LANCASHIRE COMBINED FIRE AUTHORITY
PERFORMANCE COMMITTEE
Meeting to be held on 14th March 2019

PERFORMANCE MANAGEMENT INFORMATION FOR 3RD QUARTER 2018/19
(Appendix 1 refers)

Contact for further information:
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Executive Summary

This paper provides a clear measure of our progress against the Key Performance Indicators (KPI) detailed in the Integrated Risk Management Plan 2017-2022

Recommendation

The Performance Committee is asked to endorse the Quarter 3 Measuring Progress report and note the contents of the 6 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	Date	Contact
Performance Management Information		David Russel (ACO)
Reason for inclusion in Part 2, if appropriate: N/A		

Measuring Progress

2018-19 Quarter 3

Combined Fire Authority
14th March 2019

Lancashire Fire and Rescue Service

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Lancashire Fire and Rescue Service
Measuring Progress
Oct 18 – Dec 18

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.

The above graphic illustrates the current KPI 2018/19 reporting year. During 2017/18 two performance measures relating to 'call handling' were incorporated into the 3 response indicators of 2.1.1, 2.1.2 and 2.2.1. This is to best represent the time taken from receiving a call to the fire engine arriving at scene.

KPI 2.4.1 is for information only and shows the availability of RDS crewed fire engines without wholetime crew imports to supplement when RDS staff are unavailable.

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.

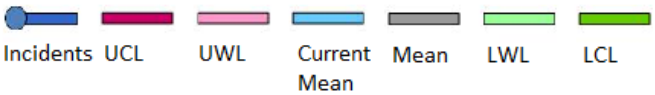
Activity is deemed to be within standard if it remains within set upper and lower limits. These limits are set using a standard deviation calculation based upon the previous three years activity.

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

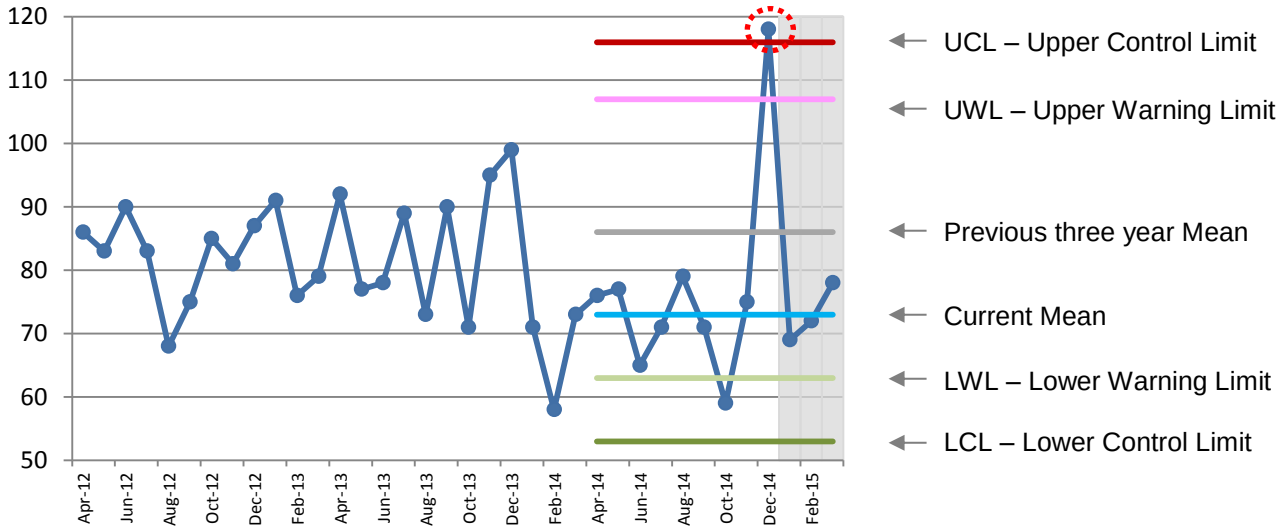
The following rules are applicable to the XmR charts and define when an exception has occurred:

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:



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 2018 – December 2018 six KPI's are classified as being in negative exception.

KPI	Description	Progress	Exception Positive / Negative	Page (s)
1 - Preventing and Protecting				
1.3	Accidental Dwelling Fires	⇩	–	9
2 - Responding to Emergencies				
2.1.1	Critical Fire – 1st Fire Engine Attendance	⇩	–	11
2.1.2	Critical Fire – 2nd Fire Engine Attendance	⇩	–	14
2.3	Fire Engine Availability – Wholetime, Day Crewing and Day Crewing Plus	⇩	–	16
2.4	Fire Engine Availability - Retained Duty System	⇩	–	18
2.4.1	Fire Engine Availability - Retained Duty System (without wholetime detachments)	Subset of KPI 2.4 and provided for information only		21
4 - Engaging with our Staff				
4.2.1	Staff Absence - Excluding Retained Duty System	⇩	–	22

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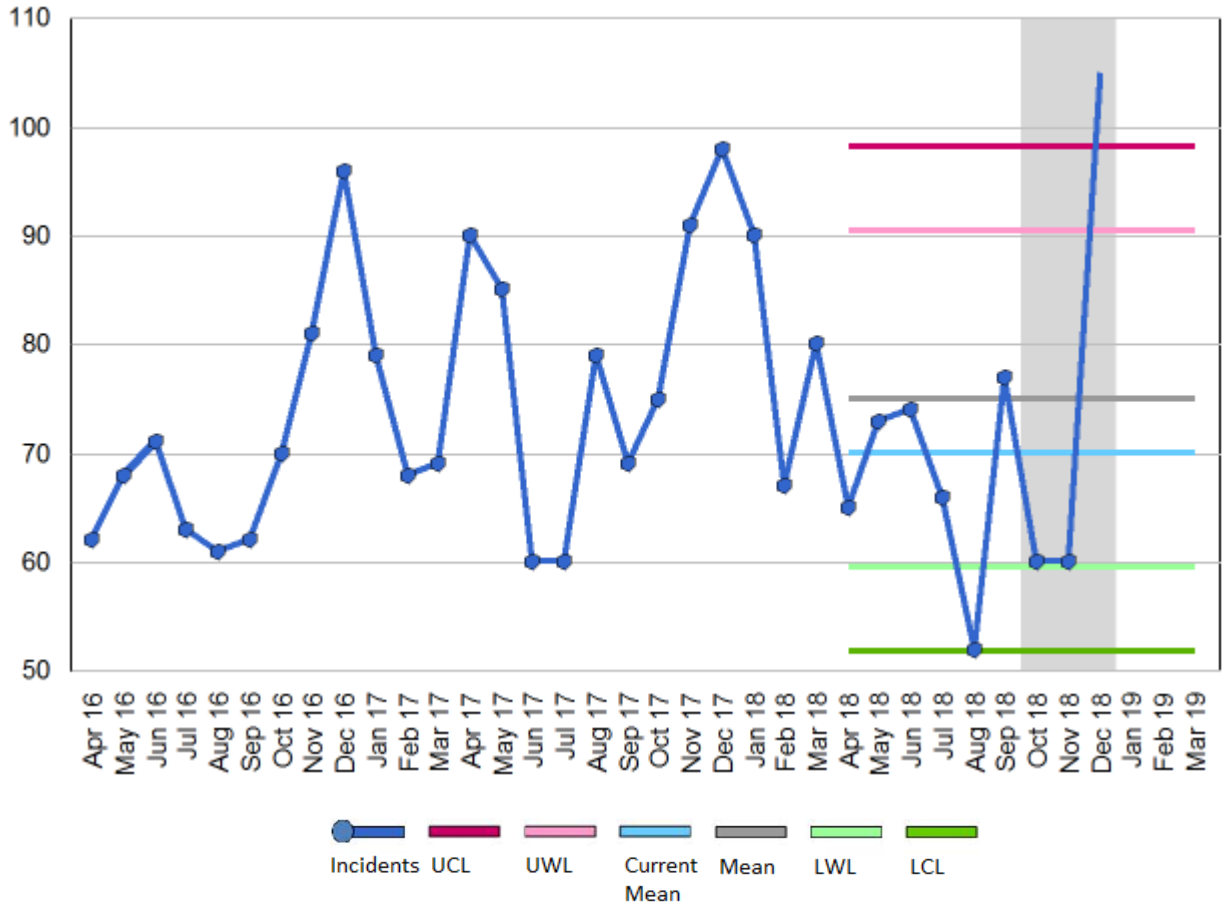
1.3 Accidental Dwelling Fires

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

A primary fire is one involving property (excluding derelict property) or any fires involving casualties, rescues, or any fire attended by five or 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 226, previous year quarter three activity 264, a decrease of 15%.



1.3 Accidental Dwelling Fires	Year to Date	**2018/19 Quarter 3**	*Previous year to Date*	*2017/18 Quarter 3*
	632	226	*707*	*264*

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**		
		2017/18	**2016/17**	**2015/16**
70	75	78	70	78

What are the reasons for an Exception Report

This is a negative exception report due to Accidental Dwelling Fires (ADF's) having a single point in December above the upper control limit.

Analysis

As illustrated on the previous page the month of December has historically tested the upper control limit of the XmR chart. This is where a spike in activity has neared the control limit, and during December 2018 this limit was breached, recording 105 ADF's and against a limit of 98.

The last occasion that Accidental Dwelling Fire activity recorded over 100 incidents was in December 2014, which recorded the same 105 incidents.

The months of October and November both recorded below average activity levels.

Encouragingly, the cumulative number of incidents to date is the lowest over the previous 10 years at 632. This is 10% fewer than the same position last year and 31% than 10 years ago.

Also, the percentage of fires confined to the item first ignited increased over previous quarters and against the same period of the previous year, implying a lower severity of fire outcome.

Although cooking related incidents still account for the largest proportion of incidents, a rise in winter seasonal activity accounted for a proportion of the quarter 3 increases. The use of 'Candles' and 'Heating/Fire' recording notable increases over previous quarters, along with 'Microwave oven' and 'Washing machine' fires.

These were combined with an increase in 'Combustible articles too close to heat source (or fire)' and of electrical goods with 'Fault in equipment or appliance'.

An increase in ADF's during certain times of the day appear in quarter 3 which coincides with the change in clocks being put back an hour in October. This appears as a jump in incidents during 17:00 and 18:00. Anecdotally, this is attributed to a change in behaviour due to the earlier nights and is seen again during quarter 1 after the clocks move forward, when the incident peak moves to between 18:00 and 19:00.

Actions being taken to improve performance?

The Winter Safety campaign *'Keep it clean, keep it clear'* is continuing and Community Fire Safety teams have shared campaign leaflets and promotional material with Partner agencies to highlight best practice and the offer of a HFSC to those most vulnerable.

Certain areas have also offered the service to neighbours of those contacted for a HFSC, so as to capture those with possible similar lifestyles and raise safety awareness within neighbourhoods.

Safety initiatives and collaboration with partners continue around the county with: Student Safe, Dementia cafes and work with Community groups all ongoing during the Winter period.

2.1.1 Emergency Response Standards - Critical Fires - 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 Super Output Area (SOA) in which the fire occurred.

The response standards include call handling and fire engine response time for the first fire engine attending a critical fire, and are as follows:

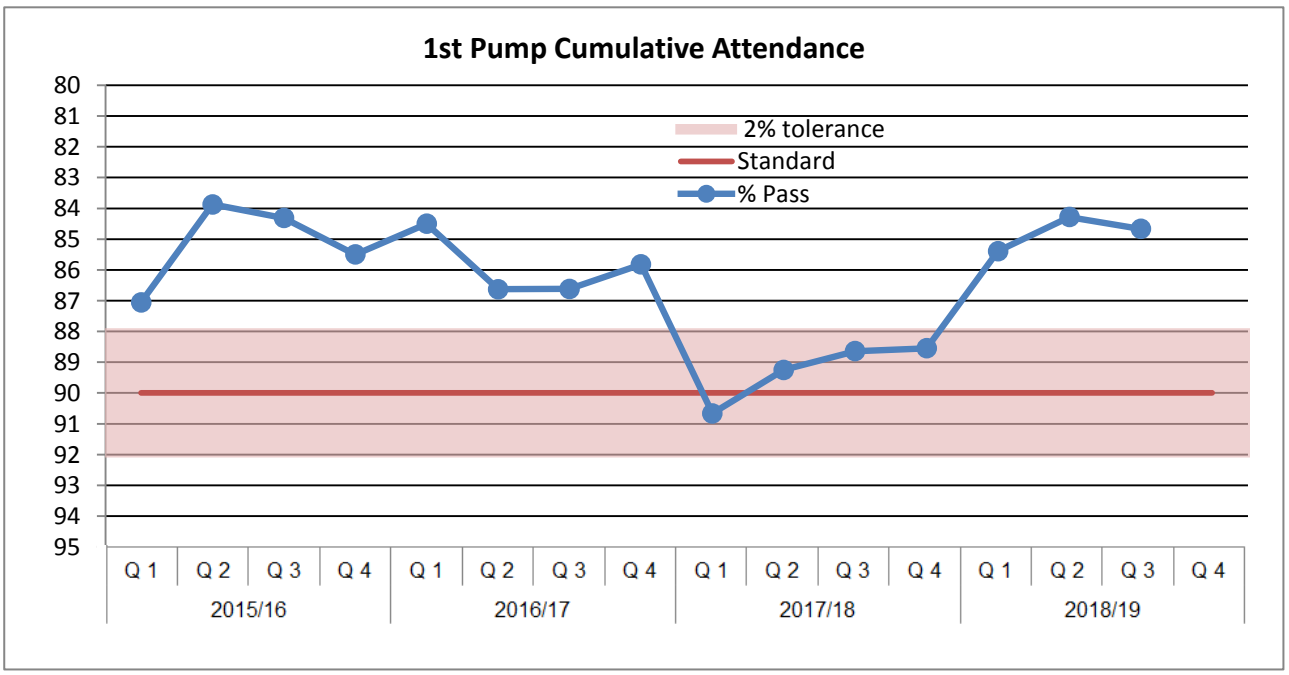
- *Very high risk area = 6 minutes*
- *High risk area = 8 minutes*
- *Medium risk area = 10 minutes*
- *Low risk area = 12 minutes*

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.

Standard: 90% of occasions.

Quarter three 1st pump response 85.38%, previous year quarter three 87.47%.

1st pump cumulative attendance standard	**Year to Date**	2018/19 Quarter 3	*Previous year to Date*	*2017/18 Quarter 3*
	84.67%	85.38%	88.64%	87.47%



What are the reasons for an Exception Report

This is a negative exception report due to critical fire 1st pump response being below the standard. Overall, the cumulative quarter three pass rate was 84.67%, which is outside of the 90% standard and 2 percent tolerance.

Analysis

The month of October was just within the 2% tolerance at 88%, however, the months of November and December recorded pass rates of 83.76% and 84.46% respectively. This led quarter 3 to return an overall pass rate of 85.38%.

Over 50% of the critical fire incidents during December were to residential dwelling buildings. This coincided with December recording the second largest number of critical fire incidents over the last 12 months and due to the nature of such incidents, in respect of the time spent at scene and the pre-determined attendance is for 2 pumps, contributed to fewer resources being available during a busy month.

This correlates with the narratives received from the officer in charge (OIC) where analysis of quarter 3 narratives indicates that the 'Extended travel distances to incident', which accounted for 40% of returns, was the main reason for missed attendance times.

It would appear that the reduced performance in quarter 3 cannot be accounted for by policy decisions or actions affecting call handling or crew reaction times and so are more likely to be accounted for in the phase when appliances are driving to incidents.

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

	2017/18			2018/19								
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Failed	16	11	15	14	15	29	32	11	12	15	19	23
Incidents	135	106	117	108	139	150	122	94	106	125	117	148
% Pass	88.1%	89.6%	87.2%	87.0%	89.2%	80.7%	73.8%	88.3%	88.7%	88.0%	83.8%	84.5%

Over the quarter three period, 35% of the failures failed by less than 60 seconds.

The monthly [median] call handling times are shown below in seconds.

	2017/18			2018/19								
Median Seconds	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	78	77	76	70	73	74	75	78	65	75	82	68

Actions being taken to improve performance?

Ongoing actions by Service Delivery Managers (SDM) to monitor Wholetime (WT) crew reaction times, instigating local improvements where required and the highlight the importance of ensuring the appliance has been booked in to attendance upon arrival.

The importance of recording pump response failures has also been impressed upon SDM's which, in conjunction with mandatory completion and the use of defined failure reasons, will aid recording accuracy and develop understanding of failure reasons.

We are also assessing the utilisation of the Service's Geographical Information System (GIS) to analyse individual attendance standard failures and identify if the failures relate to specific Super Output Areas (SOA's). If confirmed, then consider if there are any actions which could be taken to improve attendance performance or reduce risk by community safety action.

It is hoped that on-going initiatives to address these issues will continue to improve performance.

2.1.2 Lancashire Emergency Response Standards - Critical Fires - 2nd 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 Super Output Area (SOA) in which the fire occurred.

The response standards include call handling and fire engine response time for the second fire engine attending a critical fire, and are as follows:

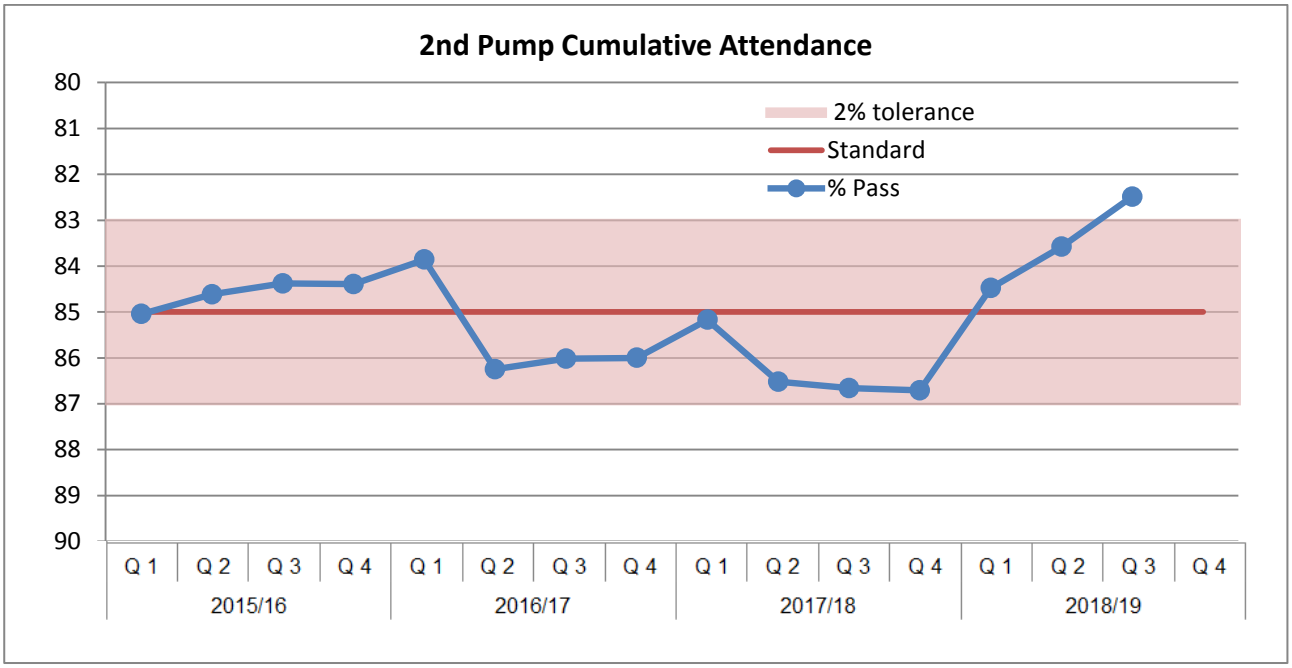
- *Very high risk area = 9 minutes*
- *High risk area = 11 minutes*
- *Medium risk area = 13 minutes*
- *Low risk area = 15 minutes*

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.

Standard: 85% of occasions.

Quarter three 2nd pump response 80.98%, previous year quarter three 86.92%.

2nd pump cumulative attendance standard	**Year to Date**	2018/19 Quarter 3	*Previous year to Date*	*2017/18 Quarter 3*
	82.49%	80.98%	86.66%	86.92%



What are the reasons for an Exception Report

This is a negative exception report due to critical fire 2nd pump response being below the standard. Overall, the cumulative quarter three pass rate was 82.49%, which is outside of the 85% standard and 2 percent tolerance.

Analysis

The month of October was just within the 2% tolerance at 83.81%, however, the months of November and December recorded pass rates of 81.91% and 77.95% respectively. This led quarter 3 to return an overall pass rate of 80.98%.

The findings highlighted in the 1st pump critical fires are mirrored here for the 2nd pump, with 37% of the critical fire responses during December being to residential dwelling buildings. This coincided with December recording the second largest number of critical fire incidents over the last 12 months and due to the nature of such incidents, in respect of the time spent at scene and the pre-determined attendance is for 2 pumps, contributed to fewer resources being available during a busy month.

This correlates with the narratives received from the officer in charge (OIC) where analysis of quarter 3 narratives indicates that the 'Extended travel distances to incident', which accounted for 30% of returns, was the main reason for missed attendance times.

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

	2017/18			2018/19								
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Failed	20	7	14	11	24	17	27	10	12	17	17	28
Incidents	122	89	101	89	121	125	99	80	91	105	94	127
% Pass	83.6%	92.1%	86.1%	87.6%	80.2%	86.4%	72.7%	87.5%	86.8%	83.8%	81.9%	78.0%

Over the quarter three period, 28% of the failures failed by less than 60 seconds.

The Call handling monthly [median] call handling times are shown below in seconds.

	2017/18			2018/19								
Median Seconds	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	78	77	76	70	73	74	75	78	65	75	82	68

Actions being taken to improve performance?

The second pump response attendance to critical fire incidents is closely related to those of the first pump (KPI 2.1.1), as such, please refer to the actions being undertaken to improve first pump attendance.

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

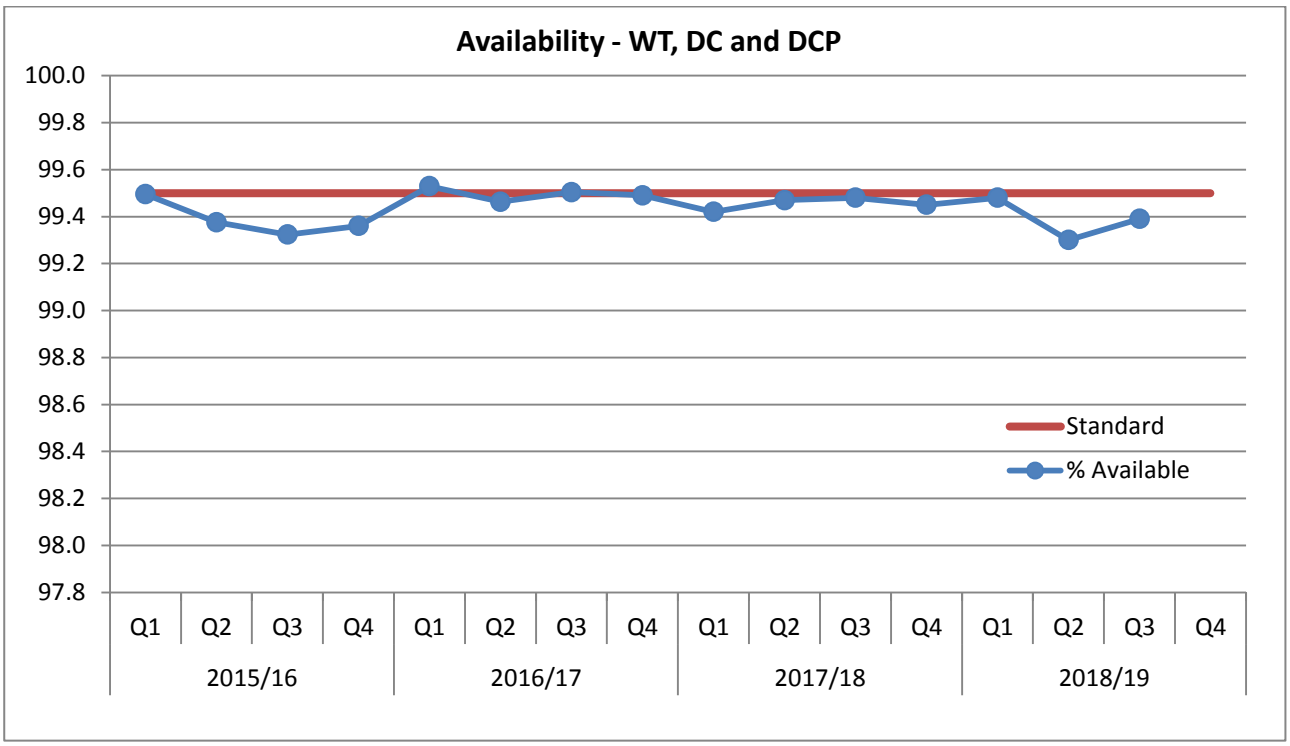
This indicator measures the availability of fire engines that are crewed by wholetime, day crewing and day crewing plus shifts. It is measured as the percentage of time a fire engine is available to respond compared to the total time in the period.

Fire engines are designated as unavailable for the following reasons:

- *Mechanical*
- *Crew deficient*
- *Engineer working on station*
- *Appliance change over*
- *Debrief*
- *Lack of equipment*
- *Miscellaneous*
- *Unavailable*
- *Welfare*

Standard: 99.5%

Quarter three cumulative availability 99.39%, previous year quarter three 99.48%.



What are the reasons for an Exception Report

This is a negative exception report due to the cumulative Wholetime (WT), Day Crewed (DC) and Day Crewing Plus (DCP) availability to the end of quarter three being below the 99.5% standard.

Analysis

This KPI is measured cumulatively, as such; the effect of the protracted Winter Hill incident during late June until early August is continuing to affect the standard recorded to the end of December 2018.

The table below shows the availability for each individual month. The decrease in availability started in June, being most pronounced in July and then improving during August. Availability returned to above standard levels in September, with the months of October, November and December all being above the 99.5% standard.

If this trend continues then it is expected that this KPI will be moved out of exception before the end of quarter 4.

	Quarter 1			Quarter 2			Quarter 3		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Standard achieved	99.61%	99.61%	99.22%	98.27%	99.47%	99.65%	99.55%	99.53%	99.62%

Actions being taken to improve performance

As the decrease in availability appears to have been related to the Winter Hill incident this KPI now appears to have returned to normal levels. This is corroborated by the improvement in availability, shown in the table above, for each month of quarter 3.

This KPI will be continued to be monitored and the newly implemented off the run recording practices by North West Fire Control (NWFC) can be included in the reporting process when available.

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.

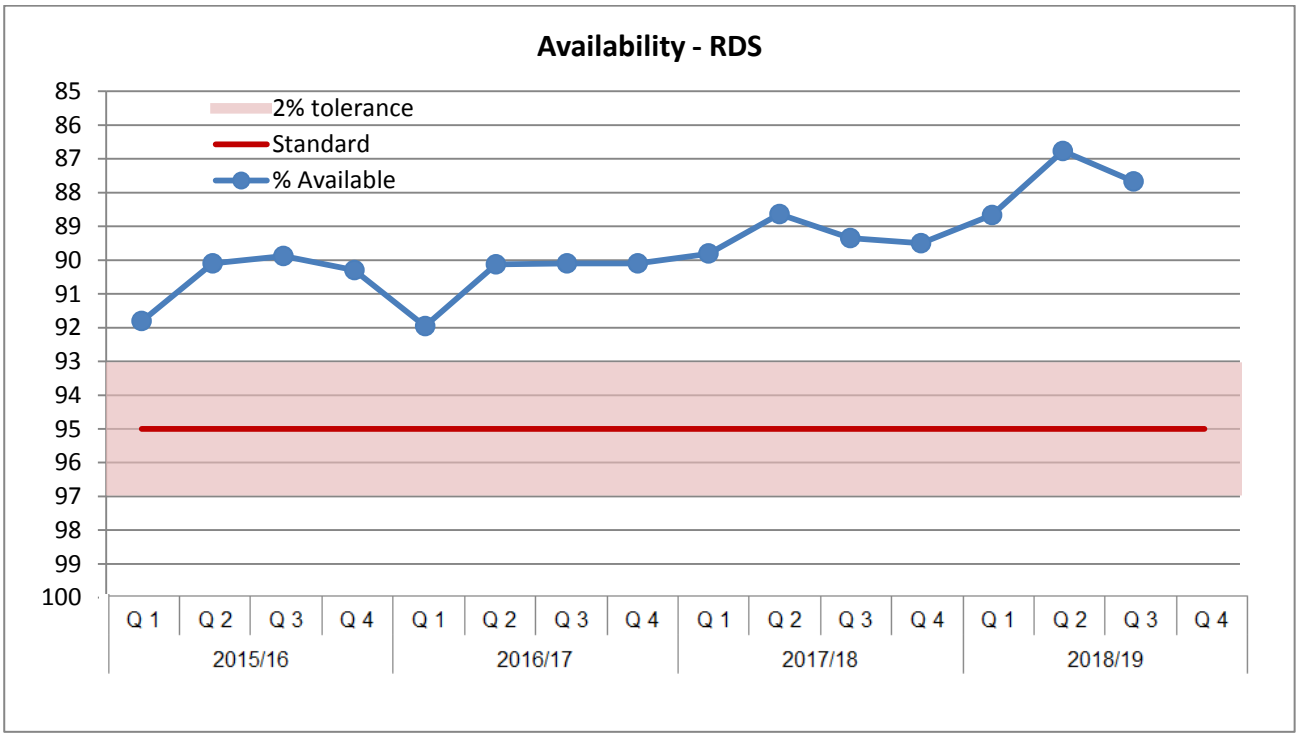
Fire engines are designated as unavailable (off-the-run) for the following reasons:

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

The percentage of time that RDS crewed engines were available for quarter three was 89.46%, an increase of 4.57% over the previous quarters 84.89%. The cumulative availability to the end of quarter 3 was 87.67% against the previous quarter cumulative (April to September 2018) at 86.89%.

Standard: Above 95%.

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



What are the reasons for an Exception Report

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

Analysis

Quarter 3 recorded an improvement over both quarter 1 and quarter 2, with November recording the highest RDS availability of the year to date, at 90.74%, the highest overall percentage since February 2018. Quarter 3 also recorded the same availability as quarter 3 of the previous year.

	Quarter 1			Quarter 2			Quarter 3		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Standard achieved	89.81%	88.95%	87.24%	85.66%	83.14%	85.89%	88.59%	90.74%	89.10%

Local level monitoring continues with additional analysis at pump level showing that just six stations continue to account for the largest proportion of off the run hours, with these stations' accounting for 52% of the total for the quarter.

The amount of RDS stations that are in exception has dropped from 12 to 9 in this quarter, increasing availability and reducing the need for exception reporting.

Two RDS initial Breathing Apparatus (BA) courses are scheduled and fully crewed for spring resulting in newly BA qualified staff throughout the RDS service.

The appointment of a new Southern Retained Support Officer (RSO), who has taken up his post, is already having a positive effect on the Southern RDS stations.

Dual contract staff within LFRS has increased again this quarter. The positives a dual contract member of staff can bring to an RDS station can be immense, benefits include: knowledge of IT systems, operational experience, mentoring and increasing WT understanding of RDS units.

This quarter, six of our RDS stations have all seen availability rises of 10% or more since the last quarter, while some of this can be contributed to holiday periods a strong recruitment campaign should start to show rewards.

December saw 4 RDS stations attain 100% availability, a number of whom demonstrated the advantages of having increased numbers of crews on relatively low contract hours against the historical RDS model of low numbered crews on high contracted hours.

This model gives resilience to the unit, lessoning issues of sickness and annual leave; it makes drill pre planning and Safe to Command development easier and gives the crew family/work/on-call flexibility.

Actions being taken to improve performance

For stations running below their optimum establishment of contracted hours we are to focus on recruitment, look at existing contract alignment and ensure staff are fulfilling existing contracts.

Ongoing issues with stations which lack drivers and Officers in Charge (OIC) should diminish over time as the recruitment of new crew members develop and gain driving and safe to command skills. Current RDS staff are being looked at service wide to assess future OIC/driver upskilling.

Local action plans for Stations with availability of less than 85% are continuing to be produced in conjunction with Station District Managers, Unit Managers and Retained Support Officers to tailor the support required to each unit.

In addition to the above recommendations, further input from the Retained Support Officer role has seen great strides in firefighter/officer development, and the greatest numbers of recruits applying to join the RDS ever seen. As these changes take effect over the course of the next 12 months it is envisaged that availability will subsequently increase.

2.4.1 Fire Engine Availability - Retained Duty System (without wholetime detachments).

Performance indicator: 2.4.1 Fire Engine Availability – Retained Duty System (without wholetime detachments).

Subset of KPI 2.4 and provided for information only.

This indicator measures the availability of fire engines that are crewed by the retained duty system (RDS) when wholetime detachments are not used to support availability. 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 85.89%. This excludes the wholetime detachments shown in KPI 2.4

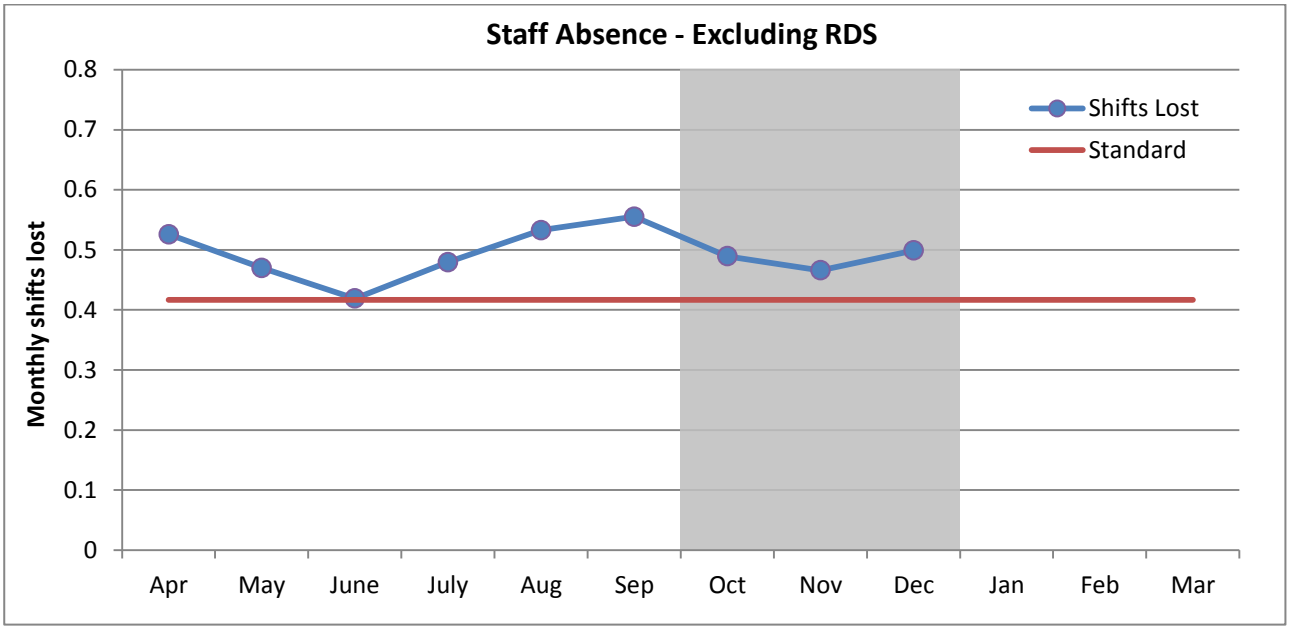
Standard: As a subset of KPI 2.4 there is no standard attributable to this KPI.

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	4.437

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 three months during quarter three.

Analysis

During quarter three October 2018 - December 2018, absence statistics shows above target for all three months. Shifts lost showed a monthly increase from October through to December for uniformed personnel, however they still remain under the target for absence. Non-uniformed personnel are considerably above the target over all three months. The main reasons are cases of muscular-skeletal and mental health, there were 10 cases of long term absence which span over the 3 months and 1 left the Service on ill health retirement.

At the end of December the cumulative totals show that non-uniformed staff absence was above

target at 6.1 shifts lost per employee and for whole-time, staff absence was just above target at 3.8 shifts lost per employee. Overall absence for all staff (except Retained Duty System) was 4.4 shifts lost which is above the Service target of 3.75 shifts lost for this quarter.

Actions being taken to improve performance

The Service aims to continue with:

- Early intervention by Occupational Health Unit (OHU) doctor/nurse/physiotherapist.
- HR supporting managers in following the Absence Management Policy managing individual long term cases, addressing review periods/triggers in a timely manner and dealing with capability off staff due to health issues.
- Absence management presentations/training and question and answer sessions on the Institute of Leadership & Management (ILM) course and for newly appointed managers.
- To be included again within the leadership conference to assist future managers understanding and interpretation of the policy.
- Encouraging employees to make use of our Employee Assistance Programme provider Health Assured and The Firefighters Charity.
- Human Resources to be in attendance at Stress Risk assessment meetings, to support managers and to offer appropriate support to the employee along with signposting.
- OHU to organise health checks for individuals on a voluntary basis.
- Support from Service Fitness Advisor/Personal Training Instruction's.
- Promotion of health, fitness and wellbeing via the routine bulletin and Employee Assistance programme.

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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	⬆	26
1.2	Overall Activity	⬆	27
1.3.1	ADF - Extent of Damage	⇩	28
1.3.2	ADF - Number of Incidents Where Occupants have Received a HFSC	⬆	28
1.4	Accidental Dwelling Fire Casualties	⬆	29
1.5	Accidental Building Fires (Non Dwellings)	⇩	30
1.5.1	ABF (Non Dwellings) - Extent of Damage	⇩	31
1.6	Deliberate Fires	⬆	32
1.7	Home Fire Safety Checks	⇩	33
1.8	Road Safety Education Evaluation	⇔	34
1.9.1	Fire Safety Enforcement - Known Risk	⇩	35
1.9.2	Fire Safety Enforcement - Risk Reduction	⇩	35
2 - Responding to Emergencies			
2.2.1	Critical Special Service - 1st Pump Attendance	⬆	36
2.5	Staff Accidents	⇩	37
3 - Delivering Value for Money			
3.1	Progress Against Savings Programme	⇔	38
3.2	Overall User Satisfaction	⬆	39
4 - Engaging with our Staff			
4.1	Overall Staff Engagement	⬆	40
4.2.2	Staff Absence - Retained Duty System	⬆	41

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 32114, previous year score 32398.

Score Category	Grade	Score (13-16)	SOA Count (13-16)	Score (14-17)	SOA Count (14-17)	Score (15-18)	SOA Count (15-18)
Less than 36	L	11944	519	11980	521	12012	524
Between 36 & 55	M	13578	314	13722	321	13654	321
Between 56 & 75	H	4890	76	4654	74	4598	74
Greater than 75	VH	2578	32	2042	25	1850	22
Grand Total		32990	941	32398	941	32114	941

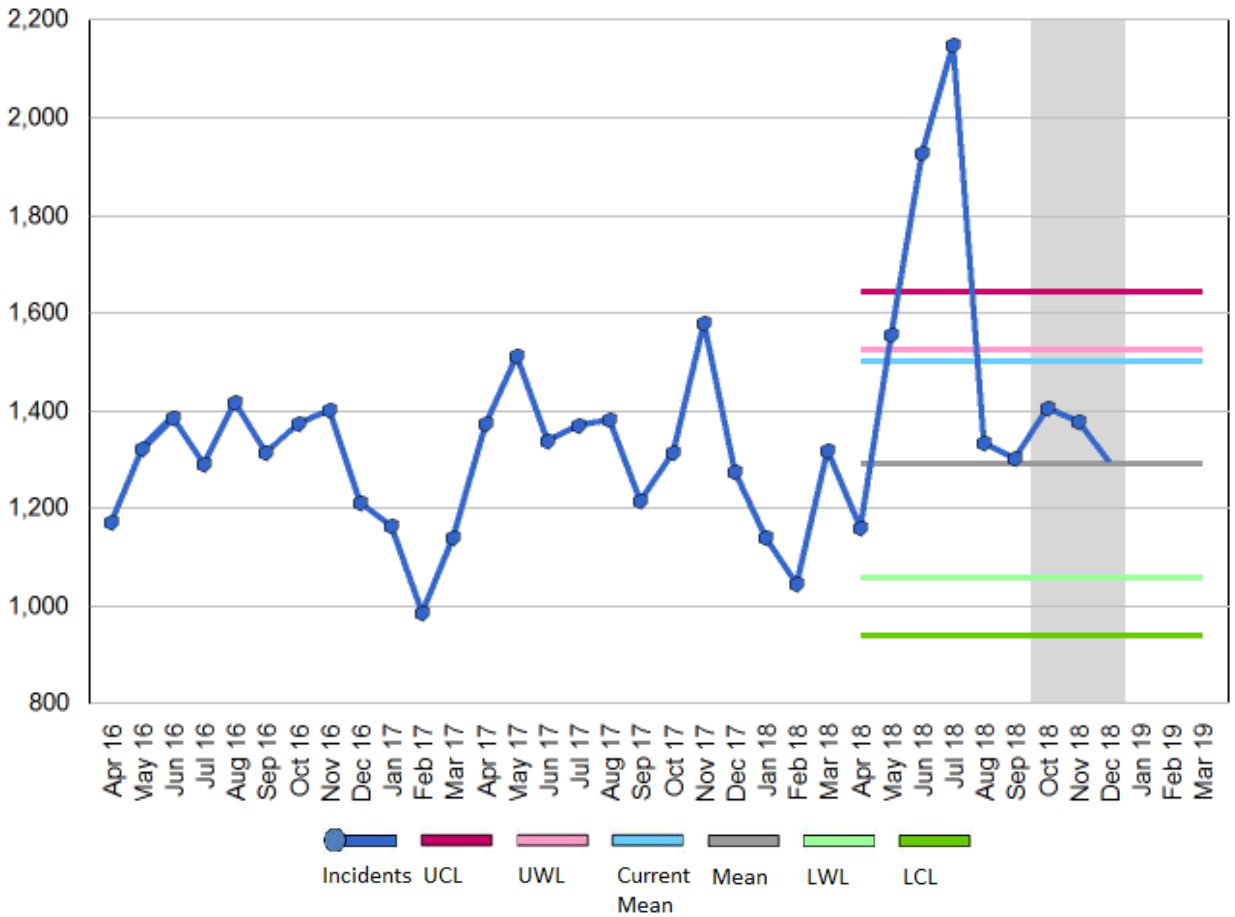
Risk Grade	Very High	High	Medium	Low	Overall Risk Score
2017 count	25	74	321	521	32398
2018 count	22	74	321	524	32114
Change	-12% Overall reduction in Very High risk SOA's	0% Overall reduction in High risk SOA's	0% Overall increase in Medium risk SOA's	1% Overall reduction in Low risk SOA's	-1% Overall 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 4070, previous year quarter three activity 4162, a decrease of 2.21%.

Included within this KPI is the incident type 'Gaining Entry', where we attended on request of the North West Ambulance Service. During quarter three, we were asked to attend on 351 occasions, of which 202 resulted in the use of tools to gain entry to a property.



1.2 Number of attended incidents	Year to Date	**2018/19 Quarter 3**	*Previous year to Date*	*2017/18 Quarter 3*
	13488	**4070**	*12341*	*4162*

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**		
		2017/18	**2016/17**	**2015/16**
1498	1289	1320	1263	1285

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 26%, quarter three of previous year 20%. Percentage limited to room of origin in quarter three 61% quarter three previous year 69%, limited to floor of origin in quarter three 11%, quarter three previous year 5% and spread beyond floor 2%, previous year 6%.

	2018/19					⬆/⇩	*2017/18*			
	***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	152	24%	60%	11%	6%	⬆	23%	59%	11%	7%
Quarter 2	132	21%	64%	9%	5%	⬆	23%	61%	7%	9%
Quarter 3	167	26%	61%	11%	2%	⇩	20%	69%	5%	6%
Quarter 4							21%	64%	9%	6%

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 12 months prior of the fire occurring.

	2018/19		*2017/18*	
	ADF's with previous HFSC	**% of ADF's with previous HFSC**	***ADF's with previous HFSC***	***% of ADF's with previous HFSC***
Quarter 1	21	10%	15	6%
Quarter 2	17	9%	20	10%
Quarter 3	24	11%	15	6%
Quarter 4			18	8%

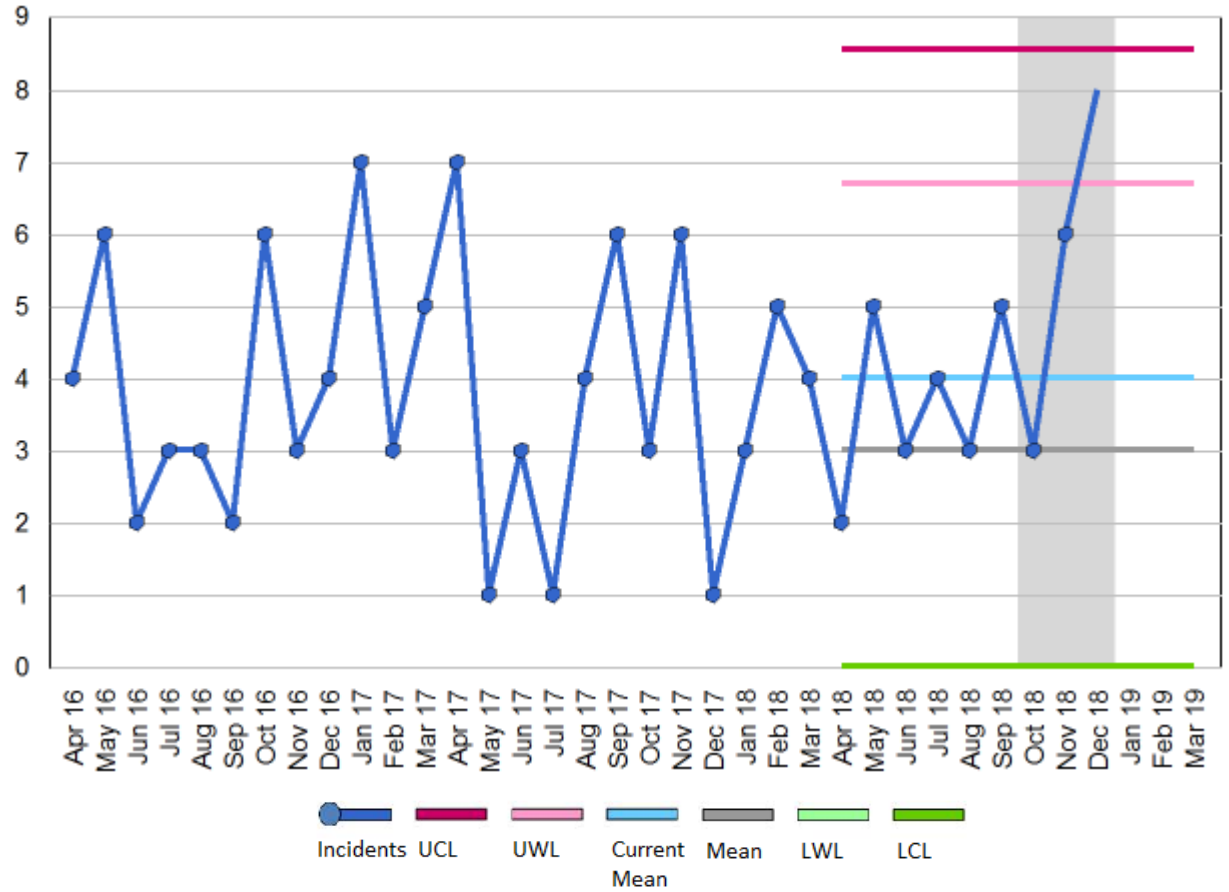
Analysis: Of the 24 accidental dwelling fire incidents that had received a HFSC within the previous 12 months, 13 had 'Heat and smoke damage only', 4 resulted in damage 'Limited to item first ignited', 6 'limited to room of origin' and one incident had damage 'Limited to floor of origin'.

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.

Four fatalities occurred during quarter three. Three casualties are recorded as serious and 10 slight. Quarter three of the previous year recorded 2 serious and 8 slight.



Casualty Status	Year to Date	**2018/19 Quarter 3**	*Previous year to Date*	*2017/18 Quarter 3*
Fatal	8	4	2	0
Victim went to hospital, injuries appear Serious	5	3	6	2
Victim went to hospital, injuries appear Slight	26	10	24	8
Total	39	17	32	10

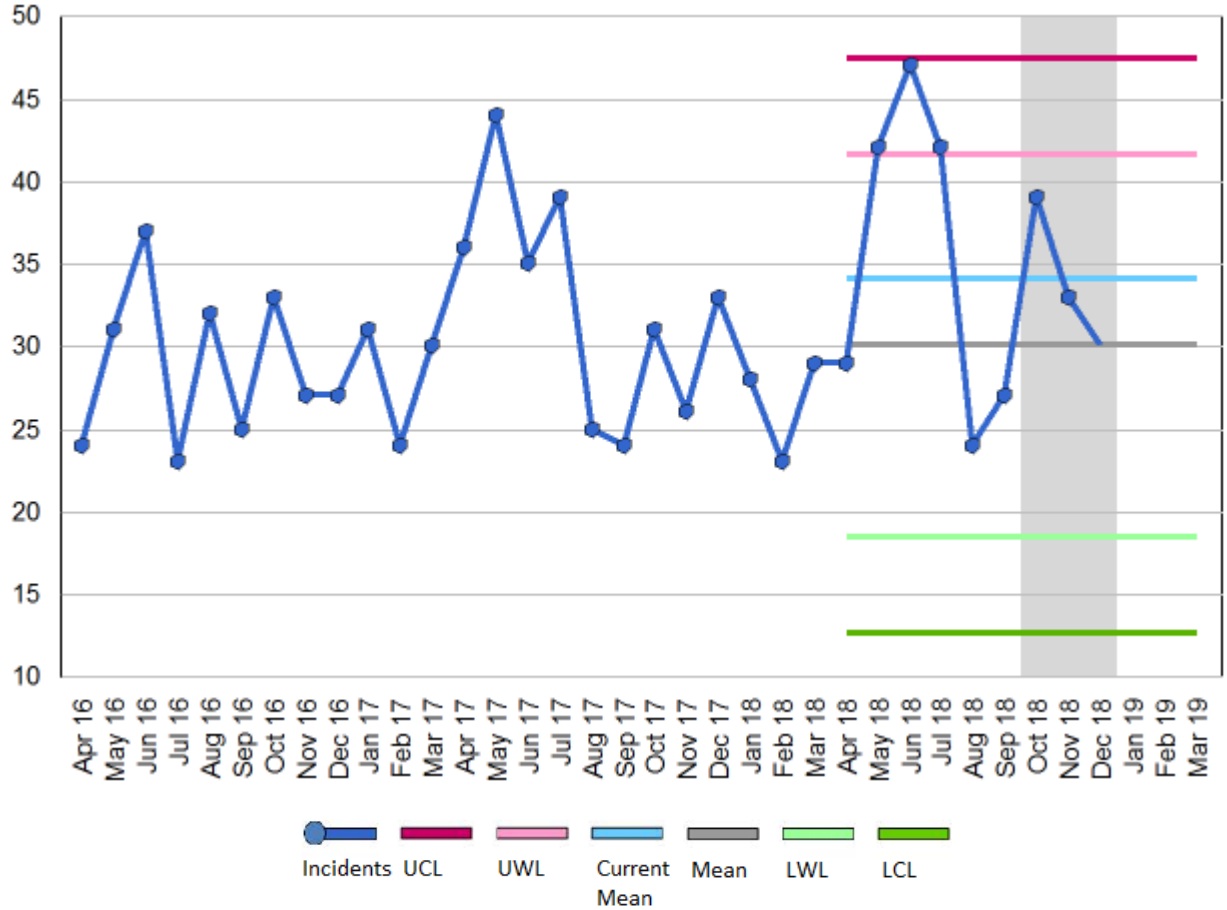
The grey line on the XmR chart denotes the mean monthly activity over the previous 3 years and the

Current Mean	**3 year Mean**	**Monthly Mean**		
		2017/18	**2016/17**	**2015/16**
4	3	3	4	4

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 102, previous year quarter three activity 90.



1.5 Accidental Building Fires	Year to Date	**2018/19 Quarter 3**	*Previous year to Date*	*2017/18 Quarter 3*
	313	102	*293*	*90*

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**		
		2017/18	**2016/17**	**2015/16**
34	30	31	28	30

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.

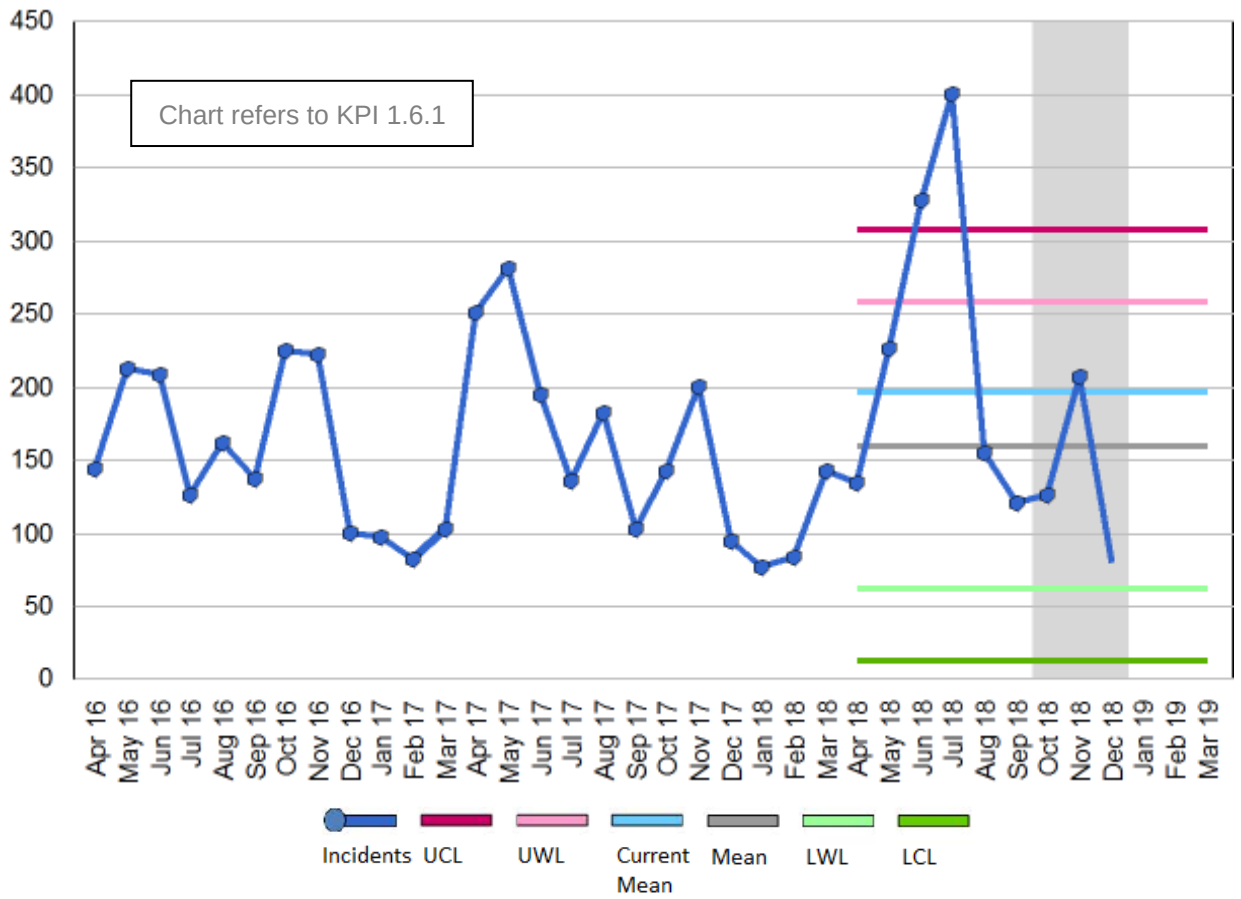
Percentage of accidental building fires limited to item 1st ignited in quarter three 22%, quarter three of previous year 21%. Percentage limited to room of origin in quarter three 33%, quarter three previous year 42%, limited to floor of origin in quarter three 15%, quarter three previous year 15% and spread beyond floor 30%, previous year 22%.

		2018/19				⬆/⇩	***2017/18***			
	***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	99	3%	32%	14%	51%	⇩	18%	30%	13%	39%
Quarter 2	78	13%	26%	18%	44%	⇩	31%	34%	12%	23%
Quarter 3	86	22%	33%	15%	30%	⇩	21%	42%	15%	22%
Quarter 4							20%	41%	14%	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 410, previous year quarter three activity 436.
1.6.2 Deliberate fires (Dwellings) quarter three activity 35, previous year quarter three activity 27.
1.6.3 Deliberate fires (Non dwellings) quarter three activity 37, previous year quarter three activity 30.



Deliberate Fire Type	Year to Date	2018/19 Quarter 3	*Previous year to Date*	*2017/18 Quarter 3*
1.6.1 Deliberate Fires - ASB	1771	410	*1580*	*436*
1.6.2 Deliberate Fires - Dwellings	102	35	*80*	*27*
1.6.3 Deliberate Fires - Non Dwellings	96	37	*120*	*30*

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		
			2017/18	2016/17	2015/16
	196	159	156	150	171

1.7 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 high.

An improvement is shown if:

1) the total number of HFSC's completed is greater than the comparable quarter of the previous year and,

2) the percentage of high HFSC outcomes is greater than the comparable quarter of the previous year.

Count of HFSC's in quarter three 4180, percentage of high risk HFSC outcomes in quarter three 64%. Count of HFSC's in quarter three of the previous year 2630, percentage high risk 68%.

	2018/19		⬆/⇩	2017/18	
	HFSC completed	**% of High HFSC outcomes**	**Progress**	***HFSC completed***	**% of High HFSC outcomes**
Quarter 1	2803	66%	⇩	3099	68%
Quarter 2	3353	67%	⇩	3241	72%
Quarter 3	4180	64%	⇩	2630	68%
Quarter 4				3008	71%

1.8 Road Safety Education Evaluation

The percentage of participants of the Wasted Lives and RoadSense 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.

The crashed car displays were shown at 29 different events during quarter 3.

There was a total of 4630 participants during quarter 3, with a percentage of positive influence[1] on participant's behaviour for the current year to date of 85%.

	2018/19 (Cumulative)		⬆/⇩	***2017/18* (Cumulative)**	
	Total participants	**% positive influence on participants behaviour[1]**	**Progress**	***Total participants***	***% positive influence on participants behaviour***
Quarter 1	5002	85%	⇔	1441	85%
Quarter 2	5983	85%	⇔	2259	85%
Quarter 3	10613	85%	⇔	3938	85%
Quarter 4				10228	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 Community Fire Safety Management Information System (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 34192, number of premises audited to date 18476 (54%).

Number of premises	Number of premises audited to date	% of all premises audited to date: 2018/19	*% of all premises audited Year end: 2017/18*
34192	18476	54%	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 25%, previous year quarter three 26%
Requiring formal activity in quarter three 7%, previous year quarter three 5%
Requiring informal activity in quarter three 60%, previous year quarter three 67%

	2018/19			⬆/⇩	***2017/18***		
	Satisfactory audits	**Requiring formal activity**	**Requiring informal activity**	**Progress**	***Satisfactory audits***	***Requiring formal activity***	***Requiring informal activity***
Quarter 1	24%	4%	70%	⇩	26%	8%	64%
Quarter 2	30%	10%	56%	⬆	26%	9%	65%
Quarter 3	25%	7%	60%	⇩	26%	5%	67%
Quarter 4					18%	5%	74%

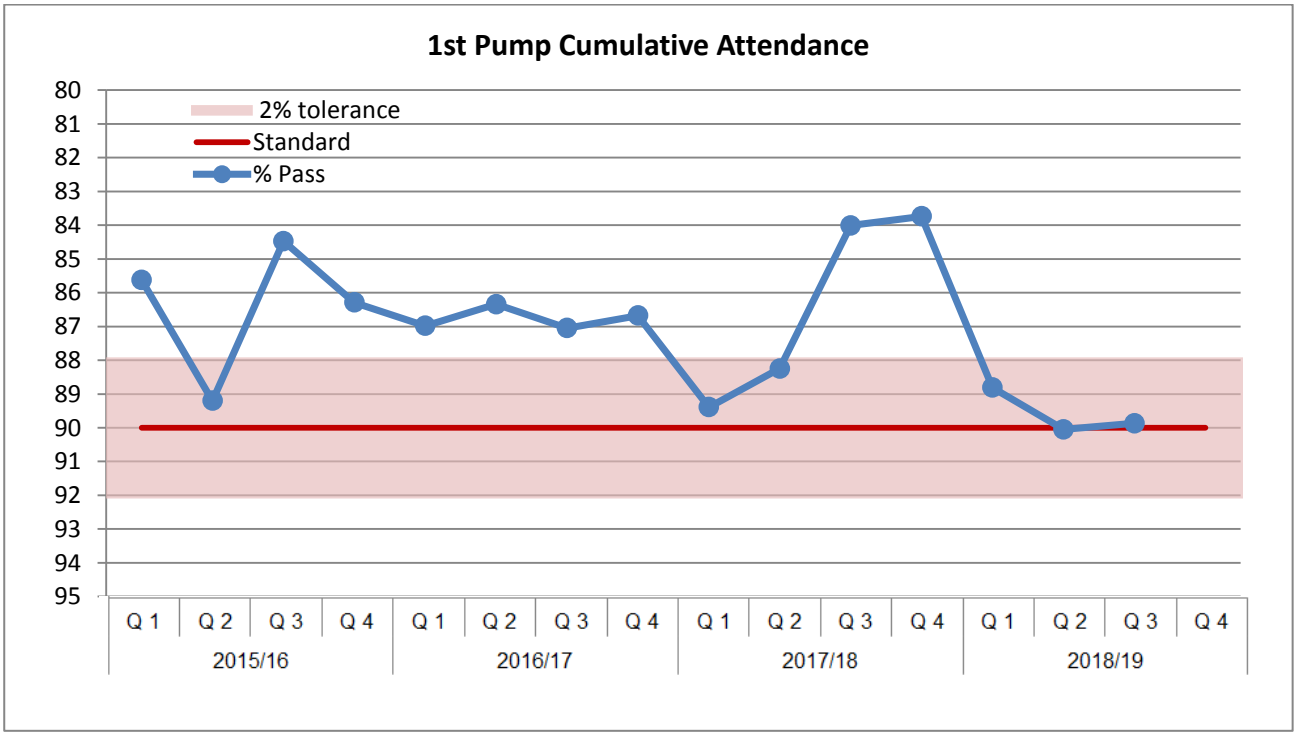
2.2.1 Emergency Response Standard - Critical Special Service - 1st Fire Engine Attendance

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 call handling time and fire engine response time. The response standard for the first fire engine attending a critical special service call is 13 minutes.

Standard: 90% of occasions.

Quarter three response percentage pass rate 89.50%, previous year quarter three 78.10%

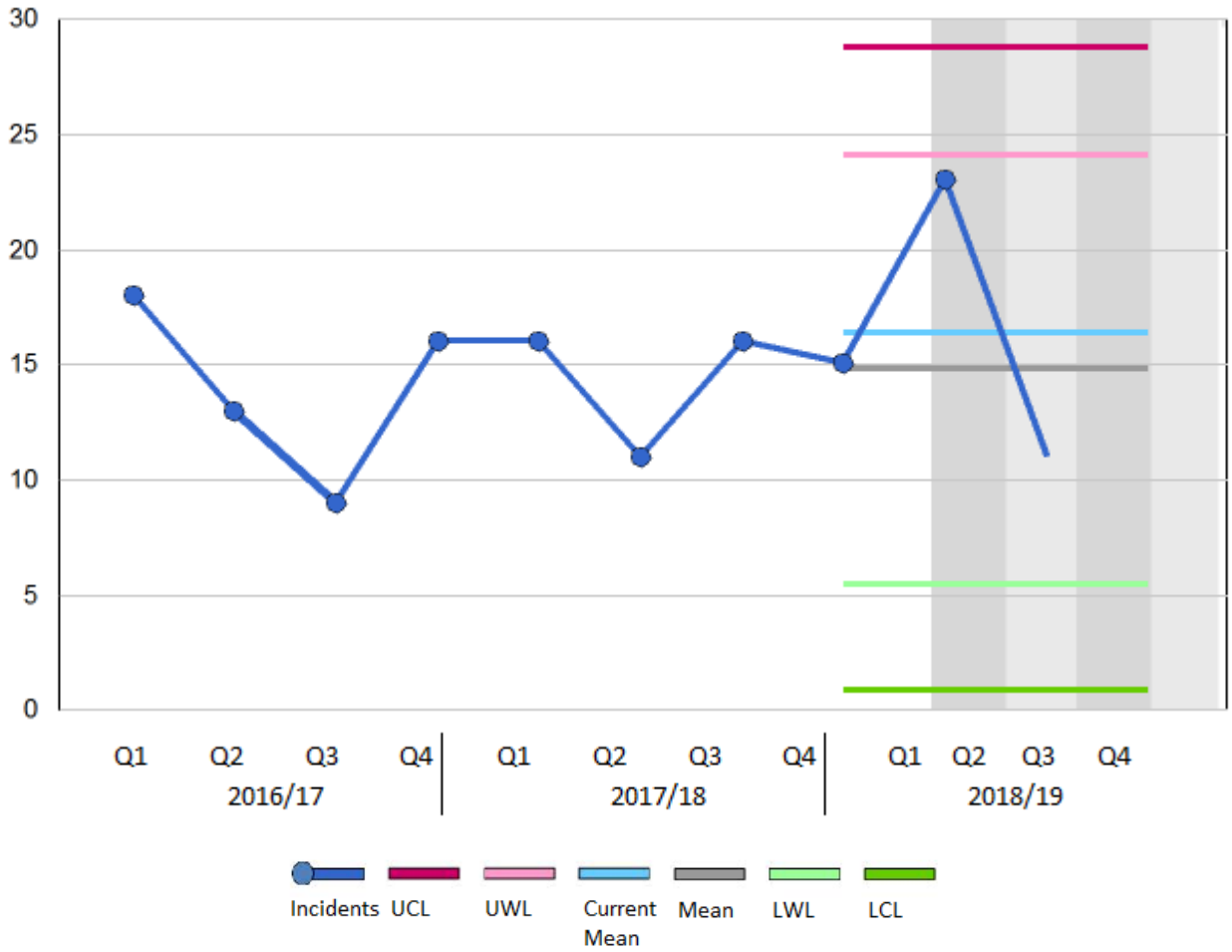
1st pump cumulative attendance standard	**Year to Date**	2018/19 Quarter 3	*Previous year to Date*	*2017/18 Quarter 3*
	89.87%	89.50%	84.21%	78.10%



2.5 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 11. Previous year quarter three 11.



Total number of staff accidents	Year to Date	2018/19 Quarter 3	*Previous year to date*	*2017/18 Quarter 3*
	49	11	43	11

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		
		2017/18	2016/17	2015/16
16	15	15	15	15

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 December 2018 £40.2 million. The spend for the same period is £40.2 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 2018/19 is £54.8 million, with a budget to 31 December of £40.2 million. The spend for the same period was £40.2 million. This gives a break even position for the year to date.

Variance:	0.00%

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.

78 people were surveyed in quarter three, 76 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?	2033	2012	98.97%	97.50%	1.50%

There have been 2,033 people surveyed since April 2012.

In quarter three of 2018/19 - 78 people were surveyed. 76 responded that they were ‘very satisfied’ or ‘fairly satisfied’ with the service they received.

4.1 Overall Staff Engagement

Staff were surveyed during April/May 2018 on topics including internal communications, working for LFRS, organisational values, leadership and management, training and development and recognition. The survey also covered 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. These questions mirror those asked in the Civil Service People Survey.

An index score is derived from the answers given by staff about these questions to indicate the level of employee engagement in the organisation. For each respondent an engagement score is calculated as the average score across the five questions where strongly disagree is equivalent to 0, disagree is equivalent to 25, neither agree nor disagree is equivalent to 50, agree is equivalent to 75 and strongly agree is equivalent to 100. The engagement index is then calculated as the average engagement score in the organisation. This approach means that a score of 100 is equivalent to all respondents saying strongly agree to all five engagement questions, while a score of 0 is equivalent to all respondents saying strongly disagree to all five engagement questions.

An improvement is shown if the percentage engagement index is greater than the previous survey.

2018 Staff Survey results:

Responses – 489 (an increase of 3.5 times more than the last barometer in period 3 of 2016/17, which equates to a 247% increase).

Engagement index - 70.13% (an increase of 6% on the last staff barometer in period 3 of 2016/17).

	Period		Change
	2018/19	**2016/17***	
Number of replies	489	141	247%
Engagement index	70.13%	64%	6.13%

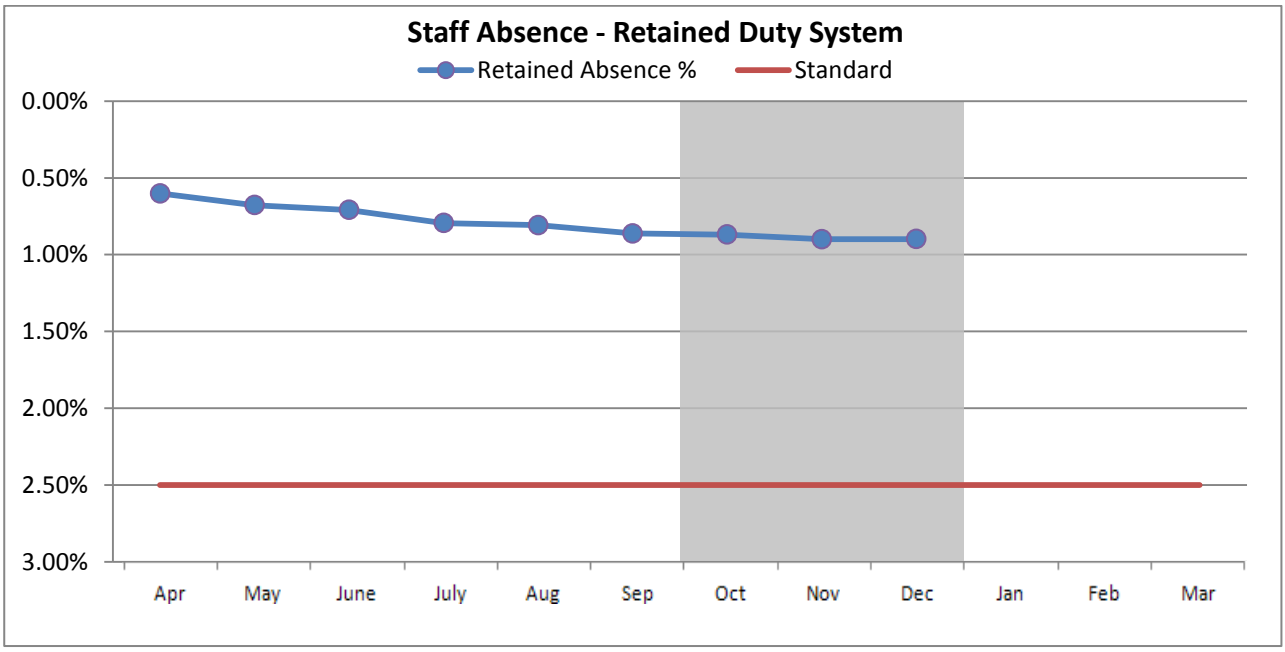
*Period 3, 2016/17

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, 0.90%

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



Cumulative retained absence (as % of available hours of cover)	0.90%