Measuring Progress

Lancashire Fire

2018-19 Quarter 4

Combined Fire Authority 27th June 2019

Lancashire Fire and Rescue Service

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Measuring Progress

Jan 19 - Mar 19

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.

Table of Contents	Page (s)
Introduction	3
Performance Framework	5
Explanation of Performance Measures	5 - 6
KPI Exception Overview	7
KPI Exception Report Analysis	9 - 22
Key Performance Indicators	23 - 40

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Measuring Progress

Jan 19 - Mar 19

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 following the page). comparing current performance against that achieved in the previous cumulative years activity, or against a predetermined 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 that SO а positive/negative exception report is not produced each quarter where only sliaht 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.

Measuring Progress

Jan 19 - Mar 19

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.

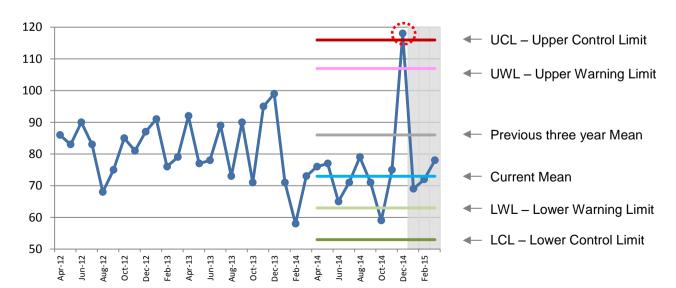
The following rules are applicable to the XmR charts and define when an exception has occurred:

- 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).



Measuring Progress

Jan 19 - Mar 19

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 (1), indicating a positive exception or, Declining (1), 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 January 2019 – March 2019 one KPI is classified as being in positive exception and four as being in negative exception.

KPI	Description	Progress	Exception Positive / Negative	Page (s)
	1 - Preventing and Prote	cting		
1.3	Accidental Dwelling Fires	•	+	9

2 - Responding to Emergencies											
2.1.1	Critical Fire – 1 st Fire Engine Attendance	Û	-	11							
2.1.2	Critical Fire – 2 nd Fire Engine Attendance	Û	ı	14							
2.4	Fire Engine Availability - Retained Duty System	Û	ı	16							
2.4.1	Fire Engine Availability - Retained Duty System (without wholetime detachments)	Subset of provided	19								

4 - Engaging with our Staff											
4.2.1	Staff Absence - Excluding Retained Duty System	Û	-	20							

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Measuring Progress

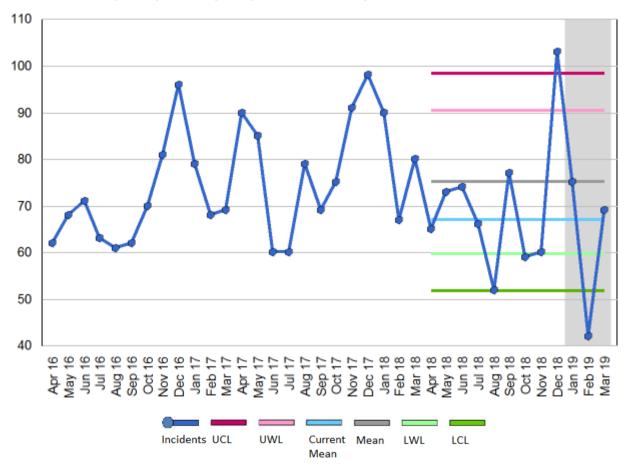
Jan 19 - Mar 19

1.3 Accidental Dwelling Fires

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

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

Quarter four activity 186, previous year quarter four activity 237, a decrease of 22%.



1.3 Accidental Dwelling Fires	Year	2018/19	Previous year	2017/18
	to Date	Quarter 4	to Date	Quarter 4
1.6 / tooldontal 2 wolling 1 inco	815	186	944	237

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	3 year	Monthly Mean					
Mean	Mean Mean		2016/17	2015/16			
67	75	78	70	78			

Measuring Progress

Jan 19 - Mar 19

What are the reasons for an Exception Report

This is a positive exception report due to the number of Accidental Dwelling Fires recorded during the month of February being better than the lower control limit (Please refer to rule 1 on page 6).

Analysis

There were 42 recorded Accidental Dwelling Fire incidents in February 2019; this is the lowest monthly count over the previous 10 years. The year also had the second lowest monthly count during August, at 53 incidents.

This contributed to the year-end ADF count to be at an all-time low, with 815 incidents recorded for 2018/19. This is 129 fewer incidents than the previous year, a reduction of 16% against that recorded 5 years ago, and a 34% reduction over the last 10 years.

The number of delivered Home Fire Safety Checks has been actively increased during 2018/19, along with Safe & Well and the Winter Safety campaign.

There has been shown to be a correlation between seasonal temperature and its influence on social behaviour, particularly when the temperatures are low. A relatively mild winter period has no doubt helped contribute to the February low, a month which historically records lower numbers due to the shorter number of days.

Actions undertaken to improve performance

A large number of local and county wide initiatives have been undertaken with the aim of reducing the causes of Accidental Dwelling Fires. Below is a sample from across the county.

- Winter safety campaign undertaken in most areas and an increase in the number of Safe and Well visits.
- Community Fire Safety (CFS) attendance at Age UK events, Dementia cafes, engagement with people with a health, physical or mental health condition to highlight key messages and champion LFRS campaigns.
- Engagement with local pubs, with material left to highlight awareness of cooking under the influence.
- Continued encouragement of partner agencies to refer those they feel at risk of fire.
- The Live Safe, Age Well presentation delivered to Councils and other large employee organisations.

Measuring Progress

Jan 19 - Mar 19

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:

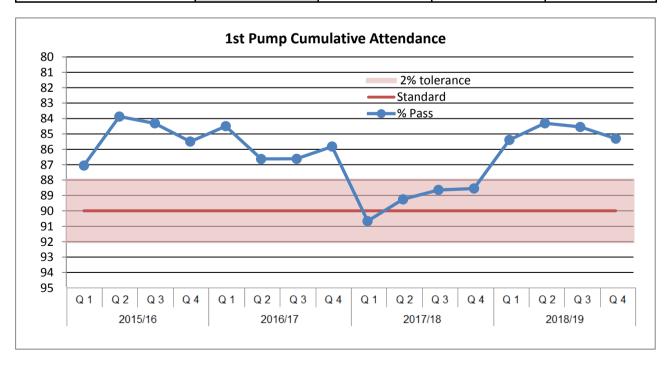
- Very high risk area = 6 minutes
- High risk area = 8 minutes
- Medium risk area = 10 minutes
- Low risk area = 12 minutes

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 four 1st pump response 87.97%, previous year quarter four 88.27%.

1 st pump cumulative	Year	2018/19	Previous year	2017/18
attendance standard	to Date	Quarter 4	to Date	Quarter 4
	85.31%	87.97%	88.55%	88.27%



Measuring Progress

Jan 19 - Mar 19

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 quarter four pass rate was 87.97%, which is outside of the 90% standard and 2 percent tolerance.

Analysis

The month of January was within standard at 90.52%, however, the month of February recorded a pass rate of 83.95%, below the standard and outside of the 2% tolerance. March recorded 88.24%, which is within tolerance. This led quarter 4 to return an overall pass rate of 87.97%.

February recorded the lowest number of critical fire incidents over the year. As shown in the table below, the frequency of failures remained constant over the three months; this makes it more difficult to maintain a high pass rate when there are fewer numbers of overall incidents. This contributes to a below standard pass rate when the 'baseline' number of failures is taken from a lower pool of incidents,

The narratives received from the officer in charge (OIC) indicates that the travel time (Extended travel distances to incident' or 'Traffic'), which accounted for 26% of returns, were the main reason for missed attendance times.

It would appear that the reduced performance in quarter 4 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 period 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.

		2018/19										
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Failed	14	15	29	32	11	12	15	19	24	11	13	14
Incidents	108	139	150	122	95	106	125	118	144	116	81	119
% Pass	87.0%	89.2%	80.7%	73.8%	88.4%	88.7%	88.0%	83.9%	83.3%	90.5%	84.0%	88.2%

Over the quarter four period, 42% of the failures failed by less than 60 seconds.

There has been a small but steady improvement over the year. The monthly [median] call handling times are shown below in seconds.

	2018/19											
Median	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Seconds	71	73	74	75	79	65	75	82	67	72	73	67

Measuring Progress

Jan 19 - Mar 19

Actions being taken to improve performance

Ongoing actions by Service Delivery Managers (SDM):

Monitor Wholetime (WT) crew reaction times, instigating local improvements where required and highlight the importance of ensuring the appliance has been booked in 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, we can consider if there are any actions which could be taken to improve attendance performance or reduce risk by community safety action.

New actions being implemented:

The six month Pre-Alerting trial commenced 15th April 2019 at: C50 Preston, C52 Fulwood, S53 Bamber Bridge and S57 Penwortham. This aims to reduce the time that crews take to react to the initial mobilisation.

Proposed removal of the 'Available redirection' appliance status in NWFC/MDT's (Mobile Data Terminal) as this has the effect of showing an appliance as unavailable.

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

Measuring Progress

Jan 19 - Mar 19

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:

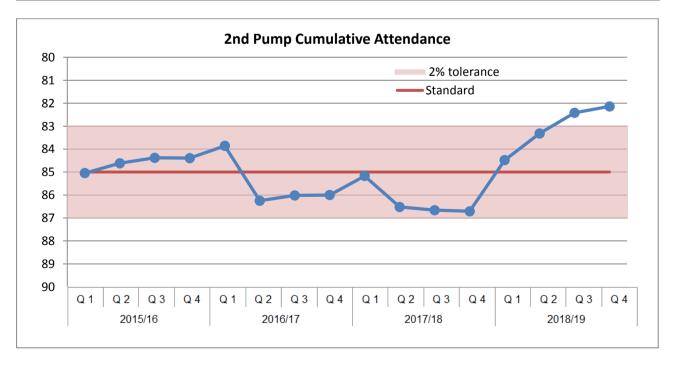
- Very high risk area = 9 minutes
- High risk area = 11 minutes
- Medium risk area = 13 minutes
- Low risk area = 15 minutes

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 four 2nd pump response 81.15%, previous year quarter four 86.86%.

2 nd pump cumulative attendance standard	Year	2018/19	Previous year	2017/18
	to Date	Quarter 4	to Date	Quarter 4
	82.14%	81.15%	86.71%	86.86%



Measuring Progress

Jan 19 - Mar 19

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 quarter four pass rate was 81.15%, which is outside of the 85% standard and 2 percent tolerance.

Analysis

The month of January was just within the 2% tolerance at 83.16%, along with the month of March, which recorded one of the highest pass rates of the year at 84.69%. However, the month of February recorded a pass rate of 73.13%, the second lowest of the year. This led quarter 4 to return an overall pass rate of 81.15%.

The findings highlighted in the 1st pump critical fires are mirrored here for the 2nd pump, with the month of February recording just 67 incidents, whilst the number of failures remained consistent with other months.

Analysis of the (quarter 4) officer in charge (OIC) narratives indicates that the 'Extended travel distances to incident', accounted for 50% 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.

		2018/19										
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Failed	11	24	17	27	10	12	17	17	28	16	18	15
Incidents	89	121	125	99	80	91	105	95	122	95	67	98
% Pass	87.6%	80.2%	86.4%	72.7%	87.5%	86.8%	83.8%	82.1%	77.0%	83.2%	73.1%	84.7%

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

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

	2018/19											
Median	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Seconds	71	73	74	75	79	65	75	82	67	72	73	67

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.

Measuring Progress

Jan 19 - Mar 19

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.

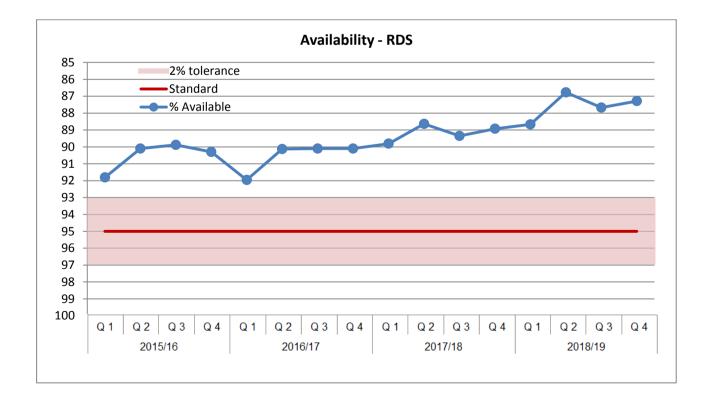
Fire engines are designated as unavailable (off-the-run) for the following reasons:

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

The percentage of time that RDS crewed engines were available for quarter four was 87.05%, a decrease of 2.12% over the previous quarters 89.17%. The cumulative availability to the end of quarter 4 was 87.29% against the previous quarter's cumulative (April to March 2018) at 88.90%.

Standard: Above 95%.

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



Measuring Progress

Jan 19 - Mar 19

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 four being below the standard and outside of the two per cent tolerance.

Analysis

Quarter 4 recorded a decrease over both quarter 3, although January recorded the highest individual month of availability over the year, at 91.17%. Unfortunately, both February and March returned two of the lowest months of the year.

	Quarter 1		1	Quarter 2		Quarter 3		Quarter4				
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Standard achieved	89.54	88.69	86.86	85.15	82.92	85.73	88.41	90.42	88.73	91.17	85.27	84.55
			88.37%			84.59%			89.17%			87.05%

Local level monitoring continues with additional analysis at pump level showing that six stations accounted for 43.2% of off the run hours within quarter 4.

The amount of RDS stations that are in exception has increased from 9 to 11 in this quarter although it should be noted that 2 of the stations have lost staff to the W/T recruits course affecting their availability through this quarter. All recently qualified W/T staff are to give dual contract cover on their return boosting their units with development and cover.

Lack of drivers and OICs (Officer in Command) continues to be an issue on some stations.

The Southern Retained Support Officer (RSO) has been appointed, and is having a positive effect on the Southern RDS stations, with 4 new recruits starting the initial course in June 2019.

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.

Actions being taken to improve performance

Two RDS initial Breathing Apparatus courses are scheduled for May & June further adding an increase to availability numbers next quarter.

Working alongside TOR over the last year the RSO group removed theory based learning from the On-Call initial course and delivered it to recruits on area prior to the course starting, this essentially allowed an extra 2 days of practical learning for recruits on the course.

Also trialled this quarter was for successful recruits to attend a pre course learning with their area RSO. The students were required to attend four 3 hour sessions culminating in the pre learning day at STC. The sessions included, H&S, ladder and pump theory, knots and lines, rank structure

Measuring Progress

Jan 19 - Mar 19

as well as attitude and discipline. The sessions not only gave the students pre course development, it also brought the students together prior to the course starting, this in turn formed bonds that assisted each other during the course. It was noted by TOR the recruit's attitude and propensity for learning was greatly improved.

This quarter recruitment campaign saw LFRS receive over 120 On-Call applications service wide. This is a vast improvement on previous year's campaigns and emphasises the work being carried out by RSO's. Over the last year there has been a marked improvement on the public's awareness of On-Call, this will only assist the service to attract potential applicants in the future.

Measuring Progress

Jan 19 - Mar 19

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 were available for quarter four was 83.06%. 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.

Measuring Progress

Jan 19 - Mar 19

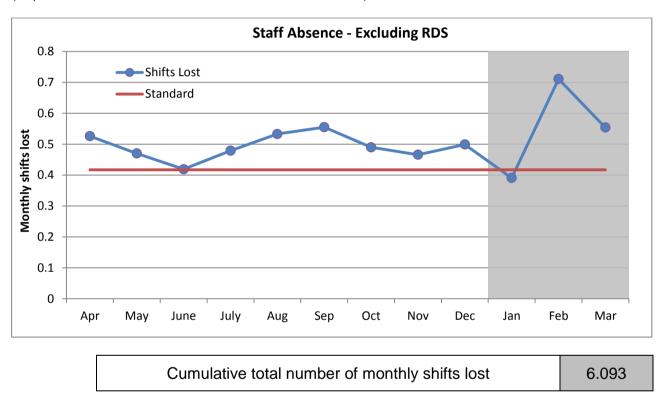
4.2.1 Staff Absence - Excluding Retained Duty System

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)



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 two months during quarter four.

Analysis

During quarter four January 2019 – March 2019, absence statistics show above target for two of the three months. Whilst shifts lost for uniformed personnel for the month of January remained below target, this increased above target for February and March. 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 7 cases of long term absence which span over the 3 months.

At the end of March the cumulative totals show that non-uniformed staff absence was above target making Lancashire **safer**

Measuring Progress

Jan 19 - Mar 19

at 8.9 shifts lost per employee and for whole-time, staff absence was just above target at 5.25 shifts lost per employee. Overall absence for all staff (except Retained Duty System) was 6.16 shifts lost which is above the Service target of 5 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.

Lancashire Fire and Rescue Service Measuring Progress

Jan 19 - Mar 19

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Measuring Progress

Jan 19 - Mar 19

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 (\updownarrow), Maintaining (\Leftrightarrow) or Declining (\updownarrow), followed by a summary of the current position.

КРІ	Description	Progress	Page (s)							
	1 - Preventing and Protecting									
1.1	Risk Map Score	•	24							
1.2	Overall Activity	•	25							
1.3.1	ADF - Extent of Damage	1	26							
1.3.2	ADF - Number of Incidents Where Occupants have Received a HFSC	\Leftrightarrow	26							
1.4	Accidental Dwelling Fire Casualties	Û	27							
1.5	Accidental Building Fires (Non Dwellings)	Û	28							
1.5.1	ABF (Non Dwellings) - Extent of Damage	Û	29							
1.6	Deliberate Fires	•	30							
1.7	Home Fire Safety Checks	\Leftrightarrow	31							
1.8	Road Safety Education Evaluation	\Leftrightarrow	32							
1.9.1	Fire Safety Enforcement - Known Risk	Û	33							
1.9.2	Fire Safety Enforcement - Risk Reduction	•	33							
	2 - Responding to Emergencies									
2.2.1	Critical Special Service - 1 st Pump Attendance	•	34							
2.3	Fire Engine Availability – Wholetime, Day Crewing and Day Crewing Plus	1	35							
2.5	Staff Accidents	Û	36							
	3 - Delivering Value for Money									
3.1	Progress Against Savings Programme	•	37							
3.2	Overall User Satisfaction	•	38							
	4 - Engaging with our Staff									
4.1	Overall Staff Engagement	1	39							
4.2.2	Staff Absence - Retained Duty System	•	40							

Measuring Progress

Jan 19 - Mar 19

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:

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

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	Н	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
2017 count	25
2018 count	22
Change	-12% Overall reduction in Very High risk SOA's

High
74
74
Overall reduction in High risk SOA's

Medium					
321					
321					
← → 0%					
Overall increase					
in Medium risk					
SOA's					

Low
521
524
1%
Overall reduction
in Low risk SOA's

Overall Risk Score
32398
32114
-1% Overall reduction in fire risk

Measuring Progress

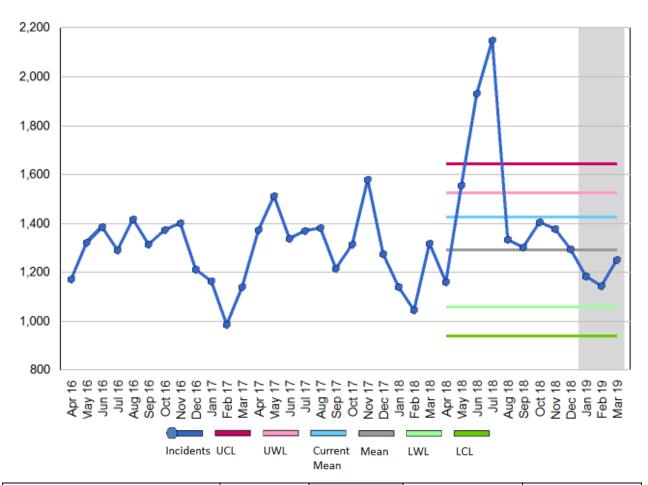
Jan 19 - Mar 19

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 four activity 3575, previous year quarter four activity 3499, an increase of 2.17%.

Included within this KPI is the incident type 'Gaining Entry', where we attended on request of the North West Ambulance Service. During quarter four, we were asked to attend on 349 occasions, of which 218 resulted in the use of tools to gain entry to a property.



1.2 Number of attended incidents	Year	2018/19	Previous year	2017/18
	to Date	Quarter 4	to Date	Quarter 4
1.2 Number of attended molderite	17062	3575	15840	3499

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			Monthly Mean				
′	Mean	Mean	2017/18	2016/17	2015/16			
	1421	1289	1320	1263	1285			

Measuring Progress

Jan 19 - Mar 19

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 four 25%, quarter four of previous year 21%. Percentage limited to room of origin in quarter four 64% quarter four previous year 64%, limited to floor of origin in quarter four 8%, quarter four previous year 9% and spread beyond floor 4%, previous year 6%.

	2018/19							201	7/18	
	*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	164	24%	63%	10%	3%	Û	20%	69%	5%	6%
Quarter 4	138	25%	64%	8%	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.

	201	8/19	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	15	8%	18	8%	

Analysis: Of the 15 accidental dwelling fire incidents that had received a HFSC within the previous 12 months, 4 had 'Heat and smoke damage only', 2 resulted in damage 'Limited to item first ignited', 7 'limited to room of origin' and 2 incidents had damage 'Limited to floor of origin'.

Measuring Progress

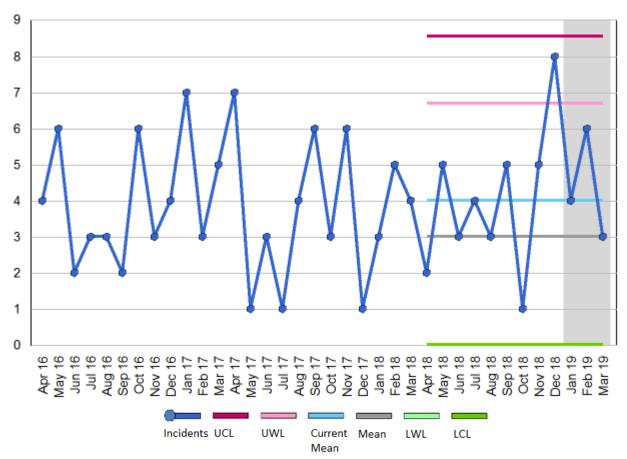
Jan 19 - Mar 19

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.

No fatalities occurred during quarter four. Three casualties are recorded as serious and 10 slight. Quarter four of the previous year recorded 4 fatalities, 1 serious and 7 slight.



Casualty Status	Year to Date	2018/19 Quarter 4	Previous year to Date	2017/18 Quarter 4
Fatal	8	0	6	4
Victim went to hospital, injuries appear Serious	8	3	7	1
Victim went to hospital, injuries appear Slight	33	10	31	7
Total	49	13	44	12

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

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

Measuring Progress

Jan 19 - Mar 19

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 four activity 93, previous year quarter four activity 80.



1.5 Accidental Building Fires	Year to	2018/19	Previous year	2017/18
	Date	Quarter 4	to Date	Quarter 4
	405	93	373	80

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	3 year	Monthly Mean		n
Mean	ean Mean	2017/18	2016/17	2015/16
34	30	31	28	30

Measuring Progress

Jan 19 - Mar 19

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 four 15%, quarter four of previous year 20%. Percentage limited to room of origin in quarter four 38%, quarter four previous year 41%, limited to floor of origin in quarter four 18%, quarter four previous year 14% and spread beyond floor 30%, previous year 26%.

		2018/19			♠ /⇩		201	7/18		
	*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%	Û	18%	30%	13%	39%
Quarter 2	80	13%	26%	18%	44%	Û	31%	34%	12%	23%
Quarter 3	85	20%	33%	15%	32%	Û	21%	42%	15%	22%
Quarter 4	59	15%	38%	18%	30%	Û	20%	41%	14%	26%

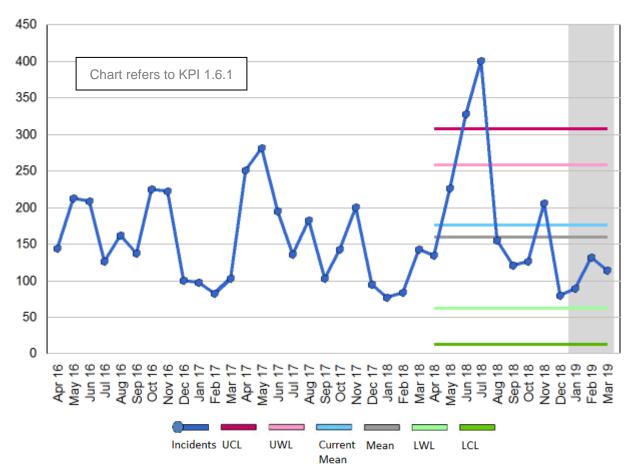
Measuring Progress

Jan 19 - Mar 19

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 four activity 333, previous year quarter four activity 301.
- 1.6.2 Deliberate fires (Dwellings) quarter four activity 22, previous year quarter four activity 29.
- 1.6.3 Deliberate fires (Non dwellings) quarter four activity 26, previous year quarter four activity 24.



Deliberate Fire Type	Year to Date	2018/19 Quarter 4	Previous year to Date	2017/18 Quarter 4
1.6.1 Deliberate Fires - ASB	2103	333	1881	301
1.6.2 Deliberate Fires - Dwellings	124	22	109	29
1.6.3 Deliberate Fires - Non Dwellings	121	26	144	24

The grey line on the XmR chart denotes the mean monthly activity	Current Mean	3 year Mean	Monthly Mean		n
over the previous 3 years and the pale	wiean	Wiean	2017/18	2016/17	2015/16
blue line the current mean.	175	159	156	150	171

Measuring Progress

Jan 19 - Mar 19

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 four 4430, percentage of high risk HFSC outcomes in quarter four 65%. Count of HFSC's in quarter four of the previous year 3008, percentage high risk 71%.

	201	8/19	↑ /↓	2017/18	
	HFSC completed	% of High HFSC outcomes	Progress	HFSC completed	% of High HFSC outcomes
Quarter 1	2802	66%	ψ\û	3099	68%
Quarter 2	3355	67%	↑ /Ū	3241	72%
Quarter 3	4186	64%	1 /↓	2630	68%
Quarter 4	4430	65%	↑ /Ū	3008	71%

Measuring Progress

Jan 19 - Mar 19

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 15 different events during quarter 4.

There was a total of 6607 participants during quarter 4, with a percentage of positive influence^[1] on participant's behaviour for the current year to date of 85%.

		2018/19 imulative)	1,₽	2017/18 (Cumulative)		
	Total participants	% positive influence on participants behaviour ^[1]	Progress	Total participants	% positive influence on participants behaviour	
Quarter 1	5002	85%	\Leftrightarrow	1441	85%	
Quarter 2	5983	85%	\Leftrightarrow	2259	85%	
Quarter 3	10613	85%	\Leftrightarrow	3938	85%	
Quarter 4	17220	85%	\Leftrightarrow	10228	85%	

^[1] From a sample

Measuring Progress

Jan 19 - Mar 19

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 34484, number of premises audited to date 18617 (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
34484	18617	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 four 19%, previous year quarter four 18% Requiring formal activity in quarter four 9%, previous year quarter four 5% Requiring informal activity in quarter four 70%, previous year quarter four 74%

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

Measuring Progress

Jan 19 - Mar 19

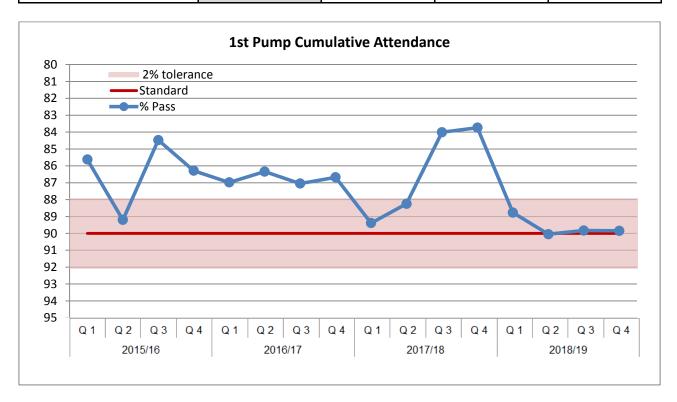
2.2.1 Emergency Response Standard - Critical Special Service - 1st Fire Engine Attendance

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 four response percentage pass rate 89.90%, previous year quarter four 82.86%

1 st pump cumulative attendance standard	Year	2018/19	Previous year	2017/18
	to Date	Quarter 4	to Date	Quarter 4
	89.85%	89.90%	83.88%	82.86%



Measuring Progress

Jan 19 - Mar 19

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.

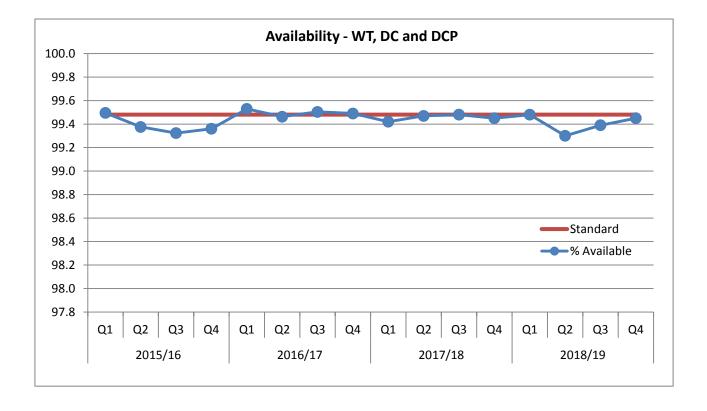
Fire engines are designated as unavailable for the following reasons:

- Mechanical
- Crew deficient
- Engineer working on station
- Appliance change over
- Debrief

- Lack of equipment
- Miscellaneous
- Unavailable
- Welfare

Standard: 99.5%

Quarter four cumulative availability 99.45%, previous year quarter four 99.45%.



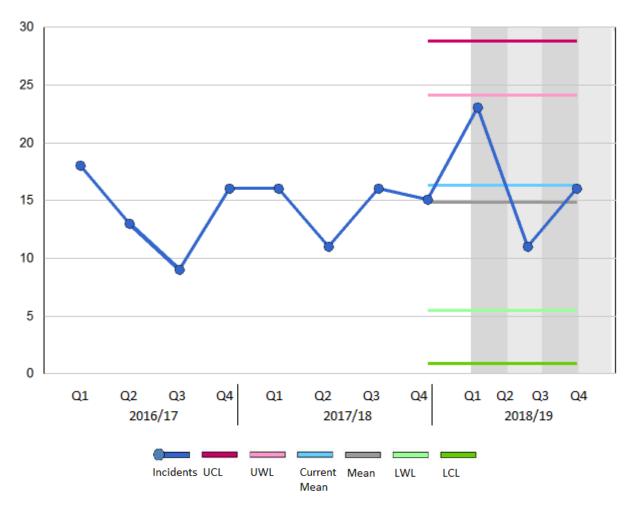
Measuring Progress

Jan 19 - Mar 19

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 four 16. Previous year quarter four 16.



Total number of staff accidents	Year to	2018/19	Previous year	2017/18
	Date	Quarter 4	to date	Quarter 4
	65	16	59	16

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	Current 3 year		Quarterly Mean			
Mean	Mean	2017/18	2016/17	2015/16		
16	15	15	15	15		

Measuring Progress

Jan 19 - Mar 19

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 March 2019 £54.8 million. The spend for the same period is £54.3 million^[1].

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.

Variance:

-0.73%^[2]

[1] Although the closure of the accounts process during May (including yearend accounting adjustments in respect of items such as provisions and reserves transfers and capital accounting) has yet to be finalised. Following completion of the yearend process, this is expected to result in an underspend of £0.4m, which will be reported to Resources Committee in May.

^[2]Variance based upon expected results.

Measuring Progress

Jan 19 - Mar 19

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.

72 people were surveyed in quarter four, 72 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?	2105	2084	99.00%	97.50%	1.54%

There have been 2,105 people surveyed since April 2012.

In quarter four of 2018/19 - 72 people were surveyed. 72 responded that they were 'very satisfied' or 'fairly satisfied' with the service they received.

Measuring Progress

Jan 19 - Mar 19

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).

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

^{*}Period 3, 2016/17

Measuring Progress

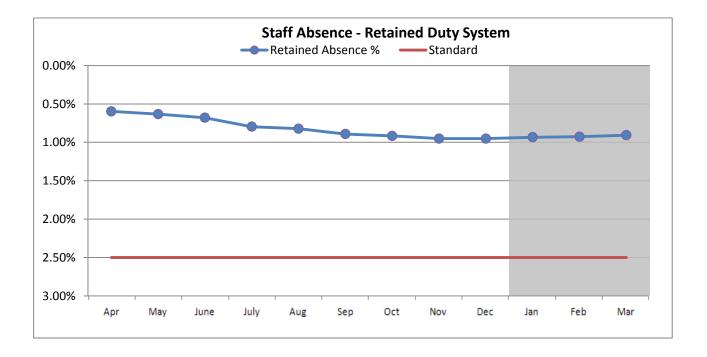
Jan 19 - Mar 19

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 four, 0.91%

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



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

0.91%