Public Document Pack

LANCASHIRE COMBINED FIRE AUTHORITY

PERFORMANCE COMMITTEE

Thursday, 16 March 2017 in Main Conference Room, Service Headquarters, Fulwood commencing at 10.00 am.

IF YOU HAVE ANY QUERIES REGARDING THE AGENDA PAPERS OR REQUIRE ANY FURTHER INFORMATION PLEASE INITIALLY CONTACT DIANE BROOKS ON TELEPHONE NUMBER PRESTON (01772) 866720 AND SHE WILL BE PLEASED TO ASSIST.

AGENDA

PART 1 (open to press and public)

Chairman's Announcement – Openness of Local Government Bodies Regulations 2014
Any persons present at the meeting may photograph, film or record the proceedings, during the public part of the agenda. Any member of the press and public who objects to being photographed, filmed or recorded should let it be known to the Chairman who will then instruct that those persons are not photographed, filmed or recorded.

1.   APOLOGIES FOR ABSENCE

2.   DISCLOSURE OF PECUNIARY AND NON-PECUNIARY INTERESTS

       Members are asked to consider any pecuniary/non-pecuniary interests they may have to disclose to the meeting in relation to matters under consideration on the agenda.

3.   MINUTES OF PREVIOUS MEETING (Pages 1 - 12)

4.   PERFORMANCE MANAGEMENT INFORMATION FOR 3RD QUARTER 2016/17 (Pages 13 - 52)

5.   CALL CHALLENGE POLICY REPORT

       (Oral report)

6.   DATE OF NEXT MEETING

       The next scheduled meeting of the Committee has been agreed for 10:00 hours on Thursday 8 June 2017 in the Main Conference Room, at Lancashire Fire & Rescue Service Headquarters, Fulwood.

       Further meetings are: scheduled for 14 September 2017 and 30 November 2017.

7.   URGENT BUSINESS

An item of business may only be considered under this heading where, by reason of special circumstances to be recorded in the Minutes, the Chairman of the meeting is of the opinion that the item should be considered as a matter of urgency. Wherever possible, the Clerk should be given advance warning of any member's intention to raise a matter under this heading.

8.   EXCLUSION OF PRESS AND PUBLIC

The Authority is asked to consider whether, under Section 100A(4) of the Local Government Act 1972, they consider that the public should be excluded from the meeting during consideration of the following items of business on the grounds that there would be a likely disclosure of exempt information as defined in the appropriate paragraph of Part 1 of Schedule 12A to the Local Government Act 1972, indicated under the heading to the item.

LANCASHIRE COMBINED FIRE AUTHORITY
PERFORMANCE COMMITTEE

Thursday, 1 December 2016, at 10.00 am in the Main Conference Room, Service Headquarters, Fulwood.

MINUTES

PRESENT:

Councillors

S Holgate (Chairman)
T Aldridge
C Crompton
F De Molfetta
M Khan (Vice-Chair)
D O'Toole
M Perks
D Smith
D Stansfield
V Taylor

In accordance with the resolution of the predecessor Performance Review Committee at its inaugural meeting on the 30th July 2004 (Minute No. 1/04 refers), representatives of the LFRS, the Unions and Audit had been invited to attend all Performance Committee meetings to participate in discussion and debate.

Officers

J Johnston, Deputy Chief Fire Officer (LFRS)
D Russel, Assistant Chief Fire Officer (LFRS)
S Fryer, Head of Service Delivery, East (LFRS)
B Norman, Head of Service Delivery, North (LFRS)
D Brooks, Principal Member Services Officer (LFRS)
J Harney, Assistant Member Services Officer (LFRS)

In attendance

K Wilkie, Fire Brigades Union

6/16   APOLOGIES FOR ABSENCE

Apologies were received from County Councillor P Britcliffe, Councillor Z Khan and County Councillor N Penney.

7/16   DISCLOSURE OF PECUNIARY AND NON-PECUNIARY INTERESTS

None received.

8/16   MINUTES OF THE LAST MEETING HELD ON 15 SEPTEMBER 2016

RESOLVED:- That the minutes of the meeting held on 15 September 2016 be confirmed and signed by the Chairman.

9/16   PERFORMANCE MANAGEMENT INFORMATION FOR QUARTER 2 - 2016/17

The Assistant Chief Fire Officer advised Members that this was the 2nd quarterly report for 2016/17 as detailed in the Risk Management Plan 2013-2017.

The report showed there were 4 negative KPI Exception Reports. An exception report was provided which detailed the reasons for the exception, analysis of the issue and actions being taken to improve performance.

Members focussed on the indicators where an exception report was presented and examined each indicator in turn as follows:-

2.2.1   Critical Special Service Response – 1st Fire Engine Attendance
This indicator measured how long it took the first fire engine to respond to critical non-fire incidents such as road traffic collisions. The response standard for the first fire engine attending a critical special call (including call handling time KPI 2.2.2) is 13 minutes. We have achieved our standard when the time between the TOC and TIA of the first fire engine arriving at the incident is less than13 minutes.

Standard: To be met on 91.5% of occasions
Quarter 2 results 86.54% achieved against a target of 91.5%, previous year quarter 2, 91.65%, an worsening of 5.11%.
This is a negative exception report due to critical Special Service 1st pump response being below the standard. Overall quarter 2 pass rate was 86.54%, with a cumulative pass rate of 86.73% which is outside of the 91.5% standard.
Exception report provided.

The Assistant Chief Officer advised during this reporting period each month of quarter 2 recorded a below standard pass rate, through there was an improvement towards the end of quarter 2. However, this could be attributed to a very low activity count for the month of September. The increasing call handling time was one factor that could affect the worsening performance with quarter 2 recording a longer median call handling time than any quarter of the previous 12 months (KPI 2.2.2).

The Officer in Charge was now required to provide a narrative for the failure to respond to the incident within standard. Analysis of 22 narratives implied that the travel distance involved, along with incidents which occurred outside of their own station area, were the main reasons for longer travel times.

Failure to book in attendance or the Mobile Data Terminal (MDT) failing to acknowledge an attendance, still accounted for a small number of failure reasons. This had been the subject of continued focus by the Heads of Service Delivery who were implementing and monitoring performance measures to remedy deficiencies and drive improvement.

It was hoped that on-going initiatives to address these issues would bring the cumulative standard back to within the 2% tolerance.

2.2.2 Critical Special Service Response – Call Handling
This indicator measured the time from the 'Time of Call' to the 'Time of Send' of the first appliance mobilised. A median was used to calculate the average time for the month. This excluded duplicate calls for the same incident.

The median call handling time for quarter 2 was 129 seconds, previous year quarter 2 was 107 seconds; a worsening of 22 seconds. The previous quarter (April to June 2016) recorded 126 seconds.

Standard: Within 90 seconds

This was a negative exception report due to performance being below standard, with the improvement in call handling recorded during the previous year showing a worsening during quarter 1 and quarter 2 of 2016/17. **Exception report provided.**

The Assistant Chief Fire Officer advised Members that the long term trend of improved performance had not continued in the 2016/17 year, with quarter 1 and 2 of this year showing a worsening performance similar to the initial transition to North West Fire Control (NWFC). This average was for all emergency calls, however, this KPI looked at a subset of calls which tended to be more challenging in terms of identifying an addressable location. This naturally occurred when either the caller was in an unfamiliar location or when the incident occurred away from a landmark or road junction.

It was hoped that further analysis of call handling data, in conjunction with NWFC, would help highlight where the issues were and would aid targeting of areas of improvement.

Members were concerned that this indicator continued to be below standard without a detailed explanation or the assurance of an action plan from North West Fire Control (NWFC).

The Assistant Chief Fire Officer confirmed that the Chief Fire Officer was taking a report to the next NWFC Lead Principal Officers meeting on 13 December 2016 which included consideration of how the governance arrangements could be improved.

The Chairman, County Councillor Holgate proposed and it was unanimously agreed that NWFC would be invited to attend the next meeting of the Committee to provide detailed information in relation to this indicator. Members also wished the Assistant Chief Fire Officer to provide comparative data from Fire and Rescue Services across the country.

County Councillor Frank De Molfetta advised that the next meeting of the NWFC Directors was scheduled for 14 December 2016 where he agreed to also raise this item for discussion.

2.4   Fire Engine Availability – Retained Duty System
       This indicator measured the availability of fire engines that are crewed by the
       retained duty system. It is measured as the percentage of time a fire engine is
       available to respond compared to the total time in the period.

       The percentage of time that RDS crewed engines were available for quarter 2
       was 88.28%, previous year quarter 2 was 88.40%, a worsening of 0.12%.

       The previous quarter 2 (April to June 2016) recorded 91.90%.
       Annual Standard: Above 95%

       This is a negative exception report due to the cumulative RDS availability for
       the three months of quarter 2 being below the standard and outside of the 2
       per cent tolerance.
       Exception report provided.

       The Assistant Chief Fire Officer advised Members quarter 2 had seen a
       worsening in RDS appliance availability. The number of RDS personnel who
       had been successful in obtaining a wholetime position had had an impact on
       available RDS hours. This was due to leaving the RDS service, being able to
       commit fewer hours due to W/T commitment or being unavailable due to
       development (W/T recruit course). An ageing workforce, the loss of staff due
       to retirement had also had an impact on the ability to fully crew an appliance
       and a number of retirements had occurred over the last quarter. The Service
       had also seen a number of resignations.

       Members discussed the advantages and disadvantages of the impact on the
       RDS appliance availability from the number of RDS personnel who had
       become wholetime firefighters; with 2 opposing views expressed. The
       Assistant Chief Fire Officer reassured Members that there were 3 RDS
       recruitment campaigns per year; the last campaign was oversubscribed and
       provided 72 new entrants. It was also noted that continued work by the
       Retained Duty System Recruitment and Improvement Group would be
       responsible for progressing areas for improvement in order to strengthen and
       support the Retained Duty System. It was hoped that ongoing initiatives to
       address these issues would bring the standard back to within the 2%
       tolerance.

       The Chairman, CC Holgate reminded Members that whilst there were issues
       and challenges to run the RDS; LFRS still had very high attendance
       percentages than other Fire and Rescue Services across the country.

4.2.1 Staff Absence – Excluding Retained Duty System
       This indicator measured the cumulative number of shifts (days) lost due to
       sickness for all wholetime, day crewing plus, day crewing and support staff
       divided by the total number of staff.
       Annual Standard: Not more than 5 shifts lost
       Cumulative total number of monthly shifts lost 2.9
       Quarter 2 results indicate the number of shifts lost through absence per
       employee being above the Service target for 3 months during quarter 2.
       Exception report provided.

The Assistant Chief Fire Officer advised Members during that quarter 2 there was a number of long term absences cases which had span over 3 months. The new Absence Management Policy was introduced on 1 September 2016 and had been rolled out to managers with training provided by the Human Resources Department.

Members then examined each indicator in turn as follows:-

KPI 1 – Preventing and Protecting

1.1   Risk Map Score
        This indicator measured the risk level in each neighbourhood (Super Output Area) determined using fire activity over the previous three fiscal years along with a range of demographic data.

        The County risk map score is updated annually, before the end of the first quarter. An improvement is shown by a year on year decreasing 'score' value. Score for 2013-2016 – 32,990, previous year score 33,268.
        No exception report required.

1.2   Overall Activity
        This indicator measured the number of incidents that the Service attended with one or more pumping appliances.

        Quarter 2 activity 4,020, previous year quarter 2 activity 3,976, an increase of 1.11%.
        Total number of incidents 2016/17 – Year to Date, 7,900

        The Assistant Chief Fire Officer advised that the graph showed activities were starting to increase. Included within this KPI was a new incident type of 'Gaining Entry'. This was where LFRS had attended on behalf of the North West Ambulance Service. During quarter 2 we attended on 126 occasions. However, it was noted there had been a significant increase in automatic fire alarms with 600 in the first 6 months of the year. Reasons for this were being pursued.   The Assistant Chief Fire Officer confirmed that the calls were not for University premises but for other types of building. The Authority had a robust policy of call challenge which required Alarm Receiving Centres to undertake a number of actions before calling the Service; work would be done to remind the Centres of this protocol.

        County Councillor O'Toole queried whether the Alarm Receiving Centres, who did charge for their services should be charged by the Authority when they did not challenge the calls they received in line with the policy. The Assistant Chief Fire Officer agreed to bring a detailed report to a further meeting.

        No exception report required.

1.3   Accidental Dwelling Fires
        This indicator reported the number of primary fires where a dwelling had been affected and the cause of the fire had been recorded as 'Accidental' or 'Not known'.

Quarter 2 activity 182, previous year quarter 2 activity 232, a decrease of 22%.
Total number of Accidental Dwelling Fires – Year to Date, 383

The Assistant Chief Fire Officer advised that over the last 6 months there had been the lowest numbers of accidental dwelling fires reported in the last decade. Members recognised the efforts of firefighters and staff who work in prevention in reducing the number of fires in people's homes to this level.

No exception report required.

1.3.1 Accidental Dwelling Fires – Extent of Damage
This indicator reported the number of primary fires where a dwelling had been affected and the cause of the fire had been recorded as 'Accidental' or 'Not known' presented as a percentage extent of fire and heat damage.

This indicator shows the total number of Accidental Dwelling Fires where damage is limited to the item first ignited and limited to the room of origin (it excludes incidents that are limited to heat/smoke damage only).

Cumulative Accidental Dwelling Fires activity, 130: -
28% limited to item 1st ignited
56% limited to room of origin
12% limited to floor of origin
4% spread beyond floor of origin
No exception report required.

1.3.2 Accidental Dwelling Fires – Number of Incidents where occupants have received a Home Fire Safety Check
This indicator reported the number of primary fires where a dwelling had been affected and the cause of fire had been recorded as 'Accidental' or 'Not known' by the extent of the fire and heat damage. The Home Fire Safety Check must be completed within 12 months of the fire occurring.

	2016/17		2015/16	
	ADF's with previous HFSC	% of ADF's with previous HFSC	ADF's with previous HFSC	% of ADF's with previous HFSC
Q1	13	7%	7	3%
Q2	13	7%	7	3%

No exception report required.

1.4 Accidental Dwelling Fire Casualties
This indicator reported the number of fatalities, slight and serious injuries occurring at primary fires where a dwelling had been affected and the cause of fire had been recorded as 'Accidental' or 'Not known'.

Casualty Status	2016/17 Quarter 2	2015/16 Quarter 2
Fatal	0	2
Victim went to hospital visit, injuries appeared Serious	2	1
Victim went to hospital visit, injuries appeared Slight	7	8
TOTAL	9	11

No exception report required.

1.5 Accidental Building Fires (Non-Dwellings)
This indicator reported the number of primary fires where the property type is a building and the property sub-type is not a dwelling <u>and</u> the cause of fire has been recorded as 'Accidental' or 'Not known'.

Total number of incidents	2016/17 Quarter 2	2015/16 Quarter 2
	80	83

No exception report required.

1.5.1 Accidental Building Fires (Non-Dwellings) – Extent of Damage
This indicator reported the number of primary fires where the property type is a building and the property sub-type is not a dwelling <u>and</u> the cause of fire has been recorded as 'Accidental' or 'Not known' presented as a percentage extent of fire and heat damage.
This indicator shows the total number of Accidental Building Fires where damage is limited to the item first ignited and limited to the room of origin (it excludes incidents that are limited to heat/smoke damage only).

Quarter 2 Accidental Building Fires activity, 63: -

		2016/17				2015/16			
	ADF activity	Item 1st ignited	Room of origin	Floor of origin	Spread beyond floor of origin	Item 1st ignited	Room of origin	Floor of origin	Spread beyond floor of origin
Q1	75	12%	40%	17%	31%	29%	26%	13%	32%
Q2	63	13%	46%	21%	21%	26%	28%	11%	34%

No exception report required.

1.6 Deliberate Fires
This indicator reported the number of primary and secondary fires where the cause of fire had been recorded as 'Deliberate'. Secondary fires are the majority of outdoor fires including grassland and refuse fires unless they involve casualties or rescues, property loss or more appliances attend. They include fires in single derelict buildings.

Deliberate Fire Type	2016/17 Quarter 2	2015/16 Quarter 2
1.6.1 Deliberate Fires – Anti-Social Behaviour	416	615
1.6.2 Deliberate Fires – Dwellings	34	32
1.6.3 Deliberate Fires – Non-Dwellings	42	43

No exception report required.

1.7   High / Very High Risk Home Fire Safety Checks
       This indicator reported the percentage of completed Home Fire Safety
       Checks (HFSC), excluding refusals, carried out where the risk score had
       been determined to be either high or very high.

	2016/17	2015/16
	% of High and Very High HFSC outcomes	% of High and Very High HFSC outcomes
Q1	79%	67%
Q2	75%	68%

No exception report required.

1.8   Road Safety Education Evaluation
       This indicator reported the percentage of participants of the Wasted Lives and
       Childsafe Plus education packages that show a positive change to less risky
       behaviour following the programme; based on comparing the overall
       responses to an evaluation question before and after the course.

	2016/17 (cumulative)		2015/16 (cumulative)	
	Total participants	% positive influence on participants' behaviour	Total participants	% positive influence on participants' behaviour
Q1	1832	87%	4811	82%
Q2	2847	85%	6630	84%

No exception report required.

1.9.1   Fire Safety Enforcement – Known Risk
        This indicator reported on the percentage of premises that have had a Fire
        Safety Audit as a percentage of the number of all known premises in
        Lancashire to which The Regulatory Reform (Fire Safety) Order 2005 applies.

Number of premises	Number of premises audited to date	% of all premises audited Year end: 2016/17	% of all premises audited Year end: 2015/16
33,243	18,463	56%	55%

No exception report required.

1.9.2   Fire Safety Enforcement – Risk Reduction
        This indicator reported the percentage of Fire Safety Audits carried out within
        the period resulting in enforcement action. Enforcement action is defined as
        one or more of the following: notification of deficiencies, action plan,
        enforcement notice, alterations notice or prohibition notice.

Period	Satisfactory audits 2016/17	Requiring formal activity – 2016/17	Requiring informal activity – 2016/17
Q1	28%	8%	59%

| Q2 | 34% | 10% | 57% |

No exception report required.

KPI 2 – Responding to Emergencies

2.1.1   Critical Fire Response – 1st Fire Engine Attendance
This indicator reported the 'Time of Call' (TOC) and 'Time in Attendance' (TIA) of the first fire engine arriving at the incident in less than the relevant response standard.

The response standards for the first fire engine attending a critical fire (including call handling time KPI 2.1.3) are as follows:-

· Very high risk area = 6 minutes
· High risk area = 8 minutes
· Medium risk area = 10 minutes
· Low risk area = 12 minutes

The response standards are determined by the risk map score and subsequent risk grade for the location of the fire.

Standard: to be in attendance within response standard target on 88% of occasions.

Quarter 2 – 1st pump response 88.89%, previous year quarter 2 was 80.58%
No exception report required.

2.1.2   Critical Fire Response – 2nd Fire Engine Attendance
This indicator reported the time taken for the second fire engine to attend a critical fire incident measured from the time between the second fire engine arriving and the time it was sent to the incident. The target is determined by the risk map score and subsequent risk grade for the location of the fire.

Standard: to be in attendance within response standard target on 85% of occasions.

Quarter 2 – 2nd pump response 88.19%, previous year quarter 2 was 84.16%
No exception report required.

2.1.3   Critical Fire Response – Call Handling
Critical fire criteria as 2.1.1 Call handling time is calculated from the 'Time of Call' to the 'Time of Send' of the first fire engine. The measure used is taken from the Performance Framework used by North West Fire Control. A median is used to calculate the average time for the quarter. Excluding duplicate calls for the same incident.

Standard: within 90 seconds

Updated figures were tabled at the meeting.
The median call handling time for quarter 2 was 85 seconds, previous year quarter 2 was 76 seconds, a worsening of 9 seconds.
No exception report required.

2.3   <u>Fire Engine Availability – Wholetime, Day Crewing and Day Crewing Plus</u>
        This indicator measured the availability of fire engines that are crewed by wholetime, day crewing and day crewing plus shifts. It is measured as the percentage of time a fire engine is available to respond compared to the total time in the period.

        Fire engines are designated as unavailable for the following reasons:

        · Mechanical
        · Crew deficient
        · Engineer working on station

        Annual Standard: Above 99.5%

        The Assistant Chief Fire Officer reported to Members that since the transition to North West Fire Control KPI data was held by North West Fire Control. Due to an update of recording practices recently adopted by NWFC, it was hoped that this data would be available for quarter 3.
        No exception report required.

2.5   <u>Staff Accidents</u>
        This indicator measured the number of staff accidents.
        Total number of staff accidents 2016/17 – Year to Date, 31
        Quarter 2 results indicate percentage pass within standard
        No exception report required.

KPI 3 – Delivering Value for Money

3.1   <u>Progress Against Savings Programme</u>
        Annual budget for 2016/17 - £55.7m
        Budget to end of quarter 2 - £27.0m
        Spend for the period to date was £25.8m
        Underspend for the period £1.2m
        Variance -2.15%
        No exception report required.

3.2   <u>Overall User Satisfaction</u>
        Total responses 1394; number satisfied 1382
        % satisfied 99.1% against a standard of 97.5%
        Variance 1.68%
        No exception report required.

KPI 4 – Engaging With Our Staff

4.1   <u>Overall Staff Engagement</u>
        This indicator measured overall staff engagement. The engagement index score was derived from the answers given by staff that related to how engaged they feel with the Service.

        Three times a year all staff were asked the same questions in on online survey to gauge engagement. Staff engagement index for the first survey was

reported at the last meeting; the index was 62%, based on 220 replies This is 4% higher when compared against the same period last year.

Period	2016/17		2015/16	
	Number of Replies	Engagement Index	Number of Replies	Engagement Index
1	220	62%	199	58%

4.2.2 <u>Staff Absence – Retained Duty System</u>
This indicator measured the percentage of contracted hours lost due to sickness for all retained duty staff.
Annual Standard: Not more than 2.5% lost as % of available hours of cover
Quarter 2 results indicate percentage pass within standard
Cumulative retained absence (as % of available hours cover) 0.68%
No exception report required.

<u>RESOLVED</u>:- That the Committee endorse the report and note the contents of the 4 negative KPI exception reports.

10/16 <u>BRIGHT SPARX 2016</u>

Area Manager, Ben Norman provided Members with a current overview of the Bright Sparx Campaign. Bright Sparx was a well-established, multi-agency campaign which aimed to reduce injury, disorder, damage and anti-social behaviour related to the misuse of bonfires and fireworks across the county. The campaign took place over a period of 6 weeks from 1 October to 10 November each year.

Community engagement carried out throughout the year focussed on providing education through presentations to schools, community/youth club visits; Prince's Trust community projects were undertaken in targeted areas and safety education was provided to children and young people who had developed a fascination for fire.

Diversionary activities during the Bright Sparx period included: the promotion of organised events, tackling the illicit sales of illegally imported and professional display fireworks and the removal of rubbish. In addition, the Service website was used to direct people to officially-sanctioned bonfire and firework events and to provide advice on safety. Modern communication through Social Media was also used to assist in engaging and educating young people through the targeted promotion of safety advice using graphics and short video clips. Partnership activities included: external visual audits, joint visits to firework outlets, rubbish removal, the provision of temporary fencing and the undertaking of fire safety inspections.

During the Bonfire weekend this year there was: an Officer based at North West Fire Control; joint Fire / Police command rooms were set up in localities and there were multi-agency intervention vehicles available to visit and assess any concerns. A district case study was presented to Members which showed that of 30 calls made to North West Fire Control from within the case study area, 20 were assessed by the multi-agency team and 1 fire engine deployed to the scene.

Members were pleased to note that the overall number of deliberate fires related to anti-social behaviour (which was reported regularly in the Performance Management

report under key performance indicator 1.6.1), including those which occurred during the Bright Sparx period and the number of anti-social behaviour incidents at bonfires had significantly reduced as follows: -

Year	ASB per annum	ASB within Bright Sparx	ASB Bonfires
2007/08	5908	1330	394
2010/11	4185	556	124
2013/14	2568	326	75
2016/17*	1700*	355	34
* includes estimated year-end figure			

Likewise, attacks on Firefighters had also reduced from 11 in 2012 to 2 in 2016. It was felt that this was due both the work done prior to the Bright Sparx period and the more discreet response undertaken by the multi-agency intervention vehicles.

Members agreed that this presentation should be presented to the next Full Authority meeting in December 2016.

11/16   DATE OF NEXT MEETING

The next meeting of the Committee had been agreed for Thursday 16 March 2017 at 10:00 am in the Main Conference Room at Lancashire Fire & Rescue Headquarters, Fulwood.

Further meeting dates were noted for: 8 June 2017, 14 September 2017 and 30 November 2017.

M NOLAN
Clerk to CFA

LFRS HQ
Fulwood

LANCASHIRE COMBINED FIRE AUTHORITY
PERFORMANCE COMMITTEE
Meeting to be held on 16th March 2017

PERFORMANCE MANAGEMENT INFORMATION FOR 3RD QUARTER 2016/17
(Appendix 1 refers)

Contact for further information:
David Russel, Assistant Chief Fire Officer – Tel No. 01772 866801

Executive Summary

This paper provides a clear measure of our progress against the Key Performance Indicators (KPI) detailed in the Risk Management Plan 2013-2017.

Recommendation

The Performance Committee is asked to endorse the Quarter 3 Measuring Progress report and note the contents of the 4 negative KPI Exception Reports.

Information

As set out in the report.

Business Risk

High

Environmental Impact

High

Equality & Diversity Implications

High – the report apprises the Committee of the Authority's progress.

HR Implications

Medium

Financial Implications

Medium

Local Government (Access to Information) Act 1985
List of Background Papers

Paper Performance Management Information	Date	Contact David Russel (ACO)
Reason for inclusion in Part 2, if appropriate: N/A		

Measuring Progress

2016-17 Quarter 3

Combined Fire Authority
16th March 2017

Lancashire Fire and Rescue Service

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Introduction

The following pages set out Lancashire Fire and Rescue Service's Performance Framework, an explanation of how our Key Performance Indicator's (KPI) are measured and how we are performing.

This is followed, where appropriate, by an analysis of the KPI's which are classified as being in exception, along with an analysis of the cause and actions being taken to improve performance. The remainder of the document illustrates our performance across all other KPI's.

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Performance Framework

The below graphic illustrates the Services four priorities and how their respective KPI's fit within the overall performance framework.

Explanation of Performance Measures

KPI's are monitored either by using an XmR chart (explained on the following page), comparing current performance against that achieved in the previous cumulative years activity, or against a pre-determined standard, for example, the response standard KPI's are measured against a range of set times.

The response standards are measured against a set range of times dependent upon the risk rating given to each Super Output Area (SOA), which is presented as a percentage of occasions where the standard is met. A two percent tolerance has been added to create a buffer so that a positive/negative exception report is not produced each quarter where only slight variations from the standard occur.

It is worth noting that there can be positive as well as negative exception reports. Positive exceptions are where performance levels meet set rules, as detailed on the following page.

Explanation of Performance Measures

XmR chart explanation (Value [X] over a moving [m] range [R])

> **An XmR chart is a control chart used to highlight any significant changes in activity so that interventions can be made before an issue arises. It can also highlight where activity has decreased, potentially as a result of preventative action which could be replicated elsewhere.**

Activity is deemed to be within standard if it remains within set upper and lower limits. These limits are set using a standard deviation calculation based upon the previous three years activity.

An exception report is generated if the XmR rules are breached. Note that a 'positive' exception could also be generated.

The following rules are applicable to the XmR charts and define when an exception has occurred:

1. A single point beyond the control limit
2. Two out of three consecutive points near the control limits
3. A trend of six consecutive points either up or down
4. A shift of eight or more consecutive points above or below the mean line

XMR chart key definitions:

| Incidents | UCL | UWL | Current Mean | Mean | LWL | LCL |

Example XmR chart: In the example below, KPI 1.3 would produce a negative exception for meeting rule 1, as the activity, represented as a dark blue line, for December 2014 (::::) is above the Upper Control Limit (UCL).
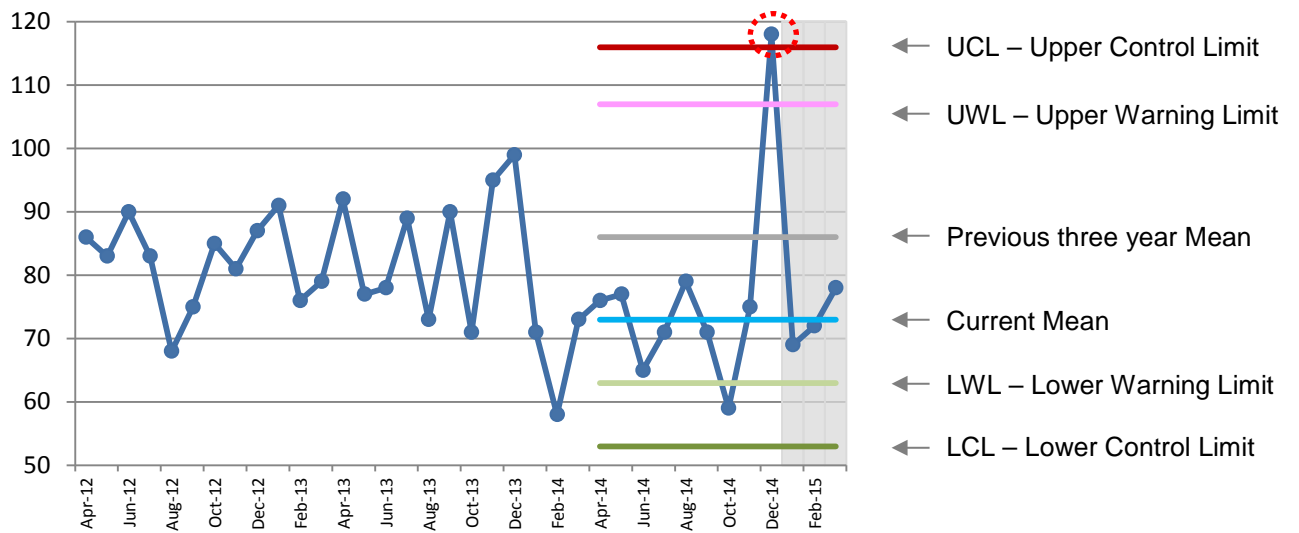
KPI Exception Overview

The KPI Exception Overview highlights those KPI's that are classified as being in exception. Each KPI is shown with an indicator to illustrate whether performance is: Improving (⬆), indicating a positive exception or, Declining (⬇), which would produce a negative exception. This is followed by any relevant exception reports, which detail the reasons for the exception, analysis of the issue, and actions being taken to improve performance.

For the period October 2016 – December 2016 four KPI's are classified as being in negative exception.

KPI	Description	Progress	Exception Positive / Negative	Page (s)
2 - Responding to Emergencies				
2.2.1	Critical Special Service Response - 1st Fire Engine Attendance	⬇	–	9
2.2.2	Critical Special Service Response - Call Handling	⬇	–	11
2.4	Fire Engine Availability – Retained Duty System	⬇	–	13

4 - Engaging with our Staff				
4.2.1	Staff Absence - Excluding Retained Duty System	⬇	–	15

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Exception report: 2.2.1 Critical Special Service Response – 1st Fire Engine Attendance

Performance indicator: 2.2.1 Critical Special Service Response – 1st Fire Engine Attendance

Critical special service incidents are non-fire incidents where there is a risk to life, for example, road traffic collisions, rescues and hazardous materials incidents. For these incidents there is a single response standard which measures how long it takes the first fire engine to attend. The response standard for the first fire engine attending a critical special service call (including call handling time (KPI 2.2.2) is 13 minutes. We have achieved our standard when the time between the 'Time of Call' and 'Time in attendance' of the first fire engine arriving at the incident is less than 13 minutes.

Quarter three response percentage pass rate 89.21%, previous year quarter three 79.58%, an improvement of 9.63%.

Standard: 91.5% of occasions.

1st pump cumulative attendance standard	**Year to Date**	2016/17 Quarter 3	*Previous year to Date*	*2015/16 Quarter 3*
	87.14%	89.21%	84.48%	79.58%
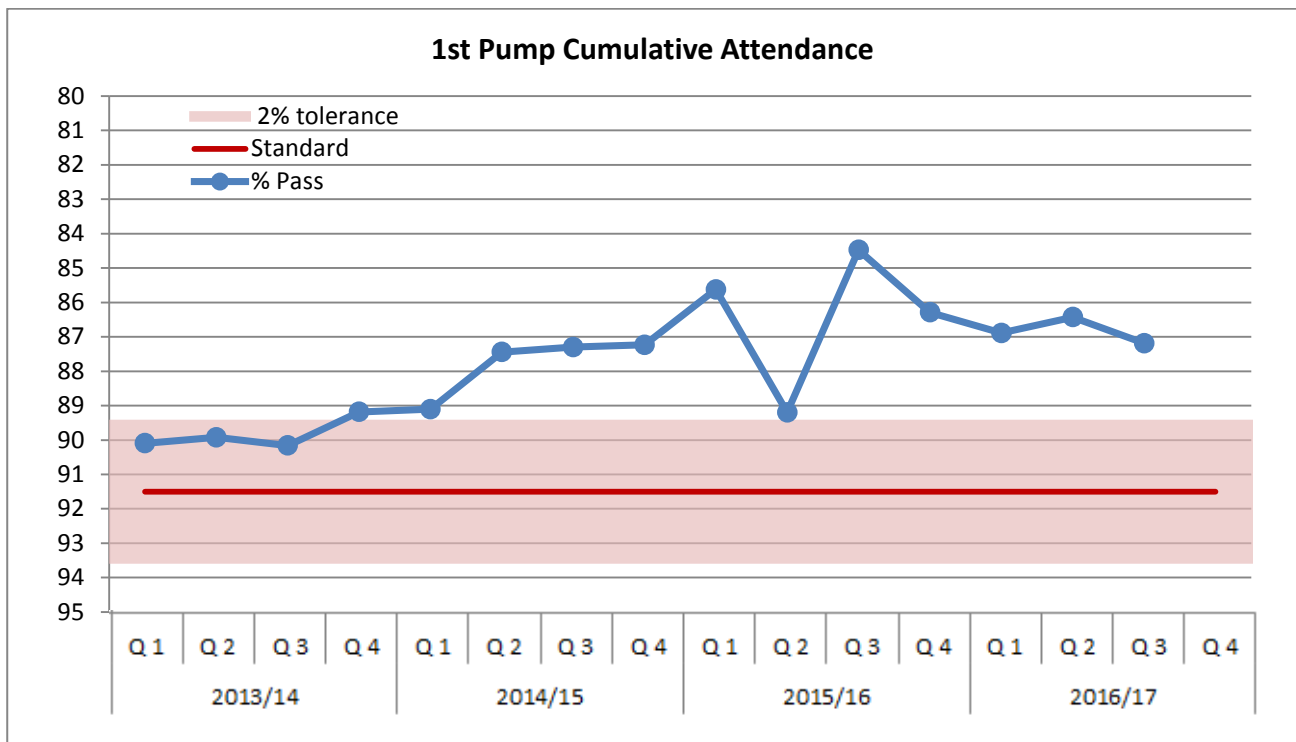
1st Pump Cumulative Attendance

What are the reasons for an Exception Report

This is a negative exception report due to critical Special Service 1st pump response being below the standard. Overall, quarter three pass rate was 89.21%, with a cumulative pass rate of 87.14%, which is outside of the 91.5% standard.

Analysis

A mixed monthly performance during quarter 3; with October and December being below standard but November being within the 2% tolerance. However, this could be attributed to a very low activity count for the month of November (89) the lowest activity count since February 2015

The Officer in Charge (OIC) is now required to provide a narrative for the failure to respond to the incident within standard. Analysis of 78 narratives implies that the travel distance involved, along with incidents occurring outside of their own station area, are the main reasons for longer travel times.

Failure to book in attendance or the MDT failing to acknowledge an attendance, still account for a small number of failure reasons. This is the subject of continued focus by the Heads of Service Delivery.

Shown below are the actual failures and monthly totals over the previous 12 months, along with the percentage pass rate.

	2015/16			2016/17								
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Failed	13	10	21	22	14	23	18	21	14	12	8	14
Incidents	205	187	134	120	124	206	132	139	97	111	89	114
% Pass	93.7	94.7	84.3	81.7	88.7	88.8	86.4	85.0	85.7	89.2	90.9	87.9

Over the quarter three period, 32% of the failures failed by less than 60 seconds.

Call handling is a contributing factor as this is now included within the overall response time. The individual monthly [median] call handling times are shown below.

	2015/16			2016/17								
Median Seconds	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	93	88	116	132	135	120	120	133	135	119	122	128

Actions being taken to improve performance?

Head's of Service Delivery (HoSD) are implementing and monitoring performance measures to remedy deficiencies and drive improvement.

It is hoped that on-going initiatives to address these issues will bring the cumulative standard back to within the 2% tolerance.

Exception report: 2.2.2 Critical Special Service Response – Call Handling

**Performance indicator: 2.2.2 Critical Special Service Response – Call Handling**

Call handling time is calculated from the ToC to the ToS of the first appliance mobilised. A median is used to calculate the average time for the month. Excludes duplicate calls for the same incident.

The median call handling time for quarter three is 124 seconds, previous year quarter three 116 seconds, a worsening of 8 seconds. The median for the months of quarter two (July to September 2016) recorded 127 seconds.

A negative exception report has been produced due to the median being a longer duration than the 90 second standard.

Standard: Within 90 seconds.

Median response	Year to Date	2016/17 Quarter 3	*Previous year to Date*	*2015/16 Quarter 3*
(Seconds)	**126**	124	*115*	*116*
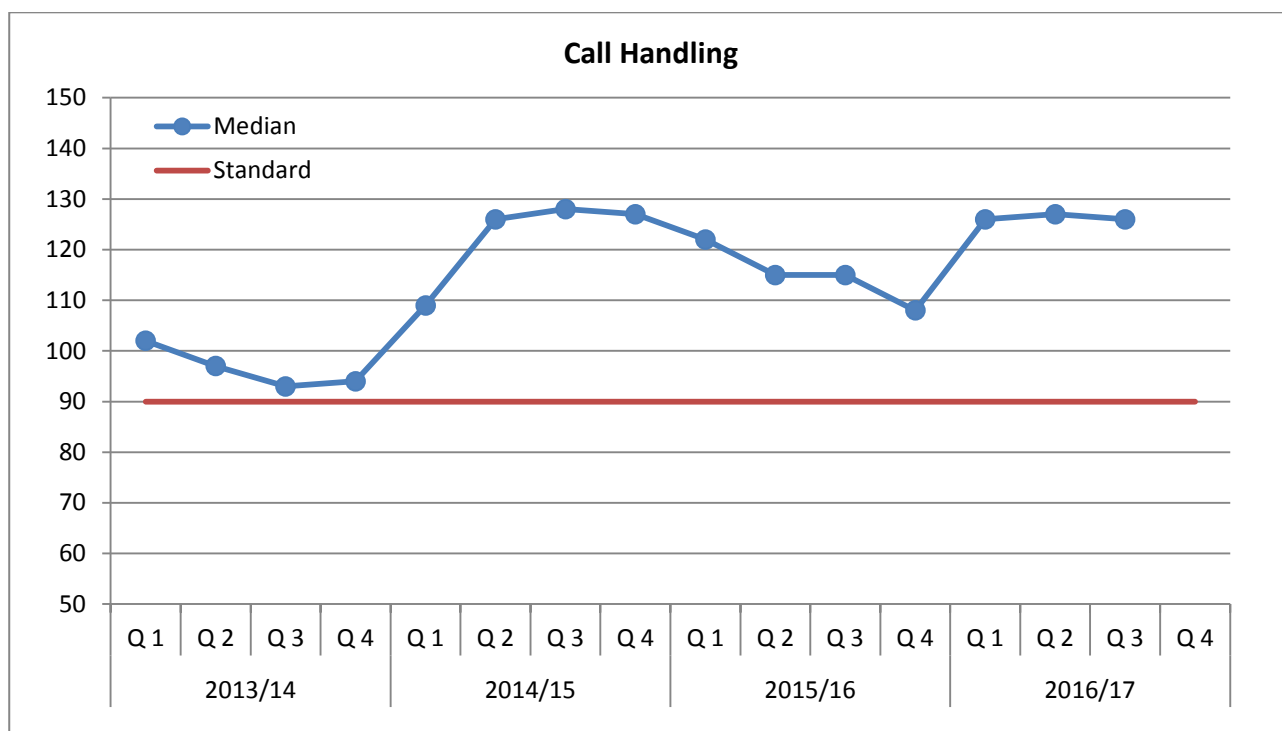
Call Handling

What are the reasons for an Exception Report

This is a negative exception report due to performance being below standard, with quarter 3 call handling recording a similar return as previous quarters in the year.

Analysis

Each of the 3 quarters of 2016/17 returned similar performance, varying by only one second; with a cumulative median of 126 seconds. This is in contrast to the previous year where quarterly call handling varied by up to 14 seconds. The April to December period of 2015/16 returned a median call handling time of 115 seconds.

The latest performance report from NWFC shows that the average time taken from receiving a call to alerting the first resource is 112 seconds for Lancashire, the same as achieved during quarter 2. This is 3 seconds slower than the average for all FRS's handled by NWFC.

This average is for *all* emergency calls; however, this KPI looks at a subset of calls which tend to be more challenging in terms of identifying an addressable location. This naturally occurs when either the caller is in an unfamiliar location or when the incident occurs away from a landmark or road junction.

It is hoped that further analysis of call handling data, in conjunction with NWFC, will help highlight where the issues lie and aid targeting of areas for improvement.

Actions being taken to improve performance

1. Performance standards have been written into each individual's appraisal review against which their performance and that of their team will be measured and managed.

2. FRS's are being asked to review the final classifications for incidents in order to make these easier to record and report on. This will also allow for more specific reporting to be done based on incident type per FRS rather than a generic NWFC report.

3. Staff are working through phased development plans in order to achieve competent status as quickly as possible.

4. FRS's are being encouraged to converge on ways of working wherever possible to reduce the number of response plans (mobilising rule sets) that Control Room Operators (CRO's) have to apply.

Exception report: 2.4 Fire Engine Availability - Retained Duty System

Performance indicator: 2.4 Fire Engine Availability – Retained Duty System

This indicator measures the availability of fire engines that are crewed by the retained duty system (RDS). It is measured by calculating the percentage of time a fire engine is available to respond compared to the total time in the period.

Fire engines are designated as unavailable (off-the-run) for the following reasons:

- *Manager deficient*
- *Crew deficient*
- *Not enough BA wearers*
- *No driver*

The percentage of time that RDS crewed engines are available for quarter three was 90.07%, previous year quarter three 89.88%, an improvement of 0.19%. The previous quarter (July to September 2016) recorded 88.28%.

A negative exception report has been produced due to percentage availability being below the standard.

Annual standard: Above 95%
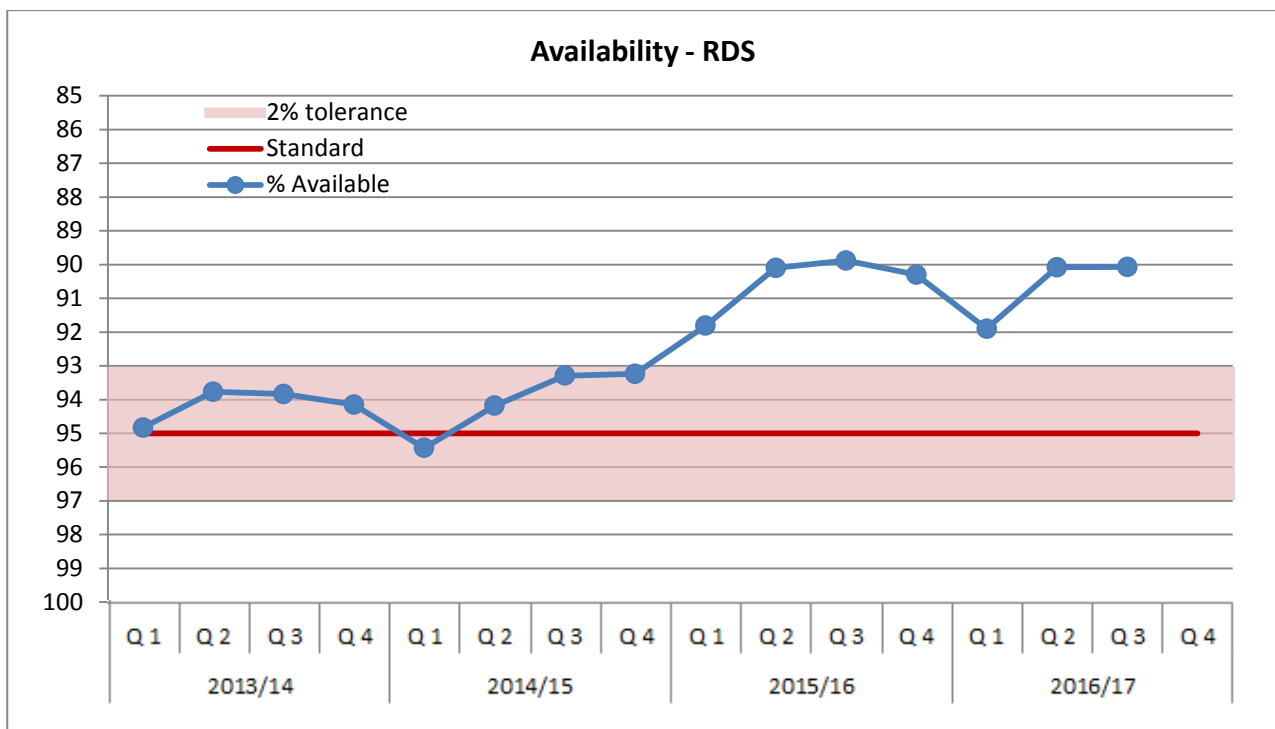
What are the reasons for an Exception Report

This is a negative exception report due to the cumulative RDS availability for the three months of quarter three being below the standard and outside of the two per cent tolerance.

Analysis

Whilst quarter 3 showed an improvement over quarter 2, the cumulative position at the end of quarter 3 has seen a slight worsening in RDS appliance availability over the cumulative position of quarter 2. The number of RDS personnel who were successful in obtaining a wholetime position has had an impact on available RDS hours. This is due to leaving the RDS service, being able to commit fewer hours due to W/T commitment or being unavailable due to development (W/T recruit course).

With an ageing workforce, the loss of staff due to retirement also has an impact on the ability to fully crew an appliance, and a number of retirements have occurred over the last three quarters.

The Service has also seen a number of resignations, albeit, some temporarily which has also reduced coverage.

Continuing work by the Retained Duty System Recruitment and Improvement Group (RIG) will be responsible for progressing areas for improvement. This isn't being viewed as a project with start and finish dates but as a number of ongoing pieces of work which will strive to deliver incremental improvements in order to strengthen and support the Retained Duty System.

Actions being taken to improve performance

Local performance monitoring is being led by Heads of Service Delivery to track progress against this KPI and to identify opportunity to improve performance

It is hoped that ongoing initiatives to address these issues will bring the standard back to within the 2% tolerance.

Exception report: 4.2.1 Staff Absence - Excluding Retained Duty System

4.2.1 Staff Absence - Excluding Retained Duty System

The cumulative number of shifts (days) lost due to sickness for all wholetime, DCP, DC and support staff divided by the total number of staff.

Annual Standard: Not more than 5 shifts lost.
(Represented on the chart as annual shifts lost ÷ 12 months)
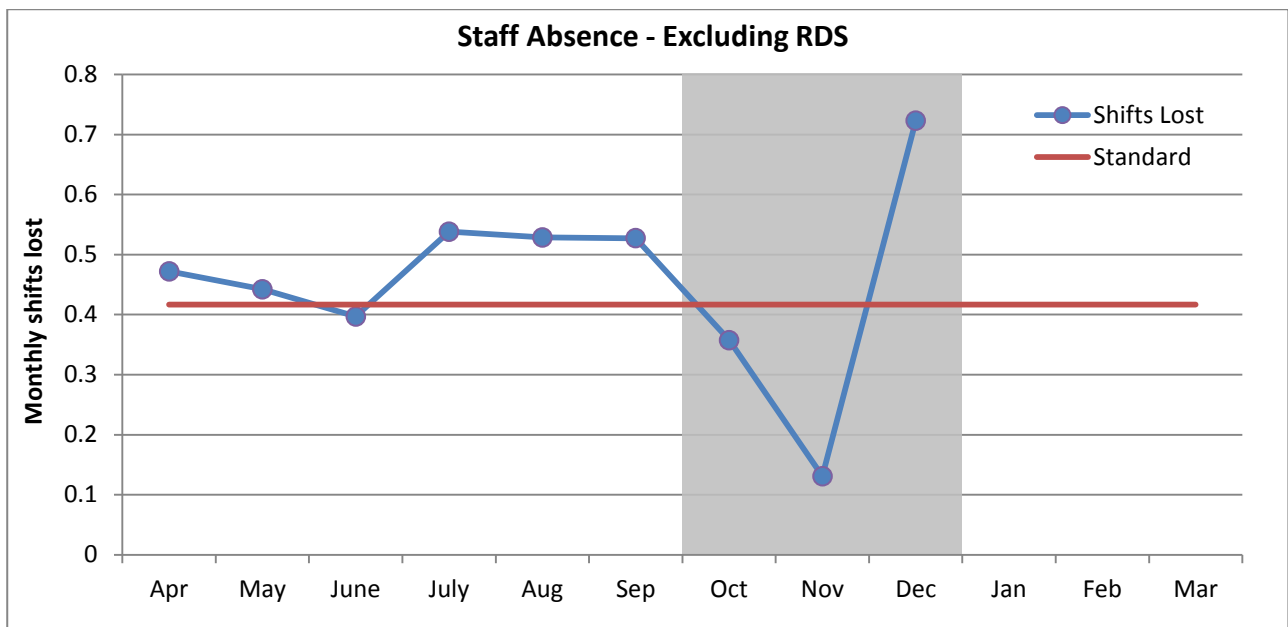
Cumulative total number of monthly shifts lost	4.116

What are the reasons for an Exception Report

This is a negative exception report due to the number of shifts lost through absence per employee being above the Service target for one month during quarter three.

Analysis

During quarter three the shifts lost through absence month on month shows December 2016 being above the Service target.

During this quarter there were 4 long term absence cases which span over the 3 months for whole-time staff. The main reasons reported for long-term absence being hospital procedure and muscular skeletal. There were two cases of employees with cancer, one who left the Service on ill

health retirement. At the end of the quarter there were 3 other long term absences of less than 3 months, who have since returned to work.

At the end of December the cumulative totals show that non-uniformed staff absence was below target at 3.31 shifts lost per employee, whole-time staff absence was above target at 4.40 shifts per employee. Overall absence for all staff (except Retained Duty System) was 4.12 shifts lost which exceeds the Service target of 3.75 shifts at the end of the third quarter.

Actions being taken to improve performance

Early intervention by OHU doctor/nurse/physiotherapist, HR support to managers in following the Attendance Policy managing individual cases, addressing review periods/triggers in a timely manner and dealing with capability off staff due to health issues. Absence management presentations and question and answer session on the ILM course to assist future managers understand and interpret the policy. We encourage employees to make use of our Employee Assistance Programme provider OPTUM and The Firefighters Charity.

The new Absence Management Policy was introduced on 1 September 2016 and is being rolled out to managers, who are invited to training provided by HR.

Key Performance Indicators

This section gives an overview of the performance direction of the KPI's which are not in exception.   Each KPI is shown within its priority with an indicator to illustrate whether performance is: Improving (⬆), Maintaining (⬄) or Declining (⬇), followed by a summary of the current position.

KPI	Description	Progress	Page (s)
1 - Preventing and Protecting			
1.1	Risk Map Score	⬆	18
1.2	Overall Activity	⬇	19
1.3	Accidental Dwelling Fires	⬆	20
1.3.1	ADF - Extent of Damage	⬆	21
1.3.2	ADF - Number of Incidents Where Occupants have Received a HFSC	⬆	21
1.4	Accidental Dwelling Fire Casualties	⬄	22
1.5	Accidental Building Fires (Non Dwellings)	⬆	23
1.5.1	ABF (Non Dwellings) - Extent of Damage	⬇	24
1.6	Deliberate Fires	⬆	25
1.7	High Risk Home Fire Safety Checks	⬄	26
1.8	Road Safety Education Evaluation	⬄	27
1.9.1	Fire Safety Enforcement - Known Risk	⬆	28
1.9.2	Fire Safety Enforcement - Risk Reduction	⬇	28
2 - Responding to Emergencies			
2.1.1	Critical Fire Response – 1st Fire Engine Attendance	⬆	29
2.1.2	Critical Fire Response - 2nd Fire Engine Attendance	⬆	30
2.1.3	Critical Fire Response - Call Handling	⬆	31
2.3	Fire Engine Availability - Wholetime, Day Crewing and Day Crewing Plus	⬆	32
2.5	Staff Accidents	⬆	33
3 - Delivering Value for Money			
3.1	Progress Against Savings Programme	⬆	34
3.2	Overall User Satisfaction	⬆	35
4 - Engaging with our Staff			
4.1	Overall Staff Engagement	⬆	36
4.2.2	Staff Absence - Retained Duty System	⬆	37

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1.1 Risk Map

This indicator measures the fire risk in each SOA. Risk is determined using fire activity over the previous three fiscal years along with a range of demographic data, such as population and deprivation. Specifically, the risk score for each SOA is calculated using the following formula:

$$\frac{\text{Dwelling fires}}{\text{Total dwellings}} + \left[\frac{\text{Dwelling fire casualties}}{\text{Resident population}} \times 4\right] + \text{Building fire count} + \left[\text{IMD} \times 2\right] = \text{Risk Score}$$

Once an SOA has been assigned a score, it is then categorised by risk grade.

Standard: To reduce the risk in Lancashire - an annual reduction in the County risk map score.

The County risk map score is updated annually, before the end of the first quarter. An improvement is shown by a year on year decreasing 'score' value. Current score 32990, previous year score 33268.

Score Category	Grade	Score (11-14)	SOA Count (11-14)	Score (12-15)	SOA Count (12-15)	Score (13-16)	SOA Count (13-16)
Less than 36	L	11686	508	12366	533	11944	519
Between 36 & 55	M	13208	306	12130	281	13578	314
Between 56 & 75	H	6040	95	5440	86	4890	76
Greater than 75	VH	2714	32	3332	41	2578	32
Grand Total		33648	941	33268	941	32990	941

| Risk Grade	Very High	High	Medium	Low	Overall Risk Score
2015 count	41	86	281	533	33268
2016 count	32	76	314	519	32990
Change	▼ -22% Overall reduction in Very High risk SOA's	▼ -12% Overall reduction in High risk SOA's	▲ 12% Overall increase in Medium risk SOA's	▼ -3% Overall reduction in Low risk SOA's	▼ -1% Overall reduction in fire risk

1.2 Overall Activity

The number of incidents that LFRS attend with one or more pumping appliances. Includes fires, special service calls and false alarms.

Quarter three activity 3994, previous year quarter three activity 4363, a decrease of 8.46%.

Included within this KPI is a new incident type of 'Gaining Entry'. This is where we have attended on behalf of the North West Ambulance Service. During quarter three we attended on 88 occasions.
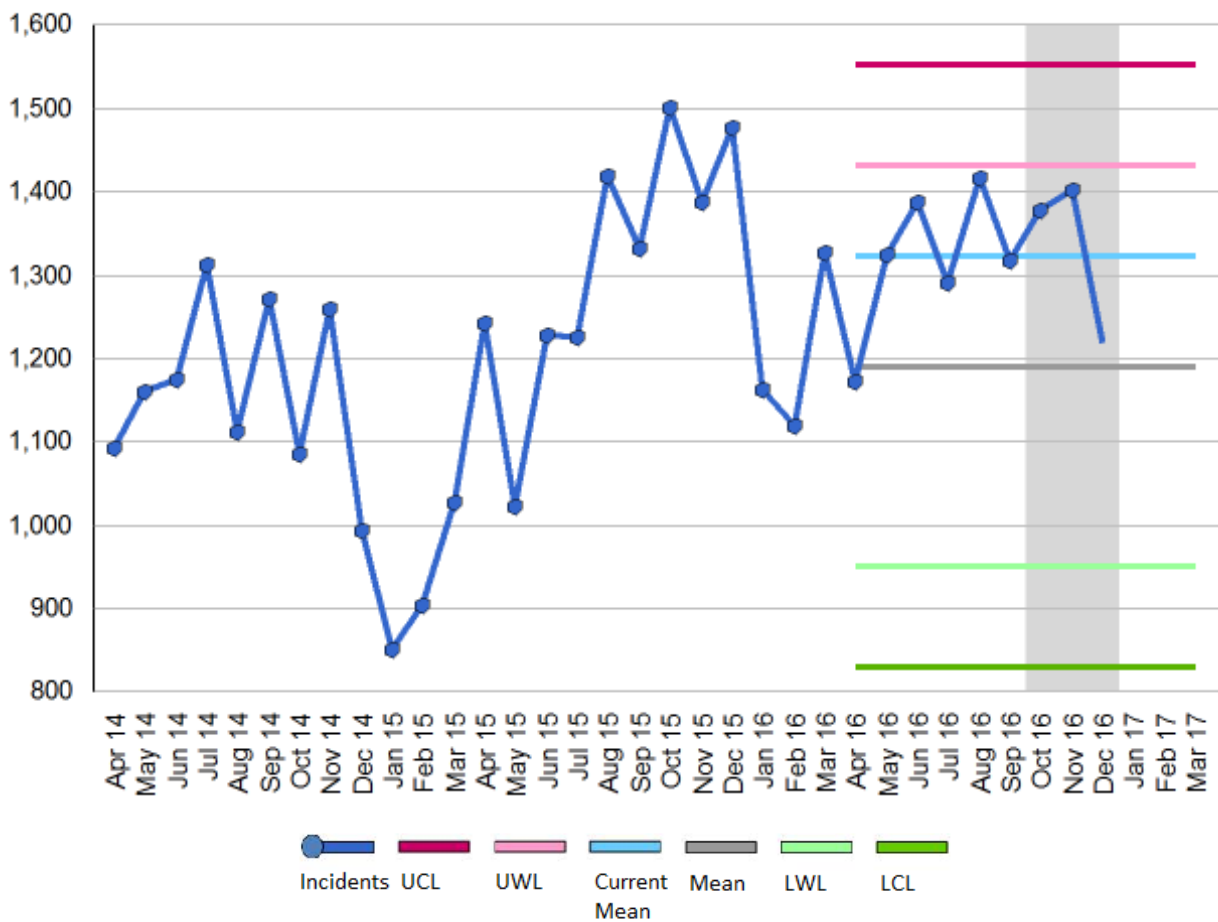
1.2 Number of attended incidents	Year to Date	**2016/17 Quarter 3**	*Previous year to Date*	*2015/16 Quarter 3*
	11895	**3994**	*11824*	*4363*

The grey line on the XmR chart denotes the mean monthly activity over the previous 3 years and the pale blue line the current mean.	**Current Mean**	**3 year Mean**	**Monthly Mean**		
			2015/16	**2014/15**	**2013/14**
	1316	1189	1285	1102	1181

1.3 Accidental Dwelling Fires

The number of primary fires where a dwelling has been affected <u>and</u> the cause of fire has been recorded as 'Accidental' or 'Not known'.

A primary fire is one involving property (excluding derelict property) <u>or</u> any fires involving casualties, rescues, <u>or</u> any fire attended by five <u>or</u> more appliances. An appliance is counted if either the appliance, equipment from it or personnel riding on it, were used to fight the fire.

Quarter three activity 249, previous year quarter three activity 222, an increase of 12%.
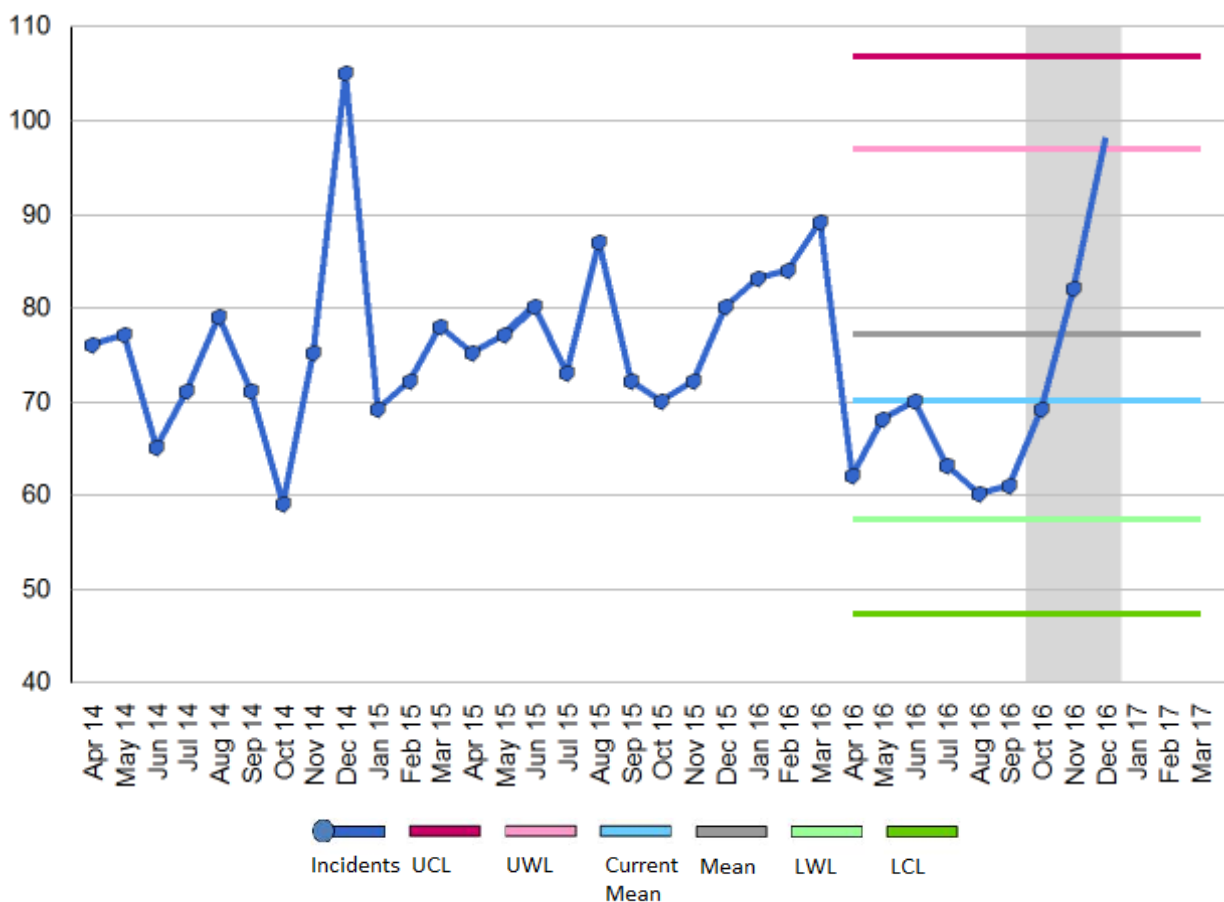
1.3 Accidental Dwelling Fires	Year to Date	**2016/17 Quarter 3**	*Previous year to Date*	*2015/16 Quarter 3*
	633	249	686	222

	Current Mean	3 year Mean	Monthly Mean		
			2015/16	2014/15	2013/14
	70	78	78	75	81

The grey line on the XmR chart denotes the mean monthly activity over the previous 3 years and the pale blue line the current mean.

1.3.1 ADF - Extent of Damage

ADF criteria as 1.3. Extent of fire and heat damage is limited to: Item ignited first, Limited to room of origin, Limited to floor of origin and Spread beyond floor of origin.

*The ADF activity count is limited to only those ADF's which had an extent of damage shown above.

An improvement is shown if the total percentage of 'Item first ignited' and 'Room of origin' is greater than the comparable quarter of the previous year.

Percentage of accidental dwelling fires limited to item 1st ignited in quarter three 30%, quarter three of previous year 30%. Percentage limited to room of origin in quarter three 60%, quarter three previous year 56%, limited to floor of origin in quarter three 8%, quarter three previous year 8% and spread beyond floor 3%, previous year 4%.

	2016/17					⬆/⇩	2015/16			
	*ADF activity	Item 1st ignited	Room of origin	Floor of origin	Spread beyond floor of origin	Progress	Item 1st ignited	Room of origin	Floor of origin	Spread beyond floor of origin
Quarter 1	151	19%	62%	13%	6%	⇩	25%	60%	8%	7%
Quarter 2	130	23%	64%	10%	3%	⇩	28%	57%	12%	3%
Quarter 3	178	30%	60%	8%	3%	⬆	30%	56%	8%	6%
Quarter 4							18%	71%	7%	4%

1.3.2 ADF - Number of Incidents Where Occupants have Received a HFSC

ADF criteria as 1.3. The HFSC must be a completed job (i.e. not a refusal) carried out by LFRS personnel or partner agency. The HFSC must have been carried out within <u>12 months</u> prior of the fire occurring.
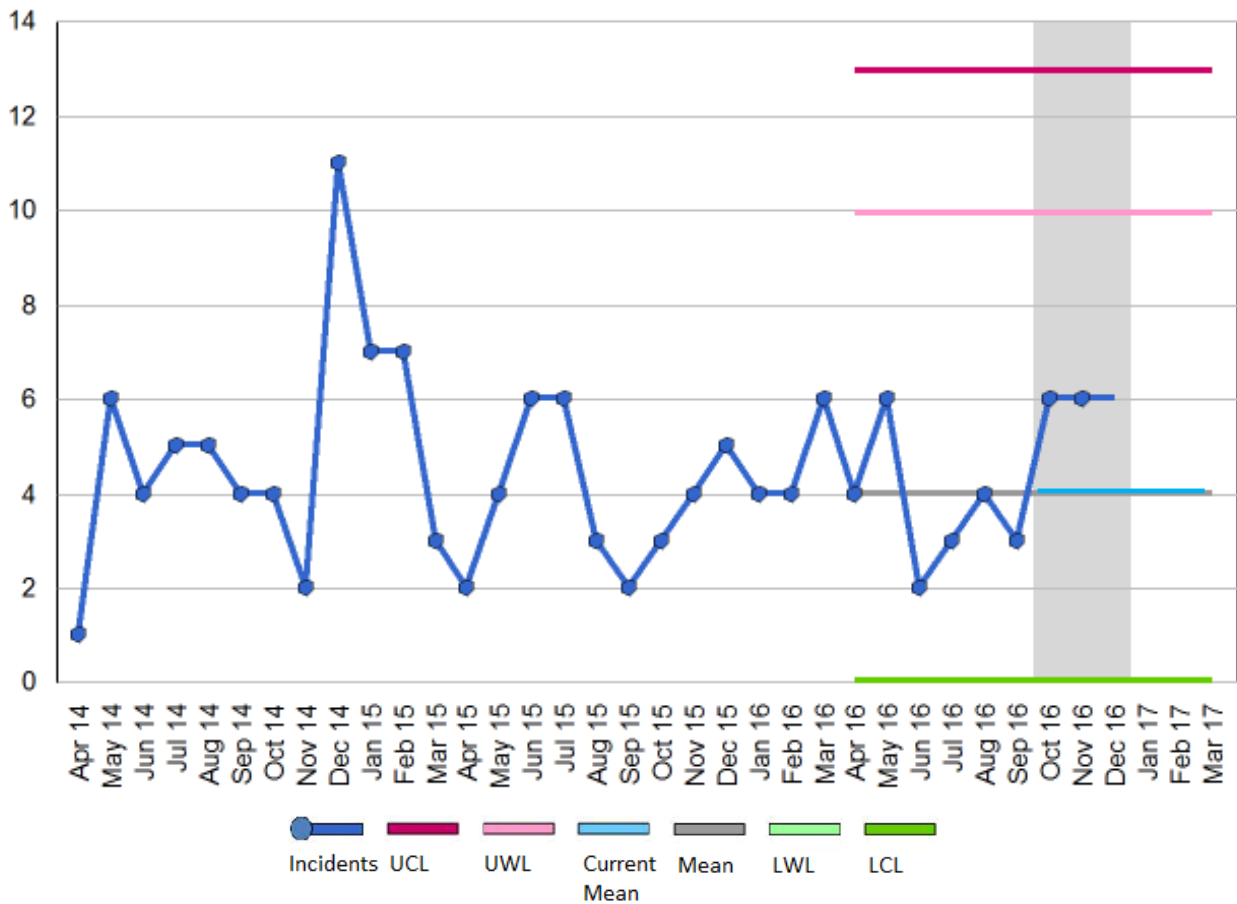
	2016/17		2015/16	
	ADF's with previous HFSC	% of ADF's with previous HFSC	ADF's with previous HFSC	% of ADF's with previous HFSC
Quarter 1	13	7%	7	3%
Quarter 2	13	7%	7	3%
Quarter 3	20	8%	4	2%
Quarter 4			6	2%

Analysis: Of the twenty accidental dwelling fire incidents that had received a HFSC within the previous 12 months, nine had 'Heat and smoke damage only', one resulted in damage 'Limited to item first ignited', nine 'limited to room of origin' and one 'Limited to floor of origin.

1.4 Accidental Dwelling Fire Casualties

ADF criteria as 1.3. The number of fire related fatalities, slight and serious injuries. A slight injury is defined as; a person attending hospital as an outpatient (not precautionary check). A serious injury is defined as; at least an overnight stay in hospital as an in-patient.

During quarter three there have been no fatalities. Three casualties are recorded as serious and 15 with slight injuries. Quarter three of the previous year recorded one fatality, 5 serious and 6 slight.

Casualty Status	Year to Date	**2016/17 Quarter 3**	*Previous year to Date*	*2015/16 Quarter 3*
Fatal	0	0	4	1
Victim went to hospital, injuries appear Serious	11	3	9	5
Victim went to hospital, injuries appear Slight	29	15	22	6
Total	40	18	35	12

The grey line on the XmR chart denotes the mean monthly activity over the previous 3 years and the pale blue line the current mean.

Current Mean	**3 year Mean**	**Monthly Mean**		
		2015/16	**2014/15**	**2013/14**
4	4	4	4	5

1.5 Accidental Building Fires (Non Dwellings)

Primary fire criteria as 1.3. The number of primary fires where; the property type is 'Building' and the property sub type does not equal 'Dwelling' and the cause of fire has been recorded as 'Accidental' or 'Not known'.

Number of accidental building fires quarter three activity 85, previous year quarter three activity 93, a decrease of 8.60%.
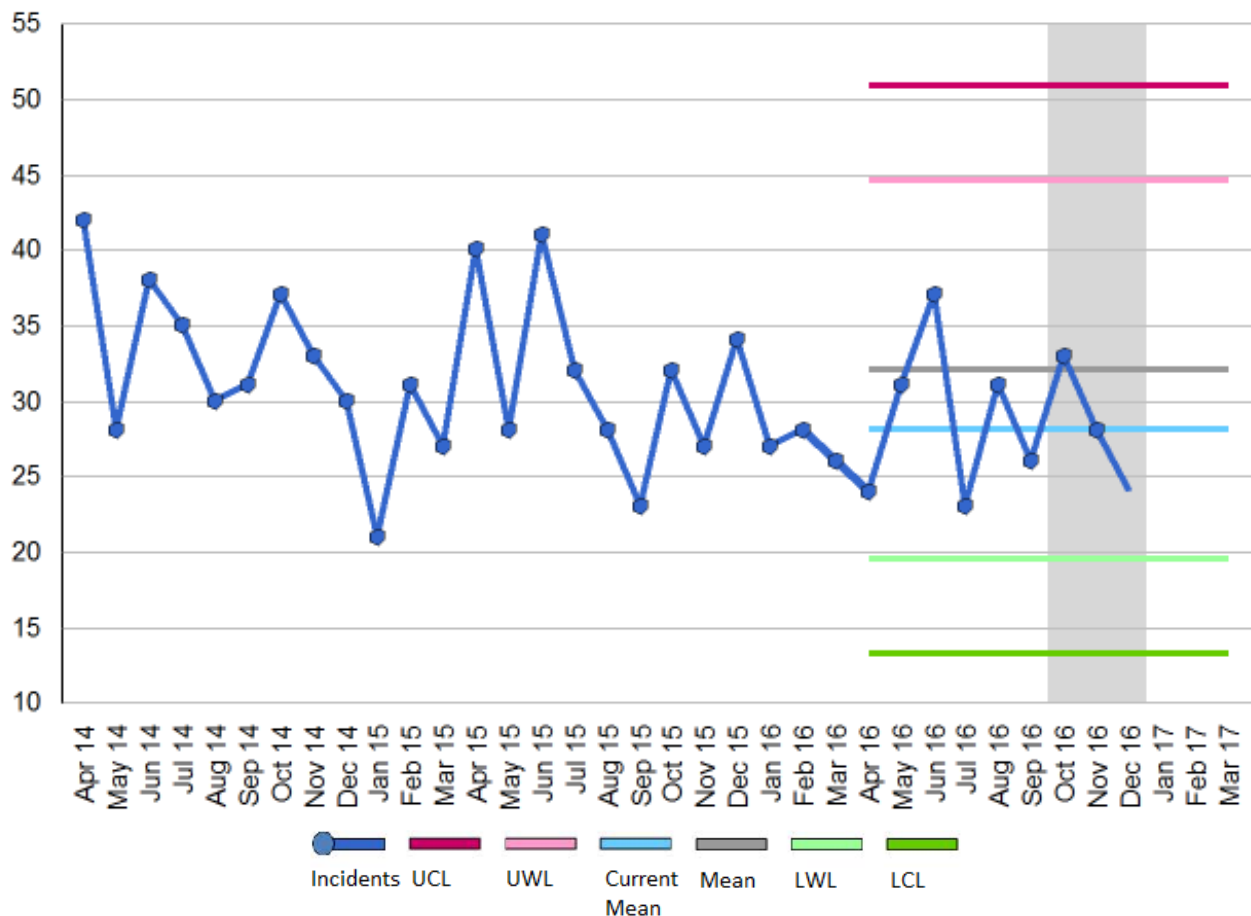
1.5 Accidental Building Fires	Year to Date	**2016/17 Quarter 3**	*Previous year to Date*	*2015/16 Quarter 3*
	257	85	*285*	*93*

	Current Mean	**3 year Mean**	**Monthly Mean**		
			2015/16	**2014/15**	**2013/14**
The grey line on the XmR chart denotes the mean monthly activity over the previous 3 years and the pale blue line the current mean.	28	32	31	32	35

1.5.1 ABF (Non Dwellings) - Extent of Damage

ABF criteria as 1.5. Extent of fire and heat damage is limited to: Item ignited first, Limited to room of origin, Limited to floor of origin and Spread beyond floor of origin.

*The ABF activity count is limited to only those ABF's which had an extent of damage shown above.

An improvement is shown if the total percentage of 'Item first ignited' and 'Room of origin' is greater than the comparable quarter of the previous year.

Percentage of accidental building fires limited to item 1st ignited in quarter three 20%, quarter three of previous year 20%. Percentage limited to room of origin in quarter three 45%, quarter three previous year 49%, limited to floor of origin in quarter three 16%, quarter three previous year 12% and spread beyond floor 19%, previous year 19%.

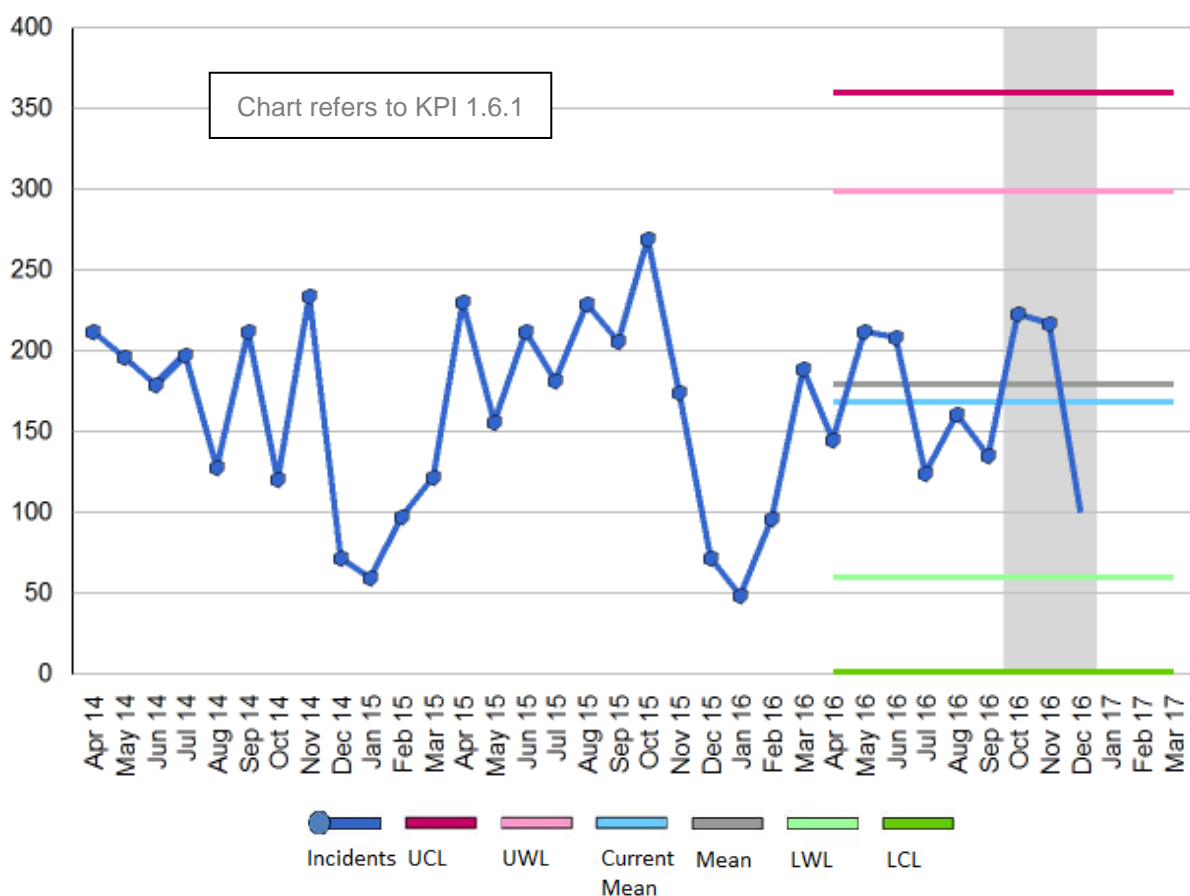|		2016/17				⬆/⬇	2015/16			
	*ABF activity	Item 1st ignited	Room of origin	Floor of origin	Spread beyond floor of origin	Progress	Item 1st ignited	Room of origin	Floor of origin	Spread beyond floor of origin
Quarter 1	75	11%	41%	17%	31%	⬇	29%	26%	13%	32%
Quarter 2	63	10%	49%	14%	27%	⬆	26%	28%	11%	34%
Quarter 3	69	20%	45%	16%	19%	⬇	20%	49%	12%	19%
Quarter 4							24%	30%	20%	26%

1.6 Deliberate Fires

The number of primary and secondary fires where; the cause of fire has been recorded as 'Deliberate'. Secondary fires are the majority of outdoor fires including grassland and refuse fires unless they involve casualties or rescues, property loss or 5 or more appliances attend. Includes fires in single derelict buildings.

1.6.1 Deliberate fires (ASB) quarter three activity 538, previous year quarter three activity 514.
1.6.2 Deliberate fires (Dwellings) quarter three activity 32, previous year quarter three activity 23.
1.6.3 Deliberate fires (Non dwellings) quarter three activity 31, previous year quarter three activity 40.

Chart refers to KPI 1.6.1

Incidents — UCL — UWL — Current Mean — Mean — LWL — LCL

Deliberate Fire Type	Year to Date	2016/17 Quarter 3	*Previous year to Date*	*2015/16 Quarter 3*
1.6.1 Deliberate Fires - ASB	1520	538	*1725*	*514*
1.6.2 Deliberate Fires - Dwellings	83	32	*85*	*23*
1.6.3 Deliberate Fires - Non Dwellings	115	31	*120*	*40*

The grey line on the XmR chart denotes the mean monthly activity over the previous 3 years and the pale blue line the current mean.	Current Mean	3 year Mean	Monthly Mean		
			2015/16	2014/15	2013/14
	168	179	171	152	214

1.7 High Risk Home Fire Safety Checks

The percentage of completed HFSC's, excluding refusals, carried out by LFRS personnel or partner agencies where the risk score has been determined to be either high or very high.

An improvement is shown if the percentage of high HFSC outcomes is greater than the comparable quarter of the previous year.

Percentage of high risk HFSC outcomes in quarter three 74%, quarter three of the previous year 74%.

	2016/17		⬆/⬇	2015/16	
	% of High HFSC outcomes	% of High HFSC outcomes (Cumulative)	Progress	*% of High HFSC outcomes*	*% of High HFSC outcomes (Cumulative)*
Quarter 1	79%	79%	⬆	67%	67%
Quarter 2	75%	77%	⬆	68%	67%
Quarter 3	74%	76%	⇔	74%	67%
Quarter 4				80%	71%

1.8 Road Safety Education Evaluation

The percentage of participants of the Wasted Lives and Childsafe Plus education packages that show a positive change to less risky behaviour following the programme. This is based on comparing the overall responses to an evaluation question pre and post-delivery of the course.

An improvement is shown if the percentage positive influence on participants behaviour is greater than the comparable quarter of the previous year.

A programme is also being delivered called 'Safe Drive Stay Alive'. This has been delivered to 5,878 students. Additionally, the 'Crashed cars' shown at events, have been seen by approximately 25,300 people to date.

Total number of participants 6398, with a percentage of positive influence [1] on participant's behaviour for the current year to date of 85%.

	2016/17 (Cumulative)		⬆/⬇	2015/16 (Cumulative)	
	Total participants	**% positive influence on participants behaviour**	**Progress**	*Total participants*	*% positive influence on participants behaviour*
Quarter 1	1832	87%	⬆	4811	82%
Quarter 2	2847	85%	⬆	6630	84%
Quarter 3	6398	85%	⬌	8119	85%
Quarter 4				11943	85%

[1] *From a sample*

1.9.1 Fire Safety Enforcement - Known Risk

The percentage of premises that have had a Fire Safety Audit (as recorded in the CFRMIS system to date), as a percentage of the number of all known premises (as recorded in the Address Base Premium Gazetteer) in Lancashire to which The Regulatory Reform (Fire Safety) Order 2005 applies.

Total number of premises within system 30449, number of premises audited to date 16941 (56%).

Number of premises	Number of premises audited to date	% of all premises audited to date: 2016/17	*% of all premises audited Year end: 2015/16*
30449	16941	56%	55%

1.9.2 Fire Safety Enforcement - Risk Reduction

The percentage of Fire Safety Audits carried out within the period resulting in enforcement action. Enforcement action is defined as one or more of the following; notification of deficiencies, action plan, enforcement notice, alterations notice or prohibition notice.

An improvement is shown if the 'Satisfactory Audits' percentage is greater than the comparable quarter of the previous year.

Satisfactory audits in quarter three 26%, previous year quarter three 40%
Requiring formal activity in quarter three 9%, previous year quarter three 8%
Requiring informal activity in quarter three 63%, previous year quarter three 48%

	2016/17			⬆/⬇ **Progress**	2015/16		
	Satisfactory audits	**Requiring formal activity**	**Requiring informal activity**		*Satisfactory audits*	*Requiring formal activity*	*Requiring informal activity*
Quarter 1	28%	8%	59%	⬇	35%	9%	53%
Quarter 2	34%	10%	57%	⬇	38%	10%	50%
Quarter 3	26%	9%	63%	⬇	40%	8%	48%
Quarter 4					32%	10%	58%

2.1.1 Critical Fire Response - 1st Fire Engine Attendance

Performance indicator: 2.1.1 Critical Fire Response – 1st Fire Engine Attendance

Critical fire incidents are defined as incidents that are likely to involve a significant threat to life, structures or the environment. Our response standards, in respect of critical fires, are variable and are determined by the risk map (KPI 1.1) and subsequent risk grade of the SOA in which the fire occurred.

The response standards for the first fire engine attending a critical fire (including call handling time KPI 2.1.3) are as follows[1]:

- *Very high risk area = 6 minutes*
- *High risk area = 8 minutes*
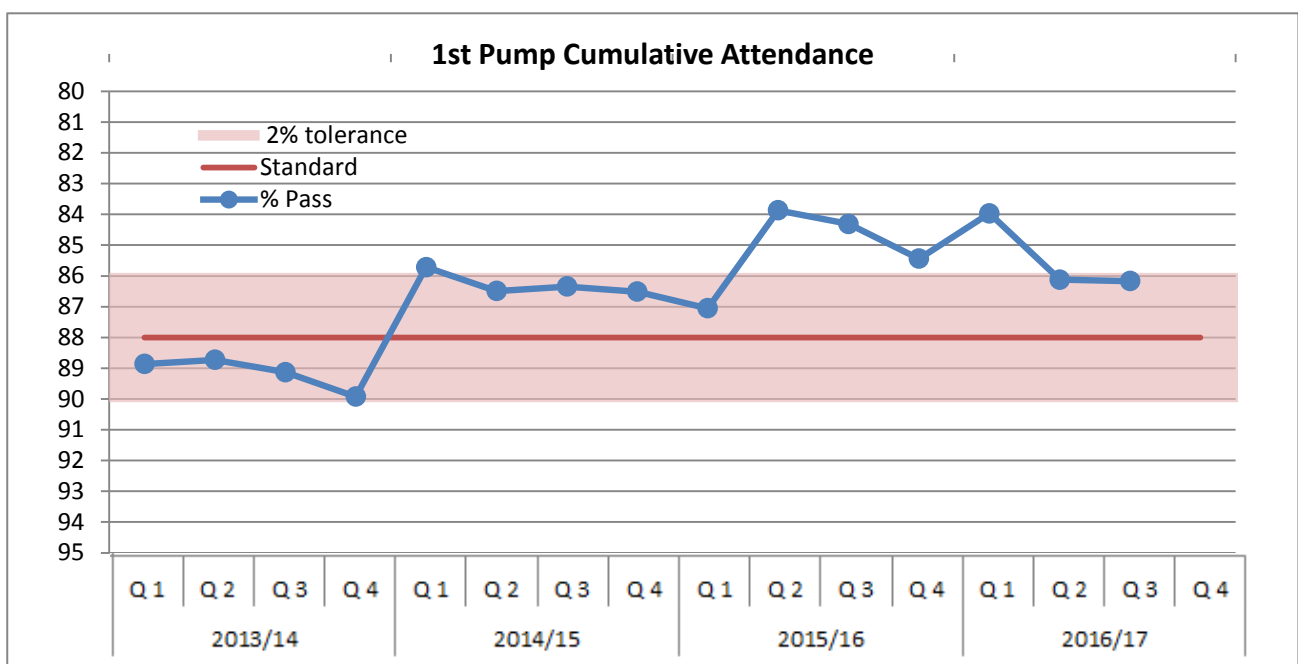- *Medium risk area = 10 minutes*
- *Low risk area = 12 minutes*

We have achieved our standard when the time between the 'Time of Call' (TOC) and 'Time in Attendance' (TIA) of the first fire engine arriving at the incident is less than the relevant response standard.

[1] The above times now include the previous 'call handling' element. Ref note [1] 2015/16 Q2 for explanation.

We aim to achieve this standard on 88% of occasions.
Quarter three 1st pump response 86.27%, previous year quarter three 85.25%.

1st pump cumulative attendance standard	**Year to Date**	2016/17 Quarter 3	*Previous year to Date*	*2015/16 Quarter 3*
	86.17%	86.27%	84.31%	85.25%

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2.1.2 Critical Fire Response - 2nd Fire Engine Attendance

Critical fire criteria as 2.1.1. The response standards for the 2nd fire engine attending a critical fire (including call handling time KPI 2.1.3) are as follows[1]:

- *Very high risk area = 9 minutes*
- *High risk area = 11 minutes*
- *Medium risk area = 13 minutes*
- *Low risk area = 15 minutes*

We have achieved our standard when the time between the 'Time of Call' and 'Time in Attendance' of second fire engine arriving at the incident is less than the relevant response standard.

[1] *The above times now include the previous 'call handling' element. Ref note [1] 2015/16 Q2 for explanation.*

We aim to achieve this standard on 85% of occasions.

Quarter three 2nd pump response 85.31%, previous year quarter three 83.87%.

2nd pump cumulative attendance standard	**Year to Date**	2016/17 Quarter 3	*Previous year to Date*	*2015/16 Quarter 3*
	85.84%	85.31%	84.38%	83.87%

2nd Pump Cumulative Attendance
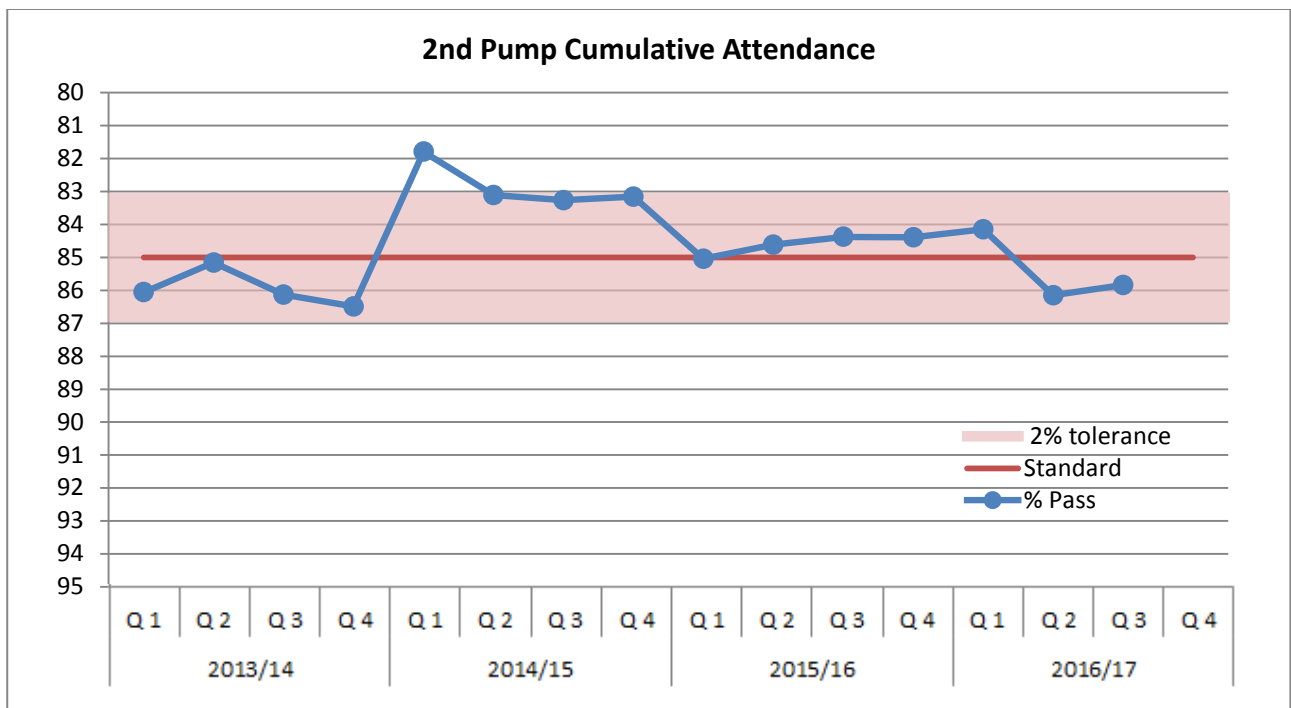
## 2.1.3 Critical Fire Response – Call Handling

Performance indicator: 2.1.3 Critical Fire Response – Call Handling

Critical fire criteria as 2.1.1. Call handling time is calculated from the 'Time of Call' to the 'Time of Send' of the first fire engine. The measure used is taken from the Performance Framework used by North West Fire Control (NWFC). A median is used to calculate the average time for the quarter. Excludes duplicate calls for the same incident.

The median call handling time for quarter three is 83 seconds; previous year quarter three was 78 seconds, a worsening of 5 seconds.

Standard: Within 90 seconds.

Median response (Seconds)	**Year to Date**	2016/17 Quarter 3	*Previous year to Date*	*2015/16 Quarter 3*
	83	83	78	*78*
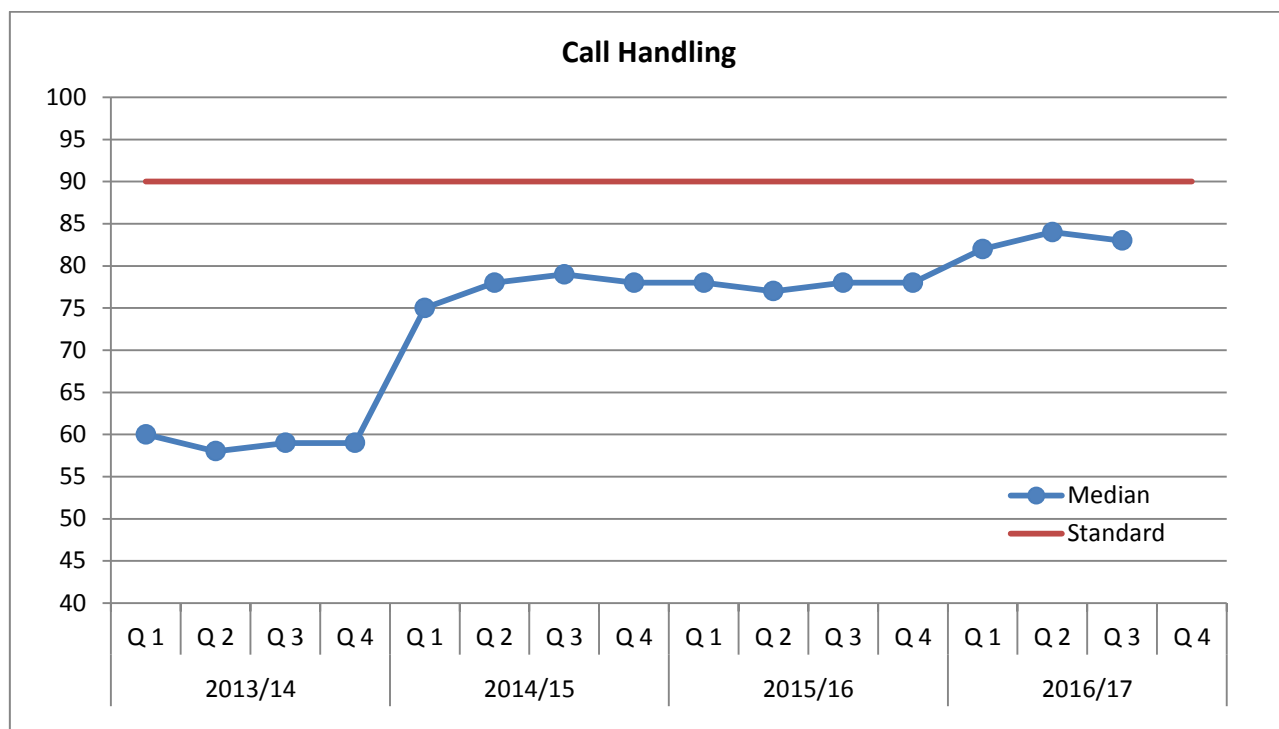
Call Handling

## 2.3 Fire Engine Availability - Wholetime, Day Crewing and Day Crewing Plus

This indicator measures the availability of fire engines that are crewed by wholetime, day crewing and day crewing plus shifts. It is measured as the percentage of time a fire engine is available to respond compared to the total time in the period.

Fire engines are designated as unavailable for the following reasons:

- *Mechanical*
- *Crew deficient*
- *Engineer working on station*
- *Alternate crew*
- *Appliance change over*

- *Debrief*
- *Lack of equipment*
- *Miscellaneous*
- *Unavailable*
- *Welfare*

Annual Standard: Above 99.5%

Quarter three availability 99.50%, previous year quarter three 99.32%.
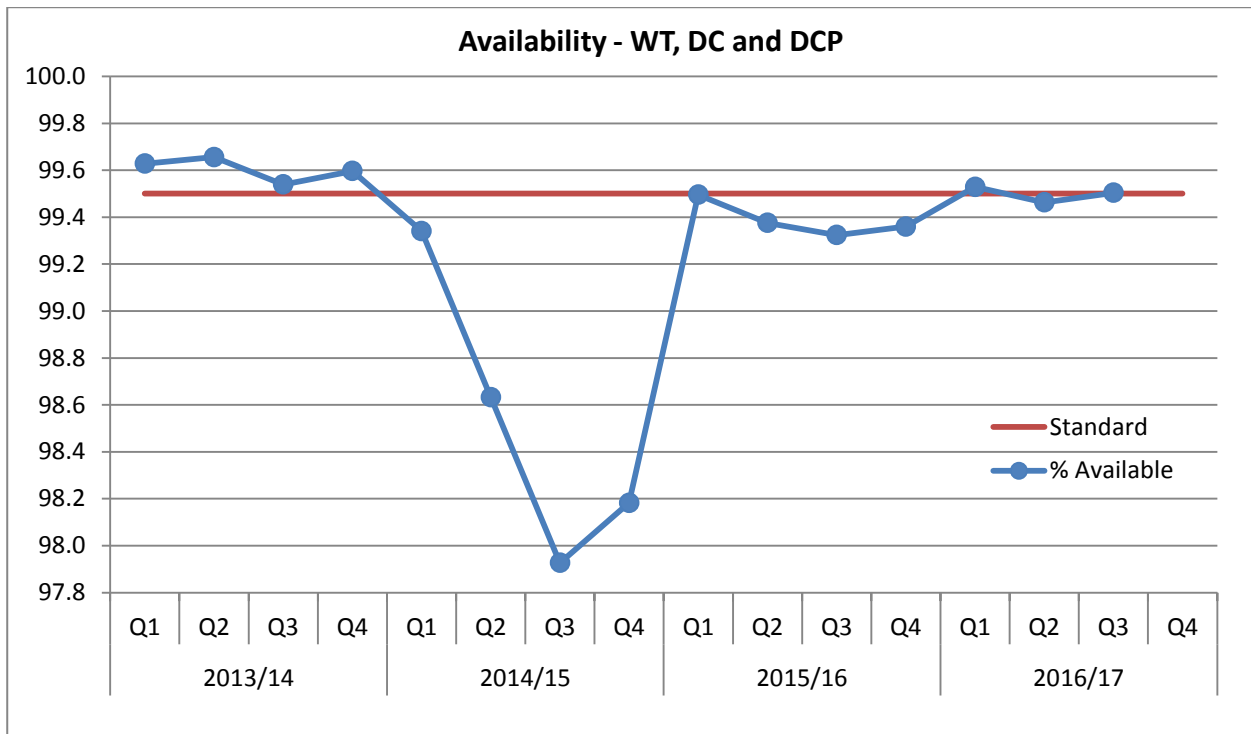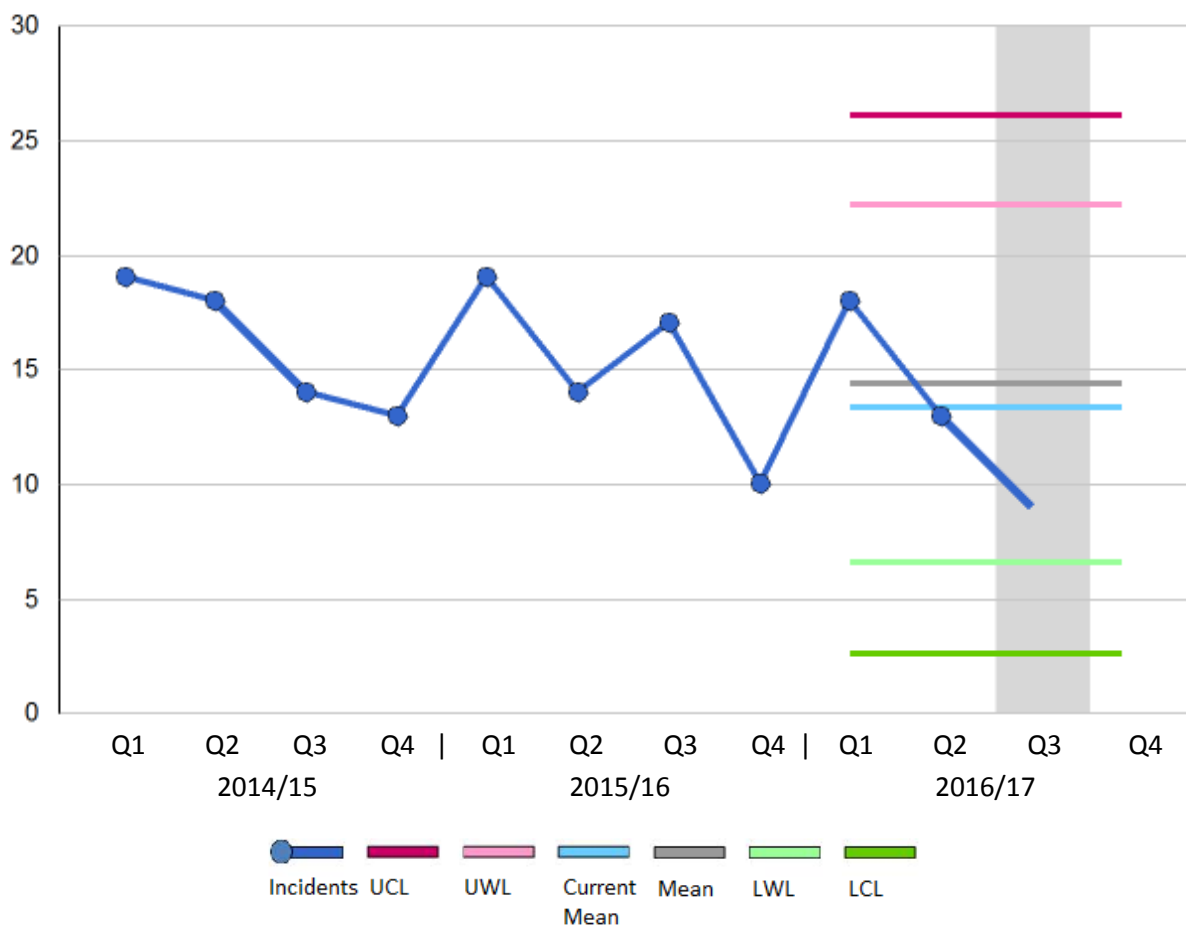
2.5 Staff Accidents

The number of staff accidents.

An improvement is shown if the average number of staff accidents per quarter is lower than the mean of the previous three years.

Number of staff accidents in quarter three 9. Previous year quarter three 17.

	Year to Date	2016/17 Quarter 3	*Previous year to date*	*2015/16 Quarter 3*
Total number of staff accidents	40	9	50	17

The grey line on the XmR chart denotes the mean quarterly activity over the previous 3 years and the pale blue line the current	Current Mean	3 year Mean	Quarterly Mean		
			2015/16	2014/15	2013/14
	13	14	15	16	12

3.1 Progress Against Savings Programme

The total cumulative value of the savings delivered to date compared to the year's standard and the total.

Budget to end of quarter three £39.6 million. The spend for the period is £37.9 million.

As a public service we are committed to providing a value for money service to the community and it is important that once a budget has been agreed and set, our spending remains within this.

The annual budget for 2016/17 is £55.7 million, with a budget to 31 December of £39.6 million. The spend for the same period was £37.9 million. This gives an under spend for the period of £1.7 million. This will be transferred into the capital funding reserve to support future capital investments outlined in the agreed capital programme.

Variance: | -3.05%

3.2 Overall User Satisfaction

The percentage of people who were satisfied with the service received as a percentage of the total number of people surveyed.

People surveyed include those who have experienced an accidental dwelling fire, a commercial fire or a special service incident that we attended.

The standard is achieved if the percentage of satisfied responses is greater than the standard.

50 people were surveyed in quarter three, 50 responded that they were very or fairly satisfied.

Question	Total	Number Satisfied	% Satisfied	% Standard	% Variance
Taking everthing in to account, are you satisfied, dissatistfied, or neither with the service you received from Lancashire Fire and Rescue Service?	1458	1446	99.18%	97.50%	1.72%

There have been 1458 people surveyed since April 2012.

In quarter three of 2016/17 - 50 people were surveyed. 50 responded that they were 'very satisfied' or 'fairly satisfied' with the service they received.

4.1 Overall Staff Engagement

Three times a year all staff are asked the same questions in an online survey covering feelings of pride, advocacy, attachment, inspiration and motivation - factors that are understood to be important features shared by staff who are engaged with the organisation. The survey mirrors the questions asked by the Civil Service People Survey.

From these responses: An index score to show the degree to which the respond group answers positively to a number of questions about their engagement with LFRS.

This is calculated by attributing a weighting to each of the five possible answers ranging from 0% to 100%, in 25% increments. The percentage scores are then totalled and divided by the number of questions (5). This individual person score is then totalled across the service then divided by the number of respondents.

An improvement is shown if the percentage engagement index is greater than the comparable quarter of the previous year.

An engagement index score is derived from the answers given by staff about questions relating to how engaged they feel with the Service.

Staff engagement index for period two is 64%, based upon 141 replies. This is 4% higher when compared against the same period last year.

2016/17			2015/16		
Period	Number of replies	Engagement index	Period	Number of replies	Engagement index
1	220	62%	1	199	58%
2	141	64%	2	148	60%
3			3	195	56%

4.2.2 Staff Absence - Retained Duty System

The percentage of contracted hours lost due to sickness for all RDS staff. An individual's sickness hours are only counted as absent where they overlap with their contracted hours.

Cumulative retained absence, as a percentage of available hours of cover at end of quarter three, 0.63%

Annual Standard: Not more than 2.5% lost as % of available hours of cover.
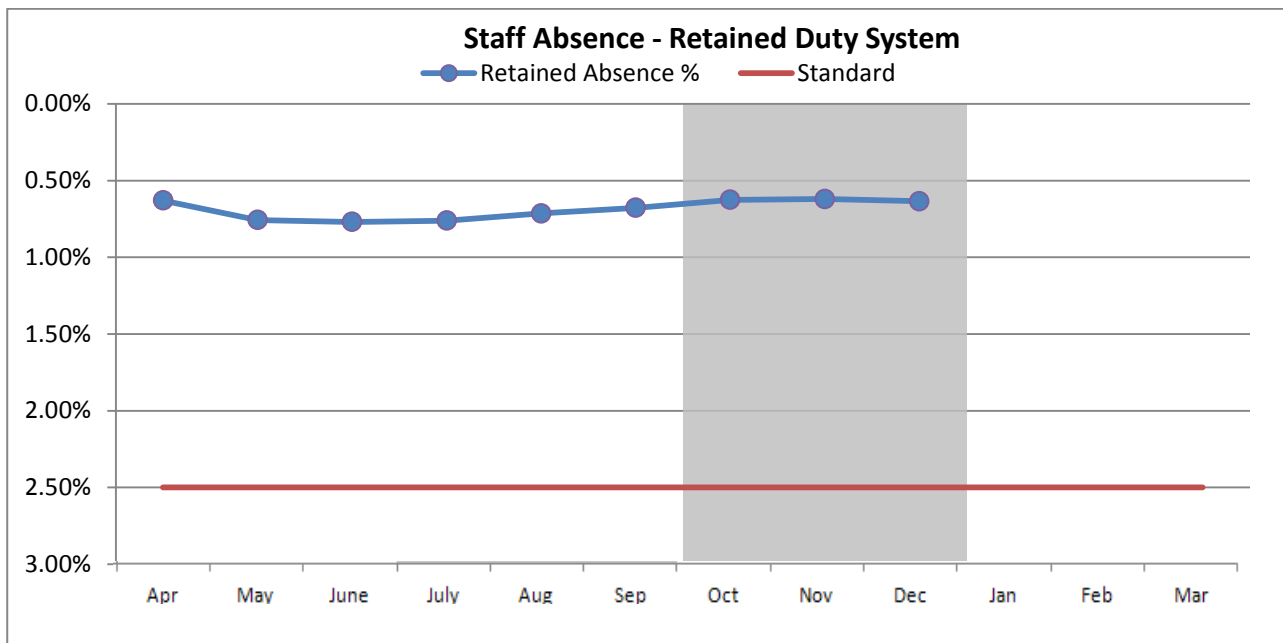
| Cumulative retained absence (as % of available hours of cover) | 0.63% |

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