

EAST SUSSEX FIRE AND RESCUE SERVICE

Meeting	Fire Authority
Date	3 September 2020
Title of Report	2019/20 Annual Performance Outcome Report
By	Liz Ridley, Assistant Director – Planning & Improvement
Lead Officer	Sharon Milner, Planning & Intelligence Manager Marcus Whiting, Performance Analyst
Lead Member	Cllr John Barnes

Background Papers	None
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Appendices	Appendix A – Annual performance outcome report 2019/20 Appendix B- Plain English indicator definitions
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Implications

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

PURPOSE OF REPORT	To present the annual performance results for 2019/20.
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EXECUTIVE SUMMARY	This report provides the Fire Authority with details of East Sussex Fire Rescue Service's performance for the period April – March 2019/20. Fourteen top level indicators improved or met the target set in 2019/20 (70%) and six indicators declined.
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RECOMMENDATION	The Fire Authority is asked to: i. consider the performance results and progress towards achieving the Service's purpose and commitments; and ii. consider the performance results and remedial actions that have been taken to address areas of under performance in the Fire Authority's priority areas.
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1 INTRODUCTION

- 1.1 This report summarises the 2019/20 performance outcomes for East Sussex Fire and Rescue Service. The report aims to provide a single view of information which allows Elected Members, Auditors and members of the public to hold the Service's senior managers and staff to account in terms of the provision and performance of their Fire & Rescue Service for 2019/20.
- 1.2 The report provides a comparison against last year's performance, whether or not the target was achieved, where one has been set, and the direction of travel from the previous year for example, improved, stayed the same or declined.
- 1.3 East Sussex Fire & Rescue Service results are compared against the results for Fire and Rescue Services in the rest of England on a scale of best to worst performance based on the 2018/19 national data sets which are the latest available.
- 1.4 The report highlights an increase on last year's performance as 70% of indicators improved or met the target as opposed to 42% the previous year.

2 MAIN ISSUES

- 2.1 In 2017/18 the Scrutiny & Audit Panel set seven priority areas for the Service to concentrate on. This report provides detailed commentary against those areas. Additional commentary is also provided for other areas of interest.

The Fire Authority priorities areas are:

1. Reducing accidental dwelling fires
2. Confining the fire to the room of origin
3. Reducing attendance at false alarm calls
4. Increasing the number of home safety visits to vulnerable members of our community
5. Reducing sickness
6. Numbers of home safety visits
7. Increasing inspections in high risk premises

2.2 Reducing accidental dwelling fires

- 2.2.1 Accidental dwelling fires have been a priority area for the Service for a number of years. Accidental dwelling fires have reduced by 48% from 2000/01 overall and have plateaued in recent years. However in 2019/20 ESFRS recorded the lowest number of accidental dwelling fires ever with 453. This is an 11% reduction against the previous year when 509 were reported. 66% of the accidental dwelling fires occurred in the kitchen, with cooking appliances responsible for 243 (82%) of these.
- 2.2.2 The accidental dwelling fire reduction group continues to proactively engage with our communities and there have been a number of social media campaigns, the latest being 'Look while you cook'. This on-line campaign was

run by our in-house Communications team and attracted more than 500 entrants into a competition and resulting in 2,367 web page hits.

- 2.2.3 From the campaign 438 entrants have now actively signed up to our newsletter, which will keep them up-to-date on any important key safety messages, alongside Service news.

2.3 Responding quickly to a fire to stop it spreading from the room it started in

- 2.3.1 There was an increase in performance in comparison to last year, with 90.6% of fires confined to the room of origin in 2018/19 compared to 92.9% in 2019/20 we consistently perform well in this area. In real numbers this means that out of 453 fires attended we contained 421 to the room of origin.

2.4 Reducing false alarm calls, especially in properties with a previous history of this

- 2.4.1 46.5% (4,711) of our total incidents in 2019/20 were to false alarm calls, of these 33.3% (3,372) were from automatic fire detector systems. An unwanted fire alarm signal is where an automatic fire alarm (AFA) system activates and initiates a response from the fire service and on attendance it is found to be a false alarm. A call challenge policy is in place with responsible premise owners being asked to confirm the need for an attendance. We are undertaking more targeted work to ensure that we continually review and improve efficiencies across the Service. A demand management review is ongoing as part of the Fire Authority's proposed Integrated Risk Management Plan, which will be agreed at the September 2020 Fire Authority meeting. By reducing the demand on our Service for calls that are not deemed appropriate to attend, we will free up our resources to undertake meaningful community safety work that will make people safer in our communities.

- 2.4.2 As detailed in the AFA Service position statement, work is underway to separate out unwanted fire alarm calls from those that are considered near misses as each require a very different response. For example, to treat a near miss as an unwanted fire alarm call would be wholly inappropriate as we would miss an opportunity for engagement with service prevention resources that could prevent a further more serious incident in the future.

2.5 Increasing the number of home safety visits that we complete with the more vulnerable members of our community

- 2.5.1 We delivered 92.2% of our home safety visits to vulnerable people within our community 2019/20 which is a slight increase on last year (91.2%). This means that out of 10,098 visits 9,308 were to vulnerable people in the community which compares to 10,076 in the previous year.

2.6 Reducing the number of absences of our employees due to sickness.

2.6.1 Sickness absence is another priority area for the service and performance has declined from the previous year, with 10.0 shifts lost against 8.8 in 2018/19. Of the 10.0 shifts lost per employee at the end of 2019/20, 5.0 of these are due to long term sickness, 2.4 due to medium term sickness and 2.5 due to short term sickness. By the end of 2019/20 Wholetime had lost 10.8 shifts per employee, Control 7.3 shifts per employee and support staff 8.8.

2.7 Number of Home Safety Visits

2.7.1 Throughout 2019/20 10,098 Home safety visits were undertaken. This is a decline against 2018/19 when 11,085 were reported. As we become more sophisticated in targeting those most vulnerable, we are finding that more and more visits are requiring two staff to attend and therefore the same level of performance that has been determined would deliver 12,000 visits now results in 10,000; based on a S&W advisor/team delivering 84 visits a month.

2.7.2 The year end result would have been slightly higher had the level of work not been impacted by the home working rulings that the government introduced in relation to the COVID-19 response. Obviously this has meant that teams have not been able to access people's homes in the same way and particularly not vulnerable, possibly shielding members of our community. Ways of working are now being put in place for telephone HSVs where possible from the community safety advisors and station crews.

2.8 Inspections of high risk premises completed

2.8.1 This priority area was introduced in 2017/18 and deemed critically important following the Grenfell Tower fire on 14 June 2017. At the end of 2019/20 449 Inspections of high risk premises had been reported by the business safety inspection team and a further 388 business safety audits had been completed by the operational crews, this is an overall increase of 28% on the previous year when 581 high risk and 114 operational business audits were undertaken.

2.8.2 The Service is reviewing the current national Risk Based Inspection program and has introduced Business Safety checks/audits by operational personnel. There are a number of areas that will help improve performance in this area including:

- The upgrade of the Customer Relationship Management database to help staff record audits quickly and effectively and it will be developed to deliver a qualitative risk based inspection program. The project will deliver a mobile digital platform to support efficiencies in the audit process.
- Competency-based Business Safety training has now been given to operational staff
- We will continue to identify and inspect premises at higher risk of fire
- We will provide all premises where the Fire Safety Order applies with a qualitative relative risk rating
- There are plans to use the inspection program to collect enhanced firefighter risk information

2.9 Other commentary

2.9.1 Number of RIDDOR incidents

2.9.2 The majority of the RIDDOR notifications to HSE are for incapacitation over 7 days. There has been an increase of 20% when compared to the previous year (12 against 10). The majority of RIDDORs reported this year were over 7 day injuries for manual handling injuries. It is hoped that, after all the work that has been done this year to address casualty handling and the change in the PDA to assisting with plus size casualties, that we will see a decline in this area next year.

2.9.3 Compliments and complaints

2.9.4 The annual outcome report contains a summary of the complaints received against the Service. Effective complaint management is an important element of maintaining the Service's reputation. Complaints are also a valuable tool in helping to understand resident's expectations of service delivery and should be an essential part in identifying improvements across the organisation.

2.9.5 Complaints received are formally recorded by the Service Complaints Officer (SCO) and, as far as possible, dealt with immediately. Where this is not possible, complaints are:

- acknowledged within three working days
- responded to within one month of the complaint being received by ESFRS
- kept under review and the complainant kept informed of progress or any reasons which are causing a delay
- monitored by the SCO to identify problem areas.

2.9.6 There were 30 complaints received in 2019/20, the same number as in the previous year. Of the complaints, four were considered justified, six partially justified and three unjustified. A further 12 were logged for recording purposes another three were listed as being unsubstantiated, one was recorded as out of time of the policy and there is one that is on-going.

2.9.7 Upon analysis, poor driving standards and employee conduct were the highest causes for complaints in 2019/20. In order to raise awareness and address issues of poor driving standards complaints are now considered by the Operational Assurance Group chaired by the Assistant Director of Operational Support and Resilience.

2.9.8 During the year we received 194 "thank you" letters from various members of the public as opposed to 214 received last year. Compliments are circulated to staff through the service brief on a weekly basis and cover all aspects of our service provision including home safety visits, incidents attended, school visits, education events etc.

	2017/18	2018/19	2019/20
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Complaints received	26	30	30
Compliments received	127	214	194

2.8 The performance outcome summary is set out in Appendix A attached as a separate document.

2.9 A list of useful definitions is attached at Appendix B.