

Lancashire Combined Fire Authority Performance Committee

Wednesday, 5 March 2025, at 10.00 am in the Main Conference Room,
Service Headquarters, Fulwood.

Minutes

Present:	
Councillors	
P Britcliffe	
M Clifford	
F De Molfetta (Chair)	
N Hennessy	
T Hurn	
D O'Toole	
P Rigby	
M Salter	
B Yates	

Officers
J Charters, Chief Fire Officer (LFRS) J Rossen, Area Manager, Head of Service Delivery (LFRS) S Barnes, Station Manager, Protection Transformation Manager (LFRS) J Kirton, Communications Officer (LFRS) L Barr, Member Services Officer (LFRS)
In attendance
J English, FBU Representative

23/24	Apologies For Absence
	Apologies were received from County Councillor Hasina Khan.
24/24	Disclosure of Pecuniary and Non-Pecuniary Interests
	None received.
25/24	Minutes of Previous Meeting
	Resolved: - That the Minutes of the last meeting held on the 04 December 2024 be confirmed as a correct record and signed by the Chair.

Q3 Performance Management Information

The Chair welcomed Jess Kirton, Communications Officer, who was present to observe, to the meeting.

The Chief Fire Officer introduced Station Manager Steven Barnes, Fire Protection, who would provide Members with a presentation on Building Regulation Consultations in the following agenda item.

The Chief Fire Officer presented a comprehensive report to the Performance Committee. This was the 3rd quarterly report for 2024/25 as detailed in the Community Risk Management Plan 2022-2027.

In quarter 3, two Key Performance Indicators (KPI), 1.2.1 Staff Absence Wholetime (WT), and 2.9 Business Fire Safety Checks, were shown in positive exception and two Key Performance Indicators were shown in negative exception. These were 1.2.3 Staff Absence Greenbook and 3.1 Critical Fire Response – 1st Fire Engine Attendance.

Members examined each indicator in turn focusing on those KPIs in exception as follows:

KPI 1 – Valuing our people so that they can focus on making Lancashire safer**1.1 Overall Staff Engagement**

Members received an update on how staff were engaged during the period.

From October to December 2024, 33 station visits were carried out by Principal Officers and Area Managers as part of the service-wide engagement programme. In addition, three online engagement events were held with on-call units across the county.

Forty-eight wellbeing interactions were undertaken ranging from workshops with crews to wellbeing support dog interactions.

The views of staff were sought by surveys in relation to a cleaning contract and to obtain feedback about the Service's Celebration of our People event. Furthermore, a staff focus group was held which focussed on evaluation. A pulse survey to measure levels of staff engagement began in December with a January closing date.

The Service engaged with staff over several topics that related to the Service's fleet and equipment, which included firefighting gloves and washing equipment for decontaminating fire helmets. Staff engagement over improvement works at Blackpool Fire Station continued and was undertaken in relation to office moves at Service Headquarters. The Service's employee voice groups were consulted over a range of topics that included an upcoming positive action campaign.

As previously reported: A comprehensive staff survey was undertaken periodically

to gain insight from all staff on a range of topics which included leadership, training and development, health and wellbeing, and equality, diversity, and inclusion. The feedback was used to shape future activity and bring about improvements and new ideas. The survey included a staff engagement index which was a measure of overall staff engagement based on levels of pride, advocacy, attachment, inspiration, and motivation. The current staff engagement score index was 74% (2023).

Year	Engagement Index	Response Rate
2023	74%	49%
2020	79%	44%
2018	70%	43%
2016	64%	31%

The engagement index was calculated based on five questions that measured pride, advocacy, attachment, inspiration, and motivation; factors that were understood to be important features shared by staff who were engaged with the organisation.

For each respondent, an engagement score was calculated as the average score across the five questions, where strongly disagree was equivalent to 0, disagree was equivalent to 25, neither agree nor disagree was equivalent to 50, agree was equivalent to 75 and strongly agree was equivalent to 100. The engagement index was then calculated as the average engagement score in the organisation. This approach meant that a score of 100 was equivalent to all respondents saying strongly agree to all five engagement questions, while a score of 0 was equivalent to all respondents saying strongly disagree to all five engagement questions.

During the survey period, the corporate communications department visited wholetime and on-call crews on 51 occasions to encourage participation in the survey. Five focus groups were held with on-call units by the Service's independent researcher to obtain qualitative feedback on on-call specific matters, to complement the survey data.

1.2.1 Staff Absence Wholetime

This indicator measured the cumulative number of shifts (days) lost due to sickness for all wholetime staff divided by the total average strength.

Annual Standard: Not more than 8 shifts lost.
 Annual Shifts Lost ÷ 4 quarters = 2

Quarter shifts lost: 1.071
 Cumulative total number of shifts lost: 4.271

The Chief Fire Officer explained that, from previous reports, the KPI had been an area of challenge but was now in positive exception which was contributed to by the measures the Service had taken to manage absence. The Service had an Absence Management Policy which detailed its approach to how it would manage absence to ensure that staff time was managed effectively, but also members of staff were supported back to work or exited from the Service in a compassionate

way.

The Human Resources (HR) system ITrent automatically generated monthly reports to line managers and HR Business Partners in relation to employees and the periods and reasons for absence, which were closely monitored. Where employees were absent due to a mental health or stress related condition, they were referred to the Occupational Health Unit (OHU) as early as possible. Employees returning to work had a return-to-work interview and stress risk assessment, or individual health risk assessments were completed where required.

The Service had several support mechanisms available to support individuals to return to work or be exited as appropriate which included guidance from Occupational Health, access to Trauma Risk Management (TRiM), access to the Employee Assistance Programme (EAP), and the Firefighters Charity.

Where an employee did not return to work in a timely manner, an absence review meeting would take place with the employee, the line manager, and a representative from Human Resources. The meetings were aimed at identifying support to return an individual back to work which could include modified duties for a period, redeployment, but ultimately could result in dismissal, or permanent ill health retirement from the Service.

The Absence Management Policy detailed when a formal review of an employee's performance levels would normally take place. In terms of short-term absence, a formal review would take place where an employee had 3 or more periods of absence in 6 months, or an employee had 14 days absent. In terms of long-term absence, a formal review would normally take place at 3, 6, 9 and 11 months.

To ensure that Lancashire Fire & Rescue Service (LFRS) was managing sickness levels in line with good practice nationally, the Service undertook a peer review and learning with another Service. The work led to a number of updates and improvements to sickness procedures.

The Chief Fire Officer highlighted that the graph on Page 40 of the agenda pack showed a downward trend with levels of absence improving every quarter.

The Chief Fire Officer provided Members with an extract (Page 32 Section 7: Summary Performance – BVP12i, BVP 12ii), from Cleveland Fire and Rescue Service's National Sickness Absence Report Quarter 3 2024/25. LFRS was listed at the bottom of both charts for Wholetime & Control, and Wholetime, Control and Green Book, as having the lowest number of duty days lost per staff member. The National Average Number of Duty Days lost for Wholetime and Control staff was 7.56 from April 2024 – December 2024, with the National Average of 7.14 days for Wholetime, Control and Green Book staff. The number of days lost for LFRS were 4.27 and 4.51 respectively.

In response to a question from County Councillor O'Toole regarding the periods of quarters, the Chief Fire Officer explained that the quarters followed the financial year with the first quarter occurring from April to June. County Councillor O'Toole commented that it was useful information in relation to statistics as absences could be seasonal i.e. winter flu.

County Councillor Hennessy congratulated those involved in improving absence levels and praised the work undertaken with another FRS to implement shared learning. The Chief Fire Officer stated that the learning had resulted in increased scrutiny, changes to policy, and changes to the management of sickness absences.

1.2.2 Staff Absence On-Call (OC)

This indicator measured the percentage of contracted hours lost due to sickness for all on-call contracted staff.

Annual Standard: No more than 2.5% lost as a % of available hours of cover.

Cumulative on-call absence (as a % of available hours cover) at the end of the quarter, 1.23%.

1.2.3 Staff Absence Greenbook

This indicator measured the cumulative number of shifts (days) lost due to sickness for all green book support staff divided by the average strength.

Annual Standard: Not more than 8 shifts lost.

Annual Shifts Lost ÷ 4 quarters: 2

Quarter shifts lost: 2.170

Cumulative shifts lost: 5.098

The negative exception report was due to the number of shifts lost through absence per employee being above the Service target for quarter 3.

The agreed target performance level was 8 shifts lost per employee per year for Green Book staff, which equated to a target of 6.00 shifts lost per employee per year for quarters 1 to 3. The actual shifts lost for the period for this group of staff was 5.10, which was 0.90 below target. During the same period of the previous year, 6.22 shifts were lost which was a reduction of 1.12 shifts lost per green book employee compared to the same period last year.

During April – December 2024, absence statistics showed non-uniformed personnel absence above target for the period. During the quarters 1 to 3, 1,305 non-uniformed absence shifts lost = 5.10 against a target of 6.00. There was one case of long-term absence which spanned over the total of the 3 months which related to Mental Health - Stress.

The number of long-term absence cases recorded in the quarter rose from 7 in Q2 to 13 in Q3:

Reason	Case/s
Musculo Skeletal	6
Mental Health	3
Other absence types	4

During the quarter, 406 shifts were lost as a result of the 13 cases of long-term absences, this was in comparison to 185 shifts lost during the previous quarter. These cases accounted for 1.59 shifts lost per person over the quarter and an increase of 0.85 shifts lost from the previous quarter.

Respiratory related absences accounted for 40 lost shifts, which included Coronavirus absence. This was compared to 27 shifts lost in Q2. This showed an increase of 0.05 shifts lost from the previous quarter.

The Service had an Absence Management Policy which detailed its approach to how it would manage absence to ensure that staff time was managed effectively, but also members of staff were supported back to work or exited in from the Service in a compassionate way.

The Human Resources (HR) system ITrent automatically generated monthly reports to line managers and HR Business Partners in relation to employees and the periods and reasons for absence which were closely monitored. Where employees were absent due to a mental health or stress related condition, they were referred to the Occupational Health Unit (OHU) as early as possible. Employees that returned to work had a return-to-work interview and stress risk assessment, or individual health risk assessments were completed where required.

The Service had several support mechanisms available to support individuals to return to work or be exited as appropriate which included guidance from Occupational Health, access to Trauma Risk Management (TRiM), access to an Employee Assistance Programme and the Firefighters Charity.

Where an employee did not return to work in a timely manner, an absence review meeting would take place with the employee, the line manager, and a representative from Human Resources. The meetings were aimed at identifying support to return an individual back to work which could include modified duties for a period, redeployment, but ultimately could result in dismissal or permanent ill health retirement from the Service.

The Absence Management Policy details when a formal review of an employee's performance levels would normally take place. In terms of short-term absence, a formal review would take place where an employee had 3 or more periods of absence in 6 months, or an employee had 14 days absent. In terms of long-term absence, a formal review would normally take place at 3, 6, 9, and 11 months.

The Chief Fire Officer stated that when the figures were reported annually, the KPI was in positive exception which highlighted an anomaly with quarterly reporting. He suggested that the KPI be taken through Planning Committee to set an Upper and Lower XmR, (Value [X] over a moving [m] range [R]), limit of 10% of the current standard so consequently, if the number of shifts shifted between the two limits, it would not fall into negative or positive exception. Members agreed to taking the KPI to Planning Committee to add XmR limits with commencement in quarter 1 2025/26.

County Councillor Rigby congratulated the Chief Fire Officer and all who

contributed on the impressive figures.

1.3.1 Workforce Diversity

This indicator measured diversity as a percentage.

Combined diversity percentage of grey book (operational) and green book (support) staff. The percentages outside of the brackets represented the current quarter, with the percentage within the brackets illustrating the same quarter of the previous year:

Gender:	Female 23%(20%)	Male 77%(80%)	
Ethnicity:	BME 4%(3%)	White 92%(94%)	Not stated
Sexual Orientation:	LGBT 4%(4%)	Heterosexual 60%(56%)	Not stated
Disability:	Disability 3%(3%)	No disability 94%(94%)	Not stated

Diversity percentage by Grey Book Staff and Green Book Staff. Counts included double counts if the member of staff was dual contracted between Grey and Green Book.

Separate diversity percentage of grey book (operational) and green book (support) staff:

Gender:	Female	Grey book 11%	Green book 61%
	Male	Grey book 89%	Green book 39%
Ethnicity:	BME	Grey book 3%	Green book 6%
	White	Grey book 93%	Green book 85%
	Not stated	Grey book 4%	Green book 9%
Sexual Orientation:	LGBT	Grey book 4%	Green book 3%
	Heterosexual	Grey book 59%	Green book 64%
	Not stated	Grey book 37%	Green book 33%
Disability:	Disability	Grey book 3%	Green book 5%
	No disability	Grey book 95%	Green book 89%
	Not stated	Grey book 2%	Green book 6%

County Councillor O'Toole stated that asking for the personal details of staff was unnecessary and not relevant to their ability to do their job. The Chief Fire Officer advised that the diversity of Fire Service staff and effectiveness to change the workforce profile was a focus of the Service, Home Office and HMICFRS. The Service had an annual EDI action plan which detailed the Service's aims to better reflect the community it serves. Whilst there was a Service KPI, there were no numerical diversity targets in LFRS and the submission of equal opportunities monitoring information by staff was entirely voluntary and not obligatory. In addition, the Chief Fire Officer reminded Performance Committee that approval was given by Members through Planning Committee to present the data in the

current format.

County Councillor Clifford stated that the LGA Fire Essentials training provided the reason as to why the information was needed. The next HMI inspection would focus heavily on EDI and it was important that the information was monitored and available. He recommended more training for Members to be brought up to date with topics of importance.

1.3.2 Workforce Diversity Recruited

This new indicator measured workforce diversity recruited as a percentage.

Combined diversity percentage of grey book (operational) and green book (support) staff. The percentages outside of the brackets represented the current quarter, with the percentage within the brackets illustrating the same quarter of the previous year:

Gender:	Female 39%(29%)	Male 61%(71%)	
Ethnicity:	BME 7%(5%)	White 65%(88%)	Not Stated 28%(7%)
Sexual Orientation:	LGBT 3%(4%)	Heterosexual 85%(89%)	Not stated 12%(7%)
Disability:	Disability 7%(2%)	No disability 88%(94%)	Not stated 5%(3%)

During quarter 3, there were a total of 40 new entrants.

It was noted that a further breakdown of the data would not be provided as it may enable the identification of individuals, due to the small numbers of persons recruited during the period.

1.4 Staff Accidents

This indicator measured the number of accidents which occurred to staff members at work within the quarter: Wholetime, On-Call and Greenbook.

Total number of staff accidents, 14 for quarter 3; year to date 44; previous year to date 46. Quarterly activity increased 16.67% (2 incidents) over the same quarter of the previous year.

KPI 2 - Preventing, fires and other emergencies from happening and Protecting people and property when fires happen

2.1 Risk Map Score

This indicator measured the fire risk in each Super Output Area (SOA), of which there were 942. Risk was determined using fire activity over the previous 3 fiscal years along with a range of demographic data, such as population and deprivation. The County risk map score was updated annually and presented to the Performance Committee in the quarter 1 reporting period.

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

$(\text{Dwelling Fires} \div \text{Total Dwellings}) + (\text{Dwelling Fire Casualties} \div \text{Resident Population} \times 4) + \text{Building Fire} + (\text{IMD} \times 2) = \text{Risk Score}.$

The current score was 30,750 and the previous year's score was 31,170 which meant that the fire risk continued to reduce.

County Councillor Salter asked for clarification on the process of identifying risk for areas, particularly the higher-level risk grades. The Chief Fire Officer explained that the count of risk areas had shown an improving position. The Risk Map was refreshed annually in quarter 1 and would remain unchanged throughout the year. Over the past 10 years, the dark blue areas (Low Risk Grade) had become more expansive and the red areas (Very High Risk Grade), and yellow areas (High Risk Grade) had decreased significantly. He referred Members to the formula to calculate the Fire Risk Score in each Super Output Area on Page 49 of the agenda pack. The objective was to reduce the risk in all areas down to low which had been effectively achieved each year using the risk map approach. The formula used historic incident data and included a calculation around the Index of Multiple Deprivation (IMD) to determine the risk to each SOA. At a future point, due to extensive reduction of risk for SOAs, it was probable that the risk map would need to be reviewed.

County Councillor O'Toole asked, and the Chief Fire Officer confirmed that the map was comprised of all types of fires in dwellings which included accidental and deliberate. County Councillor O'Toole suggested that accidental and deliberate fires be separated on the map as it could affect the numbers. The Chief Fire Officer stressed the importance of arson risk reduction work as part of the overall risk reduction strategy and that this was the reason that the formula included both accidental and deliberate fires. The Chief Fire Officer informed Members that the Service carried out work to manage arson risk in communities which was assisted by successful prosecutions and sentencing. County Councillor Hennessy pointed out that the figures were broken down on Page 51 of the agenda pack and stated that deliberate fires were difficult to predict.

Station Manager, Steven Barnes, advised that in respect of arson, the Service carried out preventative measures such as HFSCs and educating residents to reduce risk. The Service also worked with partners such as Lancashire Constabulary to share intelligence around arson vulnerability to reduce risk of fires in circumstances of a known threat. In such a case, the Service would engage with an individual regarding their property and put measures in place. He emphasised that there was a conscious effort to reduce arson threat.

2.2 Overall Activity

This indicator measured the number of incidents that LFRS attended with one or more pumping appliances. Incidents attended included fires, special service calls, false alarms and collaborative work undertaken with other emergency services i.e.: missing person searches on behalf of the Lancashire Constabulary (LanCon)

and gaining entry incidents at the request of the North West Ambulance Service (NWAS).

Incidents attended, year to date 12,947; previous year to date 13,716. Quarterly activity increased 2.07% over the same quarter of the previous year.

In quarter 3, the Service attended 4,278 incidents. The report presented a chart which represented the count and percentage that each activity had contributed to the overall quarter's activity:

- Total False Alarm Calls (due to apparatus, good intent and malicious) – 1916, 45%
- Total Primary Fire Calls (accidental dwelling / building and deliberate dwelling / commercial fires and other primary fires) – 437, 10%
- Total Secondary Fire Calls (deliberate and accidental fires) – 613, 15%
- Total Special Service Calls (critical incidents, gaining entry, RTCs, Flooding and other critical incidents) – 1286, 30%

2.3 Accidental Dwelling Fires (ADF)

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'.

Members noted that a primary fire was one involving property (excluding derelict property) or any fires involving casualties, rescues or any fire attended by 5 or more pumping appliances.

Accidental Dwelling Fires, 189 in quarter 3; year to date 518; previous year to date 553. Quarterly activity increased 5.59% over the same quarter of the previous year, with the cumulative to date decreasing by 6.33%.

2.3.1 ADF – Harm to people: Casualties

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

A slight injury was defined as; a person attending hospital as an outpatient (not precautionary check). A serious injury was defined as; at least an overnight stay in hospital as an in-patient.

Fatal	2 in quarter 3; year to date 7; previous year to date 3
Injuries appear Serious	4 in quarter 3; year to date 6; previous year to date 8
Injuries appear Slight	9 in quarter 3; year to date 24; previous year to date 14

Quarterly activity increased 200.00% over the same quarter of the previous year.

The Chief Fire Officer informed Members that sadly, 2 fatalities had occurred in quarter 3. One 58-year-old male from Blackburn with Darwen and one 58-year-old male from South Ribble lost their lives. Both fatalities were subject to ongoing investigations.

2.3.2 ADF – Harm to property: Extent of damage (fire severity)

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'.

Extent of fire, heat and smoke damage was recorded at the time the 'stop' message was sent and included all damage types.

The table in the report showed a breakdown of fire severity with a directional indicator that compared:

Current quarter, combined percentage of 86% against same quarter of the previous year, combined percentage of 90%.

Combined quarterly percentage had therefore decreased 4.26% over the same quarter of the previous year.

2.4 Accidental Building Fires (ABF) (Commercial Premises)

This indicator reported the number of primary fires where a building had been affected (which was other than a dwelling or a private building associated with a dwelling), and the cause of fire had been recorded as 'Accidental' or 'Not known'.

ABF (Commercial Premises), 57 in quarter 3; year to date 188; previous year to date 185. Quarterly activity decreased 1.72% over the same quarter of the previous year.

2.4.1 ABF (Commercial Premises) – Harm to property: Extent of damage (fire severity)

This indicator reported the number of primary fires where a building had been affected (which was other than a dwelling or a private building associated with a dwelling), and the cause of fire had been recorded as 'Accidental' or 'Not known'.

Extent of fire, heat and smoke damage was recorded at the time the 'stop' message was sent and included all damage types.

The table in the report showed a breakdown of fire severity with a directional indicator that compared:

- current quarter, combined percentage of 70% against
- same quarter of the previous year, combined percentage of 77%.

Combined quarterly percentage had therefore decreased 7.4% over the same quarter of the previous year.

2.5 Accidental Building Fires (Non-Commercial Premises)

This indicator reported the number of primary fires where a private garage, private shed, private greenhouse, private summerhouse, or other private non-residential

building had been affected and the cause of fire had been recorded as 'Accidental' or 'Not known.'

ABF (Non-Commercial Premises), 16 in quarter 3; year to date 58; previous year to date 62. Quarterly activity increased 23.08% over the same quarter of the previous year.

2.5.1 ABF (Non-Commercial premises: Private garages and sheds) – Harm to property: Extent of damage (fire severity)

This indicator reported the number of primary fires where a private garage, private shed, private greenhouse, private summerhouse, or other private non-residential building had been affected and the cause of fire had been recorded as 'Accidental' or 'Not known.'

Extent of fire, heat and smoke damage was recorded at the time the 'stop' message was sent and included all damage types.

The table in the report showed a breakdown of fire severity with a directional indicator that compared:

- current quarter, combined percentage of 37% against
- same quarter of the previous year, combined percentage of 31%.

Combined quarterly activity had therefore increased 6.7% over the same quarter of the previous year.

2.6 Deliberate Fires Total: Specific performance measure of deliberate fires

This indicator provided an overall measure of primary and secondary fires where the cause of fire had been recorded as deliberate.

Deliberate Fires – 440 in quarter 3; year to date 1,477; previous year to date 1,508. Quarterly activity increased 21.21% over the same quarter of the previous year.

2.6.1 Deliberate Fires – Dwellings

This indicator reported the number of primary fires where a dwelling had been affected and the cause of fire had been recorded as deliberate.

Deliberate Fires – Dwellings, 21 in quarter 3, year to date 63; previous year to date 70. Quarterly activity remained static over the same quarter of the previous year.

2.6.2 Deliberate Fires - Commercial Premises

This indicator reported the number of primary fires where the property type was a building, other than a dwelling or a private building associated with a dwelling, and the cause of fire had been recorded as deliberate.

Deliberate Fires – Commercial Premises, 31 in quarter 3; year to date 102;

previous year to date 105.

Quarterly activity decreased 6.06% over the same quarter of the previous year.

A second incident activity line was shown on the graph which excluded Crown premises which fell outside of the Service's legislative jurisdiction.

In response to a question from County Councillor Salter in relation to the reason for the drop in incidents (excluding Crown premises), for commercial premises in the months of November and December, the Chief Fire Officer stated that the successful work through BFSCs could be a significant factor in managing down the arson risk. The checks not only focused on the risks inside buildings but also external adjacent risks which had resulted in a reduction of incidents in every quarter. Having a separate line on the graph which excluded crown premises gave a true reflection of the number of incidents, and it was prudent to take a long-term view of spikes and drops in activity as there were many variables which could affect deliberate fire setting.

2.6.3 Deliberate Fires – Other (rubbish, grassland, vehicles etc).

This indicator reported the number of primary and secondary fires where the property type was other than a building, except where the building was recorded as derelict, and the cause of fire had been recorded as deliberate.

The majority of deliberate fires were outdoor secondary fires and included grassland and refuse fires. Derelict vehicle fires were also included under secondary fires.

Deliberate Fires – Other, 388 in quarter 3; year to date 1,312; previous year to date 1,333. Quarterly activity increased 25.57% over the same quarter of the previous year.

2.7 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 high.

An improvement was shown if:

- the total number of HFSC's completed was greater than the comparable quarter of the previous year; and
- the percentage of high HFSC outcomes was greater than the comparable quarter of the previous year.

HFSCs completed, 6,010 in quarter 3; year to date 18,185; previous year to date 17,465. Quarterly activity increased 4.9% against the same quarter of the previous year.

HFSCs with high-risk outcomes, Quarter 3, 51%; previous year Quarter 3, 54%.

High risk outcomes decreased 3% against the same quarter of the previous year.

The Chief Fire Officer informed Members that there had been an increase in productivity of HFSCs and BFSCs completed. The Service was required to submit a productivity and efficiency return to the Home Office (HO) which could change as the Service moved under the Ministry of Housing, Communities and Local Government (MHCLG). HFSCs were important in terms of influence and education and the number showed increases each quarter when compared to the previous year.

2.8 Numbers of prevention activities such as Childsafe, wasted lives etc

Members received an update on the number of sessions delivered against the following prevention activities during the quarter:

ChildSafe, 189 sessions delivered to 5,592 students;
RoadSense, 153 sessions delivered to 4,638 students;
SENDSafe, 2 sessions delivered to 55 students;
Wasted Lives, 5 sessions delivered to 590 students;
Biker Down, 5 sessions delivered to 130 attendees;
FIRES, 44 referrals opened prior to Q3 and carried over. 40 referrals received in Q3. 38 referrals closed in Q3. 48 referrals carried to 2024-25, Q3;
Partner Training (including care providers), 22 sessions delivered to 253;

Specific Education packages – delivered Water Safety, BrightSparx, ASB, Deliberate Fire Setting etc (Covers key stages 2, 3 and 4). 45 Bright Sparx sessions, delivered to 3,432 students. 8 virtual sessions delivered to 19 schools and 7,979 pupils.

Arson Threat Referrals – 186.

County Councillor Clifford stated that he had shared a Biker Down session locally on social media which had very quickly become fully booked. He asked if the Service needed to increase the number of Biker Down sessions offered. The Chief Fire Officer advised that the number of sessions offered was demand-led. Biker Down was a well-received product which had extensive positive feedback further to courses being delivered.

2.9 Business Fire Safety Checks

This indicator reported the number of Business Fire Safety Check (BFSC's) completed and whether the result was satisfactory or unsatisfactory. If the result of a BFSC was unsatisfactory, fire safety advice would be provided to help the business comply with The Regulatory Reform (Fire Safety) Order 2005. If critical fire safety issues were identified, then a business safety advisor would conduct a follow-up intervention.

- The pro rata BFSC target was delivered through each quarter.

A +/-10% tolerance was applied to the completed BFSCs and the year to date (YTD) BFSCs, against both the quarterly and YTD targets. When both counts were

outside of the 10% tolerance, they would be deemed in exception which enabled local delivery to flex with the needs of their district plan over the quarters.

BFSCs completed, 883 in quarter 3; Cumulative 2,750; YTD target, 1,875; previous YTD 2,581.

Cumulative YTD BFSCs being satisfactory, 2,392. Top 5 completed satisfactory premise types (Shops 895, Factories/Warehouses 324, Other Workplaces 310, Offices 240, Other Public Premises 187).

Cumulative YTD BFSCs being unsatisfactory, 358. Top 5 completed unsatisfactory premise types (Shops 165, Factories/Warehouses 50, Licensed Premises 34, Other Workplaces 31, Offices 21).

The positive exception report was due to the number of completed Business Fire Safety Checks (BFSCs) being greater than 10% of the quarterly target, and the cumulative year to date target.

Service delivery personnel had carried out BFSCs in their respective districts over the last 2 years, and BFSC work was now embedded into business-as-usual activity. The KPI dashboard and District Intel Profiles were used to identify and target both the business types and business locations for that activity.

County Councillor Nikki Hennessy congratulated the Team for their great work on BFSCs as it was relatively new process.

The Chief Fire Officer highlighted that the risks identified were 'new risk', as the types of premises that were checked, previously would not have featured highly in terms of the Service's Risk Based Intervention Programme and, therefore, the Service would not have dedicated resources to visit them. Delivering BFSCs through operational crews meant that the risk could be reduced within 'unsatisfactory' premises noted within the Performance report.

Steven Barnes advised Members that all wholetime operational staff were trained to carry out BFSCs in LFRS, which was extremely positive and under-pinned the high levels of performance.

2.9.1 Fire Safety Activity (including Business Fire Safety Checks)

This indicator reported the number of Fire Safety Enforcement inspections carried out within the period which resulted in supporting businesses to improve and become compliant with fire safety regulations or where formal action of enforcement and prosecution had been taken for those that failed to comply.

An improvement was shown if the percentage of audits that required formal activity was greater than the comparable quarter of the previous year.

Total Fire Safety Enforcement Inspections, Quarter 3, 499;
Formal Activity in Quarter 3, 8%, same quarter of the previous year 5%.
Quarterly activity remained static against the same quarter of the previous year.

Members noted the cumulative number of Fire Safety inspections undertaken for 2024/25 was 1,560.

2.10 Building Regulation Consultations (BRC) (number and completed on time)

Where the Regulatory Reform (Fire Safety) Order 2005 applied to premises (or would apply following building work) the building control body must consult with LFRS for comments / advice regarding fire safety. LFRS should make any comments in writing within 15 working days from receiving a BRC.

This indicator provided Members with information on the number of building regulations consultations received during the period together with improvement actions.

In Quarter 3, Building Regulation Consultations received 226, of which 219 were completed within the timeframe (LFRS should make comments in writing within 15 working days of receiving a BRC).

The Chief Fire Officer highlighted that, in the last HMI inspection, the Service received an 'area for improvement' whereby completion percentage rates at that time were 50-60% compared to the high 90s currently. Station Manager, Steven Barnes, would explain the journey in the following agenda item.

KPI 3 - Responding to fire and other emergencies quickly

3.1 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 included call handling and fire engine response time for the first fire engine attending a critical fire, 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 were determined by the risk map score and subsequent risk grade for the location of the fire.

Standards were achieved when the time between the 'Time of Call' (TOC) and 'Time in Attendance' (TIA) of the first fire engine arriving at the incident, averaged over the quarter, was less than the relevant response standard. Expressed in minutes & seconds.

Critical Fire Response – 1st Fire Engine Attendance, Quarter 3, Very High 06:03 min; High 06:09 min, Medium 07:35 min, Low 08:14 min.

Q3 overall 07:37 min. Year to date overall 07:39 min. Previous year to date overall 07:24 min.

The negative exception report was due to the critical 1st fire appliance average response time to very high risk areas marginally exceeding the standard in quarter 3.

The standard within a very high risk area was 6 minutes. The average time achieved during quarter 3 exceeded this by 3 seconds.

The monthly average response times to very high risk areas:

October	November	December	Quarter 3
05:30	05:41	07:19	06:03

The monthly average response times showed that only December exceeded the 6 minute average, with an average time of 07:19 being made up of just three incidents, of which two recorded a response longer than six minutes.

The first incident was within a domestic property where unattended food on a hob activated smoke detection. The nearest pump to the incident was engaged at another incident, which led to the first attending pump responding from another station area, hence an extended run time.

The second incident involved dried towels within a kitchen of a retail premises that had self-combusted due to oils within the cloths. The delay was due to the nearest appliance being engaged at another incident.

Response times were consistently monitored and, where they did not meet the target, the reason why was reported on and then scrutinised at regular performance monitoring meetings. This allowed for trends to be identified, and improvements implemented, as necessary.

County Councillor Clifford commented on the Communications social media post in relation to the potential combustion risk when drying oily cloths in a dryer which he was not aware of.

3.2 Critical Special Service 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 standard included how long it took the first fire engine to respond to critical special service (non-fire) incidents where there was a risk to life such as road traffic collisions, rescues, and hazardous materials incidents. For these critical special service call incidents there was a single response standard of 13 minutes (which measured call handling time and fire engine response time).

Critical Special Service Response – 1st Fire Engine Attendance, 08:50 min in quarter 3; year to date 08:36 min; previous year to date 08:34 min.

3.3 Total Fire Engine Availability

This indicator measured the availability of the 1st fire engine at each of the 39 fire stations. It was measured as the percentage of time the 1st fire engine was available to respond compared to the total time in the period.

Standard: to be in attendance within response standard target on 90% of occasions.

Total Fire Engine Availability, 89.30% in quarter 3; year to date 87.45%; previous year to date 88.59%.

Quarterly availability increased 0.84% over the same quarter of the previous year.

A progress update was provided up to the end of quarter 3.

Overall availability across all stations for the quarter recorded 88.30%, with the month of December exceeding the 90% standard, recording 90.35%.

The availability by each of the stations designated first pump crewing type during quarter 3:

Wholetime – 99.39%

Day Crewing Plus – 98.85%

Flexi Day Crewing – 99.42%

On-Call – 76.43%

Total – 89.30%

Whilst all the Whole-Time (WT) appliances achieved exceptional availability, the 1st appliance at the wholly On-Call stations contributed to the availability falling below the 90% standard. However, throughout quarter 3, LFRS had seen a significant increase in On-Call availability.

Actions being taken to improve performance:

- The On Call Improvement Programme (OCIP) was driving transformation across the Service with several workstreams to improve recruitment, development, and retention.
- A shortage of staff with the Officer in Charge (OIC) skill had been a significant contributing factor to low On-Call availability. On-Call Support Officers (OCSOs) had worked with station-based staff and management, together with the Leadership and Development Centre, to support those in development and identify opportunities for staff to acquire skills earlier in their career.
- Incident Command trainers had reviewed the process for On-Call Incident Command Courses, which had resulted in a significant uplift in staff trained as OICs in 2024.
- On-Call Performance Management training for Station Managers and Unit Managers was completed, which included the roll-out of sector-leading

innovative software for On-Call Availability, Recruitment and Skills (OARS). The software had improved the efficiency and effectiveness of workforce planning, development, and performance. OARS was the first of its kind nationally, and the Service demonstrated the project and software as best practice at the NFCC On-Call Conference in 2024.

- On-Call recognition events commenced in Q3, to acknowledge the dedication and efforts of the Service's On-Call firefighters, their families, and their employers.

The Chief Fire Officer advised that a lot of work had been undertaken to improve on call performance and it was the amalgamation of that work that had resulted in the improvement of on-call availability. Since August 2024, there had been an upward momentum in the availability of on-call pumps. Quarter 3 was the first quarter that had shown the positive impact of the hard work with the target being exceeded.

KPI 4 - Delivering value for money in how we use our resources

4.1 Progress Against Allocated Budget

Members received an update on spend against the approved budget for the year.

The annual budget for 2024/25 was set at £75.1 million. Spend at the end of December 2024 was £51.8 million. The annual forecast was £75 million, which was a small underspend of (£0.1) million.

The revised capital budget for 2024/25 was £12 million and spend at the end of December was £2.5 million. The total annual spend forecast was £5.9 million, and £0.2 million savings had been identified predominantly in Information Technology (IT). It was also anticipated £5.9 million expenditure would slip into 2025/26. Extended lead times and resourcing shortfalls ensued the slippage.

Quarter 3 variance -0.13%.

4.2 Partnership Collaboration

Under the Policing and Crime Act 2017, blue light services were under a formal duty to collaborate to improve efficiency, effectiveness and deliver improved outcomes.

Lancashire Fire and Rescue Service (LFRS), Lancashire Constabulary and North West Ambulance Service had met at both tactical and strategic levels and had agreed and signed a strategic statement of intent which contained the following aims:

- **Improved Outcomes** – The collaboration maintains or improves the service we provide to local people and local communities;
- **Reduce Demand** – The collaboration should contribute towards our longer-term strategic objective of decreasing risk in communities and reducing demand on services;

- **Better Value for Money** – The collaboration produces quantifiable efficiencies either on implementation or in the longer term;
- **Reduced inequalities within our communities** – The collaboration contributes towards reducing inequalities wherever possible.

This indicator provided Members with an update on the progress against key workstreams being progressed under the Blue Light Collaboration Board (BLCB) partnership collaboration during the period.

Leadership Development

Collaboration between Lancashire Fire and Rescue Service (LFRS), Lancashire Police (LanCon) and North West Ambulance Service (NWAS) had continued to explore efficiencies and build professional working relationships across the Blue Light Services. The potential for a collaborative coaching and mentoring network had also been identified, which led to shared learning on a more regular basis and improved on-the-ground relationships when working together.

It was agreed for each Service to host a Leadership Event, and through intelligence from each organisation, three common themes were identified.

The first session, 'Nourish to Flourish', focussed on wellbeing and self-care and was hosted by LFRS. It aimed to improve the physical and mental wellbeing of staff, which would have positive effects for each organisation. Several efficiencies were enabled for the session, by using the Leadership and Development Centre and the cost for the guest speaker was shared between all three services.

The Services were planning the next session which would be hosted by NWAS in February 2025, where the focus for that event would be on 'Media'.

The final session would be hosted by LanCon in Spring 2025. The group were considering an interesting area around 'Generational Differences'.

Missing from Home

The missing from home collaboration between LFRS and LanCon focused on supporting high-risk missing person searches. The partnership led to the development of a Standard Operating Procedure and training for front-line personnel. LFRS assets, such as drones and search dogs, had proved effective in locating missing persons and improving public perception whilst maximising effectiveness and the potential for successful outcomes to the people of Lancashire.

Empowering trained resources from LFRS to respond to such incidents with partner agencies ensured that missing persons were located earlier, using the best available technology such as LFRS drones. Furthermore, the use of LFRS trained dogs enhanced the canine capabilities for other fire specific deployments both within the UK (through USAR and other requests) and overseas (ISAR deployments). Real life incident exposure for the dogs was invaluable and without which, their ability to develop would become limited. Where required, LFRS recovered costs under the nationally agreed National Fire Chiefs Council (NFCC) / National Resilience recharge protocol and locally agreed MOUs.

LFRS received around 200 drone requests each year from LanCon, with most requests for missing persons searches.

Estates and Co-location

The co-location of estates between LFRS, NWAS, and LanCon aimed to identify opportunities for site sharing to improve collaboration and value for money. Successful site-sharing arrangements at Lancaster, St Annes, Darwen, Preston and Lytham Fire Stations had resulted in efficiencies and shared facilities. The shared working arrangements had also built positive relationships and a greater understanding of the differing roles across the Blue Light community. In an operational context, it would no doubt have improved outcomes for the people of Lancashire.

The revised Blue Light Collaboration Project Initiation document had provided the Estates and co-location sub-group leads with a renewed focus for potential areas of collaboration. The quarterly Estates sub-group meetings between Heads of Estates Department at LFRS, NWAS and LanCon had identified that the potential benefits were greater than just co-location. The project objective, principles and benefits had been redefined and in-scope works updated. Examples of areas of collaborative working, in addition to site sharing, were knowledge sharing in relation to systems, sharing of procurement specification documents, along with supplier framework procurement and opportunities.

Community First Responders

UK FRSs had been providing Emergency Medical Response (EMR) services to the public in recent years. According to a cost-benefit analysis conducted by the New Economy, the benefits of EMR far outweighed the initial investment required. The analysis estimated an overall financial return on investment of £4.41 per £1 invested.

The Community First Responder (CFR) workstream involved LFRS staff volunteers responding to life threatening emergencies in their communities from the workplace and administering life-saving interventions in the initial vital minutes before NWAS colleagues arrived, including patients that were unresponsive / collapsed, not breathing, cardiac arrests, seizures, strokes, and choking. In providing additional CFRs in areas that saw extended response times from NWAS, LFRS had improved outcomes for Lancashire communities. This had been achieved by ensuring a quicker response to those people that required help with a medical emergency and staff had delivered lifesaving interventions whilst awaiting the arrival of ambulance colleagues, with around 200 incidents attended since 2023.

Evaluation

Through evaluation, LFRS had considered the value and benefits of several workstreams and had considered how the BLCB contributed to LFRS' aim of "Making Lancashire Safer".

Two new Blue Light Collaboration Workstreams were being established – 'Wellbeing (Mental Health and Welfare)', and 'Recruitment Initiatives'.

4.3 Overall User Satisfaction

	<p>People surveyed included those who had experienced an accidental dwelling fire, a commercial fire, or a special service incident that the Service attended. The standard was achieved if the percentage of satisfied responses was greater than the standard.</p> <p>Annual Standard: 97.50%</p> <p>In quarter 3, 51 people had been surveyed and the number satisfied with the service was 51. The running number of people surveyed for the year was 3,771 with 3,723 of those people being satisfied with the Service; 98.73% against a standard of 97.50%; a variance of 1.26%.</p> <p>The Chair thanked the Chief Fire Officer for a positive report.</p> <p>Resolved: - That the Performance Committee noted and endorsed the Quarter 3 Measuring Progress report, including two positive and two negative exceptions.</p>
27/24	<p>Building Regulation Consultations Plan and Presentation</p>
	<p>The Chair welcomed Station Manager, Protection Transformation, Steven Barnes, to provide the Committee with a presentation which gave an overview of the Service's actions pertaining to Building Regulation Consultations.</p> <p>Following Lancashire Fire and Rescue Service's (LFRS) 2021/22 His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) inspection, an 'Area for Improvement' was highlighted regarding completion of Building Regulation (BR) Consultations within the statutory timeline of 15 working days. The reported stated "The Service should make sure it allocates enough resources to respond effectively and in time to statutory building control consultations". The Service had a responsibility to ensure that the fire safety measures put in place within the buildings were suitable and sufficient.</p> <p>Initially, a review of internal process took place to identify how the Service could improve current working practices to increase performance and ensure delivery of statutory duties. The 3 areas of fire safety in Lancashire were Eastern/Pennine, Northern/Western, and Southern/Central. The review identified that BR consultations were received locally via Area Based offices from Local Authority Building Control Bodies and Approved Inspectors. This could be by way of email or 'in person' deliveries. Plans were then stored on local drives and manually input on an excel spreadsheet. With the volume of consultations varying from area to area, the impacts and ability to respond could be greatly impacted. In addition, the number of inspectors qualified to undertake BR consultations was limited in certain areas. This area-based view limited the ability for the department leadership team to manage BR holistically across the County.</p> <p>The graph in the presentation showed the total number of Buildings Regulations received and the number completed within the set date.</p> <p>To support the Service's commitment to BR Consultation timelines, KPI 2.10</p>

Building Regulation Consultations (BRC) was introduced.

Investment initially took place in training to ensure staff had the required competencies to undertake BR consultations. To further improve performance, a single mailbox was established and shared with all Local Authorities and Approved Inspectors, monitored by a dedicated BR team. This team then input the initial consultation, and an action was allocated to an appropriately qualified inspector. The CFRMIS (Community Fire Risk Management Information System) was the main repository for buildings within Lancashire and a Data Management System was also introduced where all Building Regulation information was stored. This provided the leadership team with a pan-Lancashire view of current activity and distributed the work across all qualified inspectors regardless of area, allowing for an even spread of workloads. The investment in digital systems ensured the Service tracked responses and managed performance consistently.

The outcomes from the implementation of the new ways of working were that there was a single truth which provided live monitoring including assigned persons, and there was a simple reporting and monitoring process by Fire Safety Managers.

It was noted by Members that the current completion rate was 96.9%.

The priorities for the future direction of the Service were:

- Resourcing to Risk – focus would be directed on trends and incidents identified, and reviews would be undertaken to ensure the ‘highest risk’ buildings were inspected.
- Grenfell Enquiry Phase 2 Recommendations – there were 58 recommendations within the document. The documents that the Service used for Building Regulation were changing regarding the fire reaction and fire resistance of materials used and the move from British Standards (BS) to BS ENs (a standards adopted by the European Community). BS ENs were more robust and allowed for challenges to be made on materials used.
- Building Safety Regulator – to comply with the Building Safety Act, the Service had a dedicated resource that would work on high rise premises, and work with the Health and Safety Executive (HSE) engaging the Service at Gateway 2. Once a construction method was agreed at Gateway 1, it had to be seen through to completion with no changes to materials or dimensions.
- Battery Energy Storage Systems – it was a government wide agenda for renewable energy. The Service was not a statutory consultee and so had no input. The NFCC were lobbying planners and developers for the Fire Service to be consulted.
- Mid Rise Building Stock – previously, there had been no dedicated person, but as of August 2024, Mid Rise buildings were treated similarly to High Rise. Currently, 160 premises had been identified as Mid Rise and consultation letters had been sent to request information on the buildings. The buildings would then be rated for inspection to ensure fire safety measures were put in place.

County Councillor Hennessy asked, out of the 160 Mid Rise premises, how many replies had been received from the consultation letters. Station Manager Barnes confirmed that 110 replies had currently been received, however, if there was no

response, the property could be elevated, resulting in a face-to-face visit. Under the Fire Safety Order, the Service could use Article 27 to gather information and enforce consultation within 28 days. All the information was stored in the CFRMIS system.

In response to a question from County Councillor Hennessy regarding staff in the department, Station Manager Barnes explained that there were 45 staff across 3 Fire Safety Departments across Lancashire, with a Fire Safety Manager, a number of Business Safety Advisors and Inspectors who were qualified to Levels 3 and 4.

The Chief Fire Officer highlighted that the government focus had shifted from High Rise Buildings (18M +) to Mid Rise (11m – 18m or 7 floors), and the volume of Mid Rise buildings. The national estimates were between 90,000 to 150,000 buildings. The Service had a designated officer that was working with all Local Authorities to determine the number of Mid Rise properties in Lancashire, how they would be triaged, how many had construction deficiencies to make safe, and how many were compliant. It was important to know the extent of the risk regarding combustible cladding etc.

Station Manager Barnes explained that there was a directive for the Responsible Person to carry out an external wall survey using a government template to risk rate the building and identify whether there were flammable or combustible materials for which, remedial work would need to be undertaken. Government funding was available for High Rise remediations, however, at present, there was no fund for Mid Rise remediations. Previous guidance for High Rise buildings was for residents to stay within their flats in the event of a fire, but in the case of external combustible materials, evacuation could be needed for which a 24-hour waking watch could be required (typical costings for such a provision had been in excess of £25k per month).

In response to a question from County Councillor O'Toole as to whether the Service could withhold a Fire Safety Certificate from those buildings with combustible cladding, Station Manager Barnes, advised that under the Fire Safety Order 2005, the accountability was put onto the Responsible Person to carry out a fire risk assessment which would identify any deficiencies. When the Fire Service carried out an inspection, a letter could be issued which stated that fire safety measures were in place and the building was suitable for purpose. If it was not suitable, the Fire Service could potentially enforce or prohibit.

County Councillor O'Toole queried, on cases where residents owned their apartments but not the leasehold and the maintenance of the building was via a management company, whether there was legislation to enforce combustible cladding removal. Station Manager Barnes, explained that the Service could use Land Registry to identify the Responsible Person whose duty it was to enact requirements. The Service tried to work with Responsible Persons to introduce fire safety measures to manage risks.

County Councillor Yates asked whether the Service was consulted regarding new build properties. Station Manager Barnes confirmed that the Service was a statutory consultee with any property over 2 floors with residents with a building over 18m going to the Building Safety Regulator and HSE. In the case of high rise

	<p>buildings, the Service would be consulted at Gateways 2 and 3.</p> <p>The Chair thanked Station Manager, Steven Barnes for a wonderful presentation.</p> <p>Resolved: - that the Performance Committee noted the report.</p>
28/24	Date of Next Meeting
	<p>The next meeting of the Committee would be held on 25 June 2025 at 10:00 hours in the Main Conference Room at Lancashire Fire and Rescue Service Headquarters, Fulwood.</p> <p>Further meeting dates were noted for 03 September 2025 and 03 December 2025 and agreed for 11 March 2026.</p>

M Nolan
Clerk to CFA

LFRS HQ
Fulwood