost due to sickness</p>	<p>2.6 shifts were lost per employee in quarter 3, this gives a projected year end result of 9.1 days/shifts lost due to sickness. This is over the target of 7.5 shifts lost per employee</p>	<p>66% of this sickness relates to long term sick and 20% to short term sickness.</p> <p>SCC sickness has doubled from quarter 1 and is now reporting 3.8 shifts lost per employee in quarter 3.</p> <p>WT sickness has also shown an increase in the last quarter, with 2.8 shifts lost per employee when it had been steady at just over 2 days per employee for the previous 6 months.</p> <p>Support staff sickness remains at a constant 1.8.</p> <p>These will continue to be monitored for the remainder of the year.</p>

EAST SUSSEX FIRE authority

Panel Scrutiny & Audit
Date 4 February 2016
Title of Report 2015/16 Third Quarter Corporate Projects and Programmes Progress Report
By Chief Fire Officer
Lead Officer Liz Ridley, Head of Performance Management

Background Papers None

Appendices Appendix A is the report

Implications

CORPORATE RISK		LEGAL	
ENVIRONMENTAL		POLICY	
FINANCIAL		POLITICAL	
HEALTH & SAFETY		OTHER (please specify)	
HUMAN RESOURCES		CORE BRIEF	
EQUALITY IMPACT ASSESSMENT			

PURPOSE OF REPORT To report project and programme progress against key milestones, identify slippage, report compliance with project governance in terms of documentation.

EXECUTIVE SUMMARY Key points from the project portfolio are that the Sussex Control Centre project is awaiting strategic actions by the Chief Fire Officer. IMD Transformation has reached the competitive dialogue stage and is proceeding well. Newhaven Fire Station is complete and was handed over on 7 December 2015. ESCC Project Services have been engaged to manage the Service HQ relocation programme. The Emergency Services Mobile Communications Programme (ESMCP) is proceeding to the procurement stage. Finally, Firewatch stage 1 will finish in the first quarter of 2016/17 and phase 2 project documentation is being prepared.

RECOMMENDATION The Panel is asked to note the report.

EAST SUSSEX FIRE AUTHORITY

Panel Scrutiny & Audit
Date 4 February 2016
Title of Report 2015/16 Third Quarter Corporate Risk Register Review
By Treasurer
Lead Officer Daryll Luxford – Corporate Risk Support Manager

Background Papers 2015/16 Second Quarter Corporate Risk Register Review – 15 October 2015

Appendices Appendix A Corporate Risk and RAID Log Scoring Matrix
 Appendix B Corporate Risk and Project Scoring Identifiers
 Appendix C Risk Management Mitigation Plans
 Appendix D Corporate Project Risk Report

Implications

CORPORATE RISK	√	LEGAL	
ENVIRONMENTAL		POLICY	
FINANCIAL		POLITICAL	
HEALTH & SAFETY		OTHER (please specify)	
HUMAN RESOURCES		CORE BRIEF	
EQUALITY IMPACT ASSESSMENT			

PURPOSE OF REPORT To report on the latest quarterly review of Corporate Risk and agree outcomes

EXECUTIVE SUMMARY

1. The Authority has in place established procedures for ensuring that risks are identified and managed for all corporate projects. All high risks identified in the Project RAID (Risks, Assumptions, Issues, and Dependencies) logs are now collated and reported to Corporate Management Team (CMT) to allow any themes to be identified and risks to be escalated to the corporate risk log as necessary. At Appendix D is a summary of the Project RAID Log for all risks scored 9 or above, these are assessed against a 4x4 scoring matrix as shown in Appendix A with the score identifiers at Appendix B. Reviews of corporate risks take place on a quarterly basis. The latest series of meetings with Corporate Risk Owners was carried out during December 2015 to update risk management action plans and review the position of each risk as shown at Appendix C.

2. Following the escalation of risk score in the last quarter for Risk Plan No. 4 – Leadership – short-term mitigations have been implemented; however, the risk scores will not reduce until the longer term arrangements are approved and in place. The post-mitigation scores for Risk 1 – Financial, and Risk 5 – Community have been reduced in the light of the impact of mitigation measures and changes in national circumstances. CMT is also considering the emerging risks in relation to the Level 4 Accident Investigation and will take a view on escalation once further information from a number of associated reviews is received.
3. Following the audit of Risk Management Arrangements, of which ESFRS received substantial assurance, the Treasurer and the Corporate Risk Manager have implemented departmental risks with departmental heads to identify potential risks that may require escalation to the Risk Register, subject to mitigation plans and potential impacts on the achievement of organisational and departmental objectives. The revised Corporate Risk Policy is currently out for consultation prior to sign off.
4. All project plans (Appendix D) are being reviewed to ensure the pre-scoring and post-scores are appropriate. This will identify whether the mitigation plans are adequate, appropriate and reduce risk to the individual project.

RECOMMENDATION

The Panel is asked to approve the latest Corporate Risk Register.

CORPORATE RISK REGISTER

Scoring for all Corporate Risk and Project RAID Log

Appendix A

Impact / Likelihood		Moderate (1)	Significant (2)	Serious (3)	Critical (4)
Certain/High (4)		Tolerable (4)	Moderate (8)	Substantial (12)	Intolerable (16)
Very Likely (3)		Tolerable (3)	Moderate (6)	Moderate (9)	Substantial (12)
Low (2)		Tolerable (2)	Tolerable (4)	Moderate (6)	Moderate (8)
Unlikely (1)		Tolerable (1)	Tolerable (2)	Tolerable (3)	Moderate (4)

Corporate Risk and Project Raid Log Scoring Matrix

Appendix B

Impact		Moderate	Significant	Serious	Critical
Score		1	2	3	4
Financial		≤ £10000	≤ £100,000	≤ £500,000	≤ £1 m +
Reputation		Damage limitation	Adverse Publicity	Poor Reputation	Complete loss of public confidence
Service Delivery		would not restrict or service delivery	Could restrict service delivery or restrict delivery of an ESFRS Aim	Could stop service delivery or unable to delivery an ESFRS Aim	Would affect service delivery to our communities

Likelihood		Unlikely	Low	Very Likely	Certain/High
Score		1	2	3	4
Frequency		One case reported in the past 5 years, may re-occur if only limited control measures are not applied and continued monitoring. (0-24% probability)	One or two cases in the past 2 - 5 years or may re occur if not all control measures are not applied within the next 6 months and continue to monitor. (25-49% probability)	One or two cases in past 2 years or expected to happen if controls measures are slow being applied, and failure to monitor progress. (50-74% probability)	One or more cases in past 2 years. Failure to take immediate action could impact on service delivery or safety of personnel/ community. (75-100% probability)

APPENDIX C

Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
1 Financial	4	Failure to identify and deliver savings to meet the expected funding gap to 2020/21 and the uncertainty of funding both from year to year and beyond 2015/16 resulting in an unclear service delivery model for the future.	4	4	16	<ol style="list-style-type: none"> 1) Draft 2016/17 budget proposals approved by P&R Panel Jan 2016. Updated MTFP forecasts balanced budget achievable to 2019/20 if agreed savings delivered and assuming CT rise of 1.94% each year. Risks / uncertainties to funding include: government plans for 100% BR devolution; impact of economic performance on 4 year settlement offer; impact of move to Home Office; local devolution proposals; and potential impact of changes to PCCs powers. 2) Delivery of savings monitored on a monthly basis ensuring savings delivery now subject to closer monitoring and latest position built into revised MTFP. Now updated to take account of Riding at Minimum proposals approved by Dec CFA and impact on locality managers proposals. 3) Opportunities for further collaboration with public sector partners being examined especially around support services and through Emergency Services Collaboration Project. Savings also anticipated from management restructure, HQ relocation, IMD Transformation and remaining Changing the Service, Shaping our Future reviews. 4) Ongoing work through ESFOA seeking to maximise income from council tax and non-domestic rates. 5) Business Rate Pool approved by CLG. 6) Improvement and Efficiency reserve established to fund transformation initiatives. Budget proposals for 2016/17 include £2m funding for IMD Transformation. 7) Work started on the review of the IRMP will link service provision to the public, to the MTFP. 	3	2	6 (Moderate) (9) (Moderate) Last Qtr	CFO	Treasurer

Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
2 Technology	4	<p>1) Sustained Technological failure, and</p> <p>2) Failure to deliver organisational change as a result of a lack of a robust and effective modern ICT infrastructure and a lack of supported infrastructure and systems through fewer and less skilled staff.</p> <p>3) Succession planning as a result of restructure and retirement of ACFO leads to insufficient strategic support and direction for project.</p>	4	4	16	<p>1) Business critical work to renew or replace risk critical equipment has been identified and costed. CMT have been apprised of these tasks and have supported the work (Jan 2014 CMT meeting), the critical works will be completed throughout the current financial year, with the intention of minimising disruption and inaccessibility of core systems whilst this work proceeds.</p> <p>2) The current ICT staffing model will be sustained but new posts will be added - Operations Engineer posts (x5). Two new engineers will commence June and July 2015 – with the key purpose of supporting the existing infrastructure.</p> <p>3) The IMD Transformation Programme has been presented to CMT with an emphasis on fixing before transforming in order to sustain current business critical systems and 'ready' them for fitness prior to any 3rd party transition. Importantly, the 'fixing' is dependent upon the availability of skilled staff or 3rd parties to deliver The Dept have initiated a 'freeze' on new developments to ensure the infrastructure is stable and prepared for future procurement of services – implementation of new services/suppliers is now expected Summer 2016.</p> <p>4) Handover to new Senior Responsible Officer pre December 2015 if not handled smoothly can cause disruption to project</p> <p>5) Requirements must change, due to new ways of working/HQ move strategic review</p> <p>6) The task-sourcing and instatement of new skilled staff remains the highest priority to mitigate this risk.</p> <p>7) Restructure proposals to consider risk – report to CFA at its December meeting.</p>	4	3	12 (Substantial)	DCFO	HoIMD

Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
3 Partnership	4	1) Sussex Control Centre does not deliver effective mobilisation service or planned savings 2) Failure to deliver full specification for MOBs leading to contractual issues.	4	4	16	<p><u>Pre go live:</u></p> <ol style="list-style-type: none"> 1) To ensure the project is progressing in alignment with specification and to avoid further delays there is a weekly attendance by project team members to the Remsdaq factory. Also weekly telecom with the MD/CFO. 2) The Factory Acceptance Test (FAT) is now preceded by a joint pre-FAT program. 3) The Site and User Acceptance Tests will ensure specification and functionality tested after installation at Haywards Heath. 4) Any milestone payments are not triggered until pass of acceptance tests and these are staged. 5) Other FRSs have contract with Remsdaq therefore market pressure to deliver. 6) SCC 'go live' will be subject to sign off by both Senior Users, and the 'switchover' operation will be agreed and validated by 3rd party. 7) Regular monthly progress and financial reporting to SCC Implementation Board, both Management Teams and the Executive Governance Board. 8) Savings target for 2015/16 revised to reflect delays in implementation. 9) Additional resources made available due to extension of the go live date to ensure interim service is maintained in accordance with Section 16, these costs are shared. 10) The project has been subjected to scrutiny facilitated by 3rd party – the highlight report and findings are now progressed and monitored by the SCC Implementation Board. <p><u>Post go live:</u></p> <ol style="list-style-type: none"> 1. Section 16 and SCC Concept of Operations provide the strategic operational framework for the SCC, including arrangements under which call handling, mobilisation and related functions are discharged. 2. SCC Operational Governance Board, made up of reps of both Services, meets monthly to ensure that the Joint Control is effective, efficient and resilient and that any issues and areas of concern are reported and acted upon. 	4	3	12 (Substantial)	DCFO	SCC Project Manager until go live / DRR post go live

						<p>3. ESFRS specific operational and performance matters considered at the monthly Response & Resilience management team meetings.</p> <p>4. SCC staffing is a significant concern. Current establishment levels and working arrangements are challenging for staff and managers. There is higher sickness levels and potential increase in attrition. Current arrangements are not considered sustainable in the long term. The CFO will lead on the review of current arrangements commencing 19th November 2015</p>					
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Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
4 Leadership	4	Failure to effectively lead/manage the Service through a period of significant change as a result of lack of corporate capacity, management competences and poor staff engagement	4	3	12	<p>1) ACO and Head of L&OD to review leadership development to meet evolving and emerging needs. POD strategy being reviewed Q2 2015/16. Completed</p> <p>2) ACO and Communications and Marketing Manager to review staff communication strategy to promote effective organisational communications. Work planned for 3rd & 4th qtr of 14/15 POD BP. Completed and will be reviewed 2016.</p> <p>3) Members are to consider proposals for a Talent Management Scheme to address and support mitigations on future risks and succession planning. Now part of the restructure programme</p> <p>4) Restructure to address a number of strategic roles and management structures including non-recruitment to DCFO role(secondment of a temporary DCFO in place) and retirement of ACFO</p> <p>5) The restructure was presented to Members at CFA December 2015 proposing April to June implementation. Upon the conclusion of individual consultations Quarter 4 of this mitigation plan will be further updated</p>	3	4 (3)	12 (Substantial) (9) (Moderate) Last Qtr	CFO	ACO

5 Community	1	<p>1) Longer term Industrial Action (IA) could impact on the ability to deliver services, impact on the relationships with the workforce and has the potential for reputational damage</p> <p>2) Short to medium term impact of Action Short of Strike (ASOS)</p>	3	3	9	<p>1) Constant Review of Business Continuity and Industrial Action Contingency Plans.</p> <p>2) Maintain consultation and negotiation with trade unions.</p> <p>3) Maintain effective communications.</p> <p>4) Monitor impact on service delivery.</p> <p>5) CFA advised of progress through regular updates and impact of changing FBU strategy on contingency plans and resilience.</p> <p>6) Impact on training delivery, L&OD have provided additional resource to manage training plans and expected backlog during and following IA/ASOS periods.</p> <p>7) Additional communications resource provided to reassure the community and inform staff.</p> <p>8) The FBU has made a legal challenge to the FPS 2015 on the grounds of potential discrimination – the NJC is managing the claim on behalf of all FRS on a shared cost basis and has signed up Bevan Brittan LLP to act on our collective behalf.</p> <p>9) FBU have advised no industrial action to take place under this dispute until at least June 2017. BC plans to be reviewed in early 2016.</p>	2	2	4 (Tolerable) (6) (Moderate) Last Qtr	DCFO	CMT
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Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
6 Communication	3	Key stakeholders including the public, members, employees and partners are insufficiently informed about/engaged in the difficult choices the Authority faces.	3	3	9	<p>1) ACO, Head of Performance Management and Communications and Marketing Manager are working with the Chairman, Vice Chair and the Fire Authority to engage with local communities, local authority partners, agencies and other organisations. Item for consideration at Members Seminar Oct 2015.</p> <p>2) Utilise a variety of media to support communication strategy. New communications strategy prepared. Completed.</p> <p>3) The actions for risk No.6 have been mitigated, a review of the risk plan will occur during quarter 3.</p>	2	2	4 (Moderate)	ACO	Head of Performance /Communications & Marketing Manager
7 Resource	6	Failure to maintain staff morale, motivation and attitudes will adversely impact on service delivery/ performance and the ability to successfully deliver service transformation/ ESFRS change programme.	4	3	12	<p>1) Support middle and senior managers to ensure regular meetings and engagement with staff and to review feedback from managers.</p> <p>2) Ensure staff representative bodies are engaged with and informed of emerging issues.</p> <p>3) Continue to develop communication opportunities including where appropriate, social media and new Communications Strategy.</p> <p>4) Staff briefings and engagement for SHQ relocation proposals.</p> <p>5) Trade Union and management briefings in place October 2015 to discuss outcome of local consultations on savings proposals – proposals accepted by trade unions and implementation being considered for April 2016.</p>	3	3	6 (Moderate)	CFO	ACO/ Head of L&OD

Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
8 Leadership/ Resource	4,5,7	ESFRS Relocation of Headquarters from Eastbourne to Sussex Police Headquarters at Lewes. Risks include; 1) Implementation project failure – risks not identified, mitigations do not align with risk. 2) Technology not delivered at time of move. 3) Ineffective communications – partners, suppliers and stakeholders not aware. 4) Security risks (loss of equipment, lack of access) caused by physical move. 5) Necessary changes to working practices result in financial and reputational risks. 6) Access and employee facilities not implemented (DSEs, disability, etc). 7) Staffing risk – greater than expected number of key workers leave at short notice. 8) Change in strategic direction (caused by changes in PCC, CFA direction, strategic opportunities with other partners).	3	3	9	1) CFA Members and SHQ staff have been fully sighted on the reasons (opportunity and cost) for this relocation and the likely changes in regard to Agile, Technology and dispersal locations. 2) Funding for the one off costs of the project both revenue and capital has been agreed 3) Following 18 June 2015 an implementation plan was agreed by CMT and this will mitigate many of the risks, such as security, travel plan, technology, communications and timescales. 4) The IMD Transformation Programme is key to delivering the right technology to enable new ways of working at the SHQ and the dispersal sites – this is being led by the ACFO who is also leading the Relocation project – thereby minimising any risk of misalignment. During 4 th Quarter review the IMD transformation final tender process will identify if outsource program may cause misalignment 5) An Agile Project Manager will be employed for a fixed term to ensure the Service meets the timescales and implementation challenges in regard Agile and flexible working. 6) The CFA and PCC are committed to this collaboration project.	3	2	6 (Moderate)	DCFO	SPSO (Strategic Program Support Officer)

EAST SUSSEX FIRE AUTHORITY

Panel Scrutiny & Audit

Date 4 February 2016

Title of Report Aerial Rescue Pump – Implementation review and future crewing arrangements

By Chief Fire Officer

Lead Officer Mark O'Brien, Director of Response & Resilience

Background Papers

- 1) Policy & Resources Panel Report, Agenda Item No. 740, "Review of Aerial Provision at Eastbourne Fire Station", 26 May 2011
- 2) Policy & Resources Panel Report, Agenda Item No. 996, "Day Crewed Plus Duty System", 5 November 2015

Appendices None

Implications

CORPORATE RISK	✓	LEGAL	
ENVIRONMENTAL		POLICY	✓
FINANCIAL	✓	POLITICAL	✓
HEALTH & SAFETY		OTHER (please specify)	
HUMAN RESOURCES		CORE BRIEF	
EQUALITY IMPACT ASSESSMENT			

PURPOSE OF REPORT This report is submitted to present the outcomes of the planned implementation review following the introduction of the Aerial Rescue Pump at Eastbourne Community Fire Station.

In addition, the report identifies the modified future crewing arrangements for the vehicle, required as a result of the Fire Authority's decision to accept a range of savings proposals as an alternative to Day Crewed Plus.

EXECUTIVE SUMMARY At the Policy & Resources Panel meeting in May 2011, the Panel approved the provision of an aerial capability in the form of an Aerial Rescue Platform (ARP) at Eastbourne Community Fire Station.

It was agreed as part of the original implementation plan that a 12 month review would be conducted into the operational impacts of the introduction of the appliance.

The review has been completed and a number of findings identified around operational performance, attendance times, appliance availability and staff feedback. Whilst the review did consider matters in relation to how the appliance is crewed going forward, subsequent events now mean that alternative crewing levels will need to be implemented.

As part of the saving proposals negotiated with the Fire Brigades Union, and now agreed by the Fire Authority, the estimate of potential savings included reducing the establishment across Eastbourne.

Such a move will inevitably mean changing the expectations of the ARP's capabilities for simultaneous operations. This is a move away from the user specification previously agreed and which formed the basis of the original business case approved by the Fire Authority.

RECOMMENDATIONS The Panel is asked to note:

- i the report and the key findings from the implementation review; and
- ii the amended crewing arrangements to come into effect in 24 months' time, and the resultant changes to operational capability.

1. **INTRODUCTION**

- 1.1 At the Policy & Resources Panel meeting in May 2011 (agenda item 740, copy in minute book), Members considered a report by the Chief Fire Officer & Chief Executive which advised on the outcomes of a technical and operational review of options for the provision of aerial capability at Eastbourne Community Fire Station.
- 1.2 Members were informed that a review had been undertaken to consider future requirements for aerial capability to respond to known risks in Eastbourne, and to also examine the full range of options, including not replacing the appliance, dual crewing, use of retained duty system personnel and re-locating an aerial appliance. The review also looked at the impact upon operational resilience and working at height capability Service-wide.
- 1.3 Members were informed of the operational demand on such vehicles, the financial implications and those consultations that had been carried out. The various options available were explained to Members, including the advantages and disadvantages of each.
- 1.4 One of the options considered was the provision of a combined Aerial Rescue Platform (ARP). This option offered a cost effective aerial solution which, although presenting a high initial cost of £780k (fully kitted – 2011 prices), did result in an overall reduction in cost when compared to the combined costs of a pumping appliance and replacement aerial ladder platform (£235k and £580k fully kitted costs respectively – 2011 prices). In addition, the business case identified that such a vehicle would provide dual functionality and an effective aerial response to cover Eastbourne and provide resilience to our operational response across the Service area. In addition, the introduction of an ARP would also result in the reduction on the wholetime-uniformed establishment of 4 firefighters at Eastbourne Community Fire Station.
- 1.5 The Panel approved the provision of an aerial capability in the form of a combined Aerial Rescue Platform (ARP) at Eastbourne Community Fire Station and noted the reduction in establishment by four firefighter posts as a result of the amended appliance crewing arrangements.
- 1.6 The ARP formally went “on the run” on 1 April 2014. As part of the introduction of the appliance, it was agreed that a 12 month review would be scheduled within the implementation plan.
- 1.7 That review has now been completed. It has focussed on a number of key areas including attendance times, incident activity, hazard/safety reports, appliance reliability and staff issues. In addition, the review was benchmarked against 2013/14 performance data where applicable. The key findings from the review are contained within section 2 of this report.
- 1.8 The review also considered a number of options in terms of how the vehicle might be crewed in the most appropriate way, and in relation to whether the vehicle should respond as either the “first” appliance or the “second” appliance at Eastbourne.

- 1.9 However, the Scrutiny & Audit Panel is asked to note the impact of the consultations which have taken place with the Fire Brigades Union (FBU) in respect of savings proposals proposed as an alternative to introducing day crewed plus. The final heads of agreement, including the financial analysis as reported to the Policy & Resources Panel on 5 November and the full Fire Authority on 10 December 2015 in relation to alternative savings proposals, was based on applying minimum crewing levels across the Service, including at Eastbourne.
- 1.10 As a result, alternative crewing arrangements for the vehicle will need to be implemented in due course.
- 1.11 The paper presents the issues for the Scrutiny & Audit Panel to consider.

2. **IMPLEMENTATION REVIEW OUTCOMES**

2.1 **Attendance times**

- 2.2 The only significant change in attendance times to life threatening incidents within the Borough over the 12 months (1 April 2014 – 31 March 2015) was in relation to the 2nd appliance attendance which dropped significantly (from 78% down to 61%). This is due to the second appliance arriving being the ARP more often. There has also been a marginal increase in performance of the 1st appliance attendance times.

Attendance times (benchmarked against 2013/14 performance)	2013/14	2014/15
% LT1 calls attended within 8 mins by 1st appliance	86%	91%
% LT1 calls attended within 8 mins by 2nd appliance	78%	61%
% LT1 calls attended within 13 mins by 1st appliance	98%	97%
% LT1 calls attended within 13 mins by 2nd appliance	96%	96%

- 2.3 In terms of actual times over the year, the average attendance time for the designated first (“Echo”) appliance to life threatening incidents increased from 6 minutes 22 seconds to 7 minutes 5 seconds.

	Extended Rescue Pump Eastbourne	Aerial Rescue Pump
Average attendance time	06:22	07:05

2.4 One of the factors influencing the increased attendance times is the average turnout time (the time from alerting the station to the appliance booking mobile). This showed an increase over the 12 months primarily due to the length of time taken for the ARP to transition from training to operational mode i.e. if the ARP is being used for training it can take a period up to 5 minutes to re-house the boom package prior to the appliance booking mobile to an incident.

	Extended Rescue Pump Eastbourne	Aerial Rescue Pump
Average turnout time	01:44	02:07

2.5 The issue is further influenced by the new AFA policy (introduced with effect from 1 July 2015 following the decision taken by the Fire Authority) as, currently, the ARP attends those calls on its own and this also has more of an impact on the 1st appliance attendance time.

2.6 **Performance at incidents**

2.7 There were two incidents during the review period where the Incident Commander had to request Aerial Ladder Platform (ALP) assistance where the ARP boom package (that is the appliance’s aerial capability) has been unable to support the operational plan; both were due to outreach issues. A recommendation stemming from this finding will be to maintain a range of aerial options across the Service in order to maintain existing operational capabilities. This is in line with the findings from the “Review of Aerial Provision” carried out by the Service’s Transformation Team as part of the IRMP Phase 3 Reviews and as previously reported to Members at the IRMP Forum.

2.8 **Hazard Reports**

2.9 There is an outstanding issue in relation to one aspect of the safety mechanisms fitted to the vehicle which is currently limiting the use of the ARP for simultaneous offensive firefighting (internal firefighting) and aerial operations. This is as a result of concern on the part of staff around the design of the safety controls (kill switches) which, when activated, remove all power to the pump.

2.10 In line with the original user specification and the business case, the vehicle is capable of supporting both firefighting and aerial operations simultaneously. However, the additional operational safety requirements currently in place as a result of this issue (and as agreed between staff, the FBU, Health & Safety and local managers) mean that when committing firefighters to internal (compartment) firefighting, crews are prevented from doing both activities offensively due to the risk of activating the boom package safety cut out switch which will also remove all power from the pump and cause a loss of water at the branch.

2.11 The boom manufacturer (Bronto) has confirmed that it will not sanction any alterations to the safety mechanisms fitted to the boom package. Primarily, this is to safeguard against a catastrophic event such as the vehicle tipping over in the event of a multiple failure of the operating controls and safety cut-outs. It remains a requirement that the kill switch in the cage MUST stop the vehicle engine when activated. Therefore, operation of this kill switch will also remove all power to the pump.

- 2.12 This matter, therefore, remains the subject of further assessment and investigations by officers.
- 2.13 **Appliance reliability**
- 2.14 Based on the vehicle maintenance record, between June 2013 (when the appliance was commissioned) and May 2015, there have been 114 recorded defects.
- 2.15 During the period 1 April 2014 to 31 March 2015, there were 65 defects registered by station staff.
- 2.16 For the same period, Engineering have provided the following table to enable comparison between the number of defects recorded on the TRACE system for the ARP against those for a standard appliance and separate aerial appliance.

VEHICLE	REGISTRATION	CALL OUTS (NUMBER)	CALL OUT (HOURS)	DEFECTS (NUMBER)	DEFECTS (HOURS)
ARP	GX13ECD	8	13.5	57	166.75
HASTINGS PUMP	GX12AHE	3	5.75	28	58
HASTINGS ALP	GX04BMY	3	12.5	28	83.5

- 2.17 The discrepancy between the number of defects recorded on TRACE and those reported by station staff may be explained by a number of defects being recorded under a single job reference number in the TRACE system.
- 2.18 **Staff issues and feedback**
- 2.19 Following a request from staff, an ergonomic assessment was carried out on the seating arrangements in the rear crew cab of the ARP. The ergonomic assessment has identified some issues in relation to the rear cab seating and individuals of specific build (long legs) where there is a lack of support for the upper leg in the seat.
- 2.20 There are also lesser issues around the leg room available for the two crew members who sit in the middle of the cab where the engine casing reduces the available space.
- 2.21 Staff have also been asked to provide overall feedback on the vehicle and its functionality. They have expressed the view that they are still developing their understanding of how best to deploy the vehicle operationally in order to achieve the best outcomes.
- 2.22 The consensus across the watches, therefore, is that the preferred option is to maintain the ARP crewing at 6 and the second appliance crewing at 4 with the ARP remaining as the primary (Echo) appliance. The staff believe that an engineering solution should be possible to overcome the issues with the safety control / kill switch configuration which would, therefore, facilitate (in the view of the staff) dual offensive operations. This crewing arrangement retains the status quo and is predicated on the watch establishment figures remaining unchanged.

3. **FUTURE CREWING ARRANGEMENTS**

- 3.1 Retaining the existing crewing arrangements (which is supported by staff), would see the ARP remaining as the primary appliance, crewed with 6 staff, and the second 'whiskey' appliance remaining with a crew of 4. This would result in the watch establishment figure remaining at 14 (equal to 56 staff across the station).
- 3.2 This option would be predicated on the recognition that the vehicle is capable of simultaneous offensive operations in line with the original user specification and business case, and is crewed accordingly.
- 3.3 There are two further advantages of retaining the current crewing arrangements and vehicle designation.
- 3.4 Firstly, the availability of RDS stations surrounding Eastbourne, traditionally viewed as providing back-up in the event of a large or protracted incident in the town, is now limited, particularly during the day. Pevensey, Hailsham and (to a lesser extent) Seaford, struggle with day time availability and this will, therefore, mean that back-up for those larger incidents will take longer to arrive. Maintaining 10 firefighters across the two Eastbourne appliances, therefore, provides a degree of resilience in those cases where additional resources are required.
- 3.5 Additionally, maintaining the current crewing arrangements at Eastbourne will enable the Service to maintain a degree of capacity and flexibility in the overall Service crewing model. As other stations drop crewing to minimum numbers, retaining higher number across Eastbourne will form part of the crewing resilience options now being considered by the Director of Response & Resilience and others.
- 3.6 However, the risk with maintaining the current arrangements is principally in relation to the impact on the savings proposals now agreed by the Fire Authority (10 December 2015 Day Crewed Plus Duty System – report of the Chief Fire Officer, agenda item 889)
- 3.7 The agreement reached with the FBU in relation to alternative savings proposals as a result of the inability to reach a negotiated agreement on the introduction of Day Crewed Plus was predicated on reducing the overall operational establishment by 28 posts. This included 12 posts to be taken out of Eastbourne (3 from each watch; reducing watch strength from 14 to 11; total station establishment reduced from 56 to 44).

- 3.8 This element of the savings proposals contributes £462,000 to the overall savings of £1,080,000. It is essential, therefore, that the establishment changes at Eastbourne are delivered. However, it is proposed to retain current crewing arrangements, and associated operational capabilities, for a period of 2 years, utilising Eastbourne to support establishment reductions elsewhere. This still ensures that the savings are delivered in line with the Medium Term Financial Plan.
- 3.9 During this period, Eastbourne establishment levels would be maintained at the current levels through “filling up” Eastbourne to enable reductions in establishment elsewhere. This would maintain current watch strength and only reduce when all other stations were down to the new establishment levels as agreed by the Fire Authority.
- 3.10 This option maintains the savings proposals. However, whilst this would ensure the agreed savings could be delivered, the Fire Authority would need to accept that, in the longer term, the ARP could no longer then be used for dual functions simultaneously. The final crewing model would only support the ARP being used as a standard fire appliance or as an aerial appliance. It would provide an either or capability.
- 3.11 However, the Fire Authority can be assured that other advantages associated with the ARP remain relevant.
- 3.12 The flexibility afforded by the ARP as a replacement to the traditional ALP incorporates many of the advantages of the conventional aerial appliance with those of the water tender, thus creating a significantly more flexible and manoeuvrable vehicle without adding to the operating costs of the Service.
- 3.13 There are a number of consequential safety benefits when deploying the ARP appliance over a conventional pumping appliance to incidents which do not require an aerial appliance, as there is the added advantage of deploying the working platform over the deployment of a conventional ladder to enable prolonged working at height without the need to mobilise an additional resource to the incident ground.
- 3.14 Whilst the findings from the original review into aerial provision in Eastbourne carried out in 2010 determined that the Service could operate effectively with only two appliances, the professional view of the Chief Fire Officer is that the provision of a third appliance with an aerial capability in the form of the ARP offers an effective aerial response to cover Eastbourne and provides resilience to our operational response across the Service area.
- 3.15 The ARP option still presents a cost effective aerial solution which, although presenting a high initial cost, does result in an overall reduction in cost when compared to the combined costs of a pumping appliance and replacement ALP.

4. **IMPACT ASSESSMENTS**

4.1 **Political**

- 4.2 As noted, the Fire Authority agreed to purchase the ARP in 2011. The business case presented to the Authority was predicated on the ability of the vehicle to be utilised for dual offensive firefighting and aerial operations simultaneously.

4.3 Providing new crewing arrangements to support agreed establishment reductions which only allow for single use of the appliance may present a political and reputational risk for members of the Authority.

4.4 **Financial**

4.5 As identified in 3.9, the potential reduction of the establishment at Eastbourne to minimum crewing levels contributes £462,000 to the overall identified savings of £1,080,000. Therefore, if maintaining the current crewing arrangements and subsequent establishment figures at Eastbourne indefinitely, alternative savings to that value would be required to be found.

EAST SUSSEX FIRE AUTHORITY

Panel: Scrutiny & Audit
Date: 4 February 2016
Title of Report: Counter Fraud Project Outcomes
By: Chief Fire Officer, Treasurer and Deputy Monitoring Officer
Lead Officer: Duncan Savage, Treasurer

Background Papers None

Appendices A. Fraud Risk Assessment and Counter Fraud Action Plan
 B. Fraud Awareness Survey Report Recommendations cross referenced to Counter Fraud Action Plan

Implications

CORPORATE RISK	✓	LEGAL	✓
ENVIRONMENTAL		POLICY	
FINANCIAL	✓	POLITICAL	
HEALTH & SAFETY	✓	OTHER (please specify)	
HUMAN RESOURCES		CORE BRIEF	
EQUALITY IMPACT ASSESSMENT			

PURPOSE OF REPORT To provide an update to the Panel on the outcomes from the review of the Authority's Counter Fraud approach.

EXECUTIVE SUMMARY

1. Following the Internal Audit IMD investigation and the subsequent independent HR Review the Authority commissioned a review of its Counter Fraud approach, covering four main areas:
 - A review of existing counter fraud policies
 - A survey of employees to understand their level of fraud awareness
 - A detailed fraud risk assessment
 - Development of a Counter Fraud Action Plan

2. Separate policies have now been produced covering:
 - Whistle-blowing
 - Anti-Fraud, Bribery and Corruption
 - Anti-Money Laundering

These have been reviewed in the light of best practice by counter fraud specialists from our Internal Audit team and external experts Mazars. Following staff consultation the policies were signed off by the Representative Bodies on 12 November and will be launched in February 2016. The HR team is also reviewing the Code of Conduct for Employees which completes this important suite of employee policies.

3. The Fraud Awareness Survey was carried out during June and July 2015 and a report setting out the results is included within the confidential part of this agenda (Item No. 018). All of the actions resulting from this report have been subsumed within the fraud risk assessment and the Counter Fraud Action Plan (see Appendix B which cross references the Fraud Awareness Survey recommendations).

4. Work on the fraud risk assessment is now complete and a copy of the Fraud Risk Perception report from Mazars, along with a Counter Fraud Action Plan (CFAP), is included at Appendix A. The fraud risk assessment and the CFAP both reflect the findings of the Fraud Awareness Survey. The CFAP has been prepared in consultation with the ACO (POD), the Deputy Monitoring Officer and the Head of HR and approved by the Corporate Management Team.

5. Following approval by the Scrutiny & Audit Panel, the Assistant Chief Officer and the Treasurer will meet with the representative bodies to inform them of the Counter Fraud Action Plan and discuss the planned roll-out of mandatory e-learning.

RECOMMENDATION: It is recommended that the Panel:

- i. notes the outcomes from the Counter Fraud Review; and
- ii. approves the Counter Fraud Action Plan.

Recommendations

4.1. Although the scope of our work did not include an assessment of the adequacy of the controls in place from a counter fraud perspective, the following table lists the recommendations arising from our work.

	Recommendation	Priority	Management Response	Responsible Officer and Deadline
1	ESFRS should aim to ensure that all staff are aware of its fraud and corruption reporting facilities, and as such should consider publicising the appropriate reporting channels to all staff. In raising awareness, ESFRS should be confident that staff are aware of the procedure for reporting all suspicions of fraud, corruption and theft. ESFRS should also consider publicising the details of any successful prosecutions, including sanctions and redress.	2	Agreed – R1 of the Fraud Risk Perception Report	
2	ESFRS should consider undertaking a review of the reporting channels and the ESFRS Whistleblowing Policy. Following this, a reminder should be sent to all staff making them aware where they can find the relevant policies and details of the protection offered to them under PIDA.	2	Agreed – the Whistleblowing Policy has been revised and approved following consultation. See also R1 of the Fraud Risk Perception Report	
3	ESFRS should endeavour to investigate and take clear and decisive action when instances of suspected fraud, corruption and theft are made. The results of investigations should be communicated to the whistleblower to encourage further referrals.	2	Agreed – see R2 & R3 of the Fraud Risk Perception Report	
4	ESFRS should consider undertaking a review of its policies and procedures surrounding some of the key risk areas identified in Appendix 1 - Question 17.	2	Agreed – key risk areas identified and addressed in R4-7 of the Fraud Risk Perception Report	

	Recommendation	Priority	Management Response	Responsible Officer and Deadline
5	ESFRS should consider carrying out a review of the responses identified in Appendix 1 - Question 18 and whether the suggestions are appropriate to follow up and implement.	2	Agreed – focus will be on the priorities set out in the recommendations made in the Fraud Risk Perception Report	
6	ESFRS should ensure that the officer responsible for investigating whistleblowing disclosures makes staff aware of the actions taken and, in appropriate cases, the methods for making complaints about the manner in which disclosures are investigated.	2	Agreed – this will be covered in the responses to R2 & R3 of the Fraud Risk Perception Report	