

# Lancashire Combined Fire Authority Performance Committee

Wednesday, 13 September 2023, at 10.00 am in the Main Conference Room, Service Headquarters, Fulwood.

## Minutes

<b>Present:</b>	
<b>Councillors</b>	
T Hurn (Chair)	
P Rigby (Vice-Chair)	
Z Khan MBE	
M Pattison (for L Beavers)	
J Rigby	
M Salter	
D Smith	
B Yates	

<b>Officers</b>
J Charters, Assistant Chief Fire Officer (LFRS) S Brown, Director of Corporate Services (LFRS) M Hamer, Area Manager, Prevention and Protection (LFRS) N Taylor, Area Manager, Head of Service Delivery (LFRS) L Barr, Member Services Officer (LFRS)

<b>In attendance</b>
K Wilkie, Fire Brigades Union

9/23	<b>Apologies For Absence</b>
	Apologies were received from County Councillor Lorraine Beavers, County Councillor Loraine Cox, and County Councillor Hasina Khan.
10/23	<b>Disclosure of Pecuniary and Non-Pecuniary Interests</b>
	None received.
11/23	<b>Minutes of Previous Meeting</b>
	<b>Resolved:</b> - That the Minutes of the last meeting held on the 18 June 2023 be confirmed as a correct record and signed by the Chairman.

12/23

## Performance Management Information

The Chair welcomed new Member, Matthew Salter to the meeting and gave County Councillor Andrea Kay his best wishes.

The Assistant Chief Fire Officer explained that, due to the devastation caused by the earthquake in Morocco, the Foreign Commonwealth Development Office (FCDO) and government ministers, along with the National Fire Chiefs Council (NFCC), had agreed a UK response to help assist with the rescue effort. Wayne Ward, Rick Cutler, Ian McGee, and Lindsey Sielski (plus Search Dog Davey) were deployed from Lancashire Fire and Rescue (LFRS) to Morocco to assist with the effort for an expected 7-10 days. Attendees of the meeting wished them well and a safe return.

The Assistant Chief Fire Officer presented a comprehensive report to the Performance Committee. This was the 1<sup>st</sup> quarterly report for 2023/24 as detailed in the Community Risk Management Plan 2022-2027.

Members were informed that the proposed alterations to some KPIs had been agreed at Planning Committee and implemented within the report from the current quarter. The changes to KPIs included the removal of KPIs 3.3.1 (Fire Engine Availability – Wholetime Shift System) and 3.3.2 (Fire Engine Availability – On-Call Shift System). The data would be reported within KPI 3.3 (Total Fire Engine Availability), for first pump availability of wholetime and on-call fire engines across the 39 stations in Lancashire with a revised overall availability target of 90%, which would be reviewed annually. The addition of a new Key Performance Indicator for Business Fire Safety Checks (BFSC) (2.9) had also been applied.

This quarter, one Key Performance Indicator (KPI), 2.9 Business Fire Safety Checks, was shown in positive exception and four Key Performance Indicators were shown in negative exception. These were 1.2.1 Staff Absence Wholetime (WT), 1.2.3 Staff Absence Greenbook, 2.6.2 Deliberate Fires – Commercial Premises, and 3.3 Total Fire Engine Availability.

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

### **KPI 1 – Valuing our people so that they can focus on making Lancashire safer**

#### **1.1 Overall Staff Engagement**

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

From April to June 2023, five station visits were carried out by principal officers and area managers as part of the service-wide station visits programme. Nine station visits involving Corporate Planning and Human Resources (HR) departments were undertaken to engage with members of staff affected by duty system changes as part of the emergency cover review. Seventeen wellbeing interactions were undertaken ranging from wellbeing sessions with crews to support dog interactions.

The Service engaged staff in several trials relating to the fleet and equipment including rope rescue equipment and wildfire welfare bags. Three staff engagement sessions were held with On-Call firefighters over policy changes relating to operational response. A briefing event for flexi duty officers was held and six service delivery briefings for operational managers were held: one in each area of the county.

### **1.2.1 Staff Absence Wholetime**

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

Annual Standard: Not more than 5 shifts lost.

Annual Shifts Lost ÷ 4 quarters: 1.25

Cumulative total number of shifts lost: 2.098

The negative exception report was due to the number of shifts lost through absence per employee being above the Service target for quarter 1.

During quarter 1, April to June 2023, absence statistics showed whole-time personnel absence above target for the quarter.

1,301 Wholetime absence shifts lost = 2.098 against a target of 1.25 which was 0.85 shifts over target. During the same quarter of the previous year 1.88 shifts were lost which was an increase of 0.22 shifts lost per wholetime employee. Cases of long-term (greater than 28 days) absence over the whole quarter had increased by 0.19 shifts from the previous quarter, which accounted for the increase in shifts lost.

The Assistant Chief Fire Officer advised that, as discussed at the previous committee meeting, the data had been split between long-term and short-term absences.

The number of cases of long-term absence which spanned over the total of the 3 months had increased from two cases in Q4 of 2022-23 to five cases in Q1 2023-24. The absence reasons being:

- Mental Health - Other
- Cancer and Tumours
- Musculo Skeletal
- Hospital/Post Operative

As a result of the five cases of long-term absences, 208 shifts were lost during Q1 compared to 91 shifts lost during the previous quarter. These cases accounted for 0.34 shifts lost per person over the quarter.

There were 28 other cases of long-term absence also recorded within the 3 months:

- Mental health (Encompassing: Mental health – Other, 6 cases and Mental

Health – Work Related Stress, 4 cases) – 10 cases

- Musculo skeletal (Other/Unable to define) – 9 cases
- Hospital/Post Operative – 6 cases
- Other absence types (single returns) – 3 cases

In Q1, 121 shifts lost were related to respiratory related absences, which included Coronavirus absence and equated to 0.20 shifts lost per person.

Following Member queries, the Assistant Chief Fire Officer highlighted to the committee that the Service had a robust Absence Management Policy which detailed the approach to managing periods of workplace absence to ensure that staff were supported back to work at the appropriate time based upon their individual needs and in a compassionate way.

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

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

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

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

A key challenge for supporting operational staff returning to work was that the threshold for fitness and returning to work for operational firefighters was higher than in other occupations due to their hazardous working conditions.

The Assistant Chief Fire Officer highlighted that the statistics for the quarter had been impacted by a number of individuals having stress related sickness absence due to significant investigations, some of which had subsequently been resolved.

In response to a question from County Councillor Salter in regard to benchmarking against data from other Fire & Rescue services, the Assistant Chief Fire Officer advised that in the last quarter report, LFRS had benchmarked sickness absence

levels and performance against other Fire & Rescue services by utilising the National Occupational Health data, Office for National Statistics (ONS) data, and Chartered Institute of Personnel and Development (CIPD) data. Data showed that absence levels within the Service were equal to or lower than the national average. It was noted that a review of sickness absence targets could be prompted following an extended period of consistent negative exception, although post covid impacts were still affecting figures. In this respect, the Assistant Chief Fire Officer had asked Liz Sandiford, Head of Human Resources, to undertake some preliminary work to consider options.

### **1.2.2 Staff Absence On-Call (OC)**

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

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

Cumulative on-call absence (as a % of available hours cover) at the end of the quarter, 1.50%.

### **1.2.3 Staff Absence Greenbook**

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

Annual Standard: Not more than 5 shifts lost.

Annual Shifts Lost ÷ 4 quarters: 1.25

Cumulative shifts lost: 1.740

The negative exception report was due to the number of shifts lost through absence per employee being above the Service target for quarter 1.

The Assistant Chief Fire Officer advised Members that Wholetime Staff were those in a firefighter, uniformed, grey book role. Green book staff were typically those in non-uniformed, support roles such as Human Resources and Health and Safety etc.

The agreed target performance level was 5 shifts lost per employee per year for green book staff. The actual shifts lost for the period for this group of staff was 1.74 which was 0.49 above target. During the same quarter of the previous year, 1.33 shifts were lost which was an increase of 0.41 shifts lost per Greenbook staff.

During quarter 1, April to June 2023, absence statistics showed non-uniformed personnel above target for the quarter.

362 non-uniformed absence shifts lost = 1.74 against a target of 1.25

During the quarter there were no cases of long-term absence which spanned over the total of the 3 months. There were seven cases of long-term absence which were recorded within the 3 months:

- Musculo Skeletal – 4 cases
- Other absence types (single returns) – 3 cases

During quarter 1, 212 shifts were lost as a result of the above seven cases of long-term absences. These cases accounted for 1.01 shifts lost per person over the quarter.

In quarter 1, 20 shifts lost were related to Respiratory related absences, this included Coronavirus absence and equated to 0.10 shifts lost per person. This showed a decrease of 0.39 shifts lost from the previous quarter (quarter 4, 2022-23).

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

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

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

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

The Assistant Chief Fire Officer advised that the policies and procedures relating to absences were consistent for both green book and grey book staff.

County Councillor Salter queried whether a low sickness target impacted on sickness provision for staff and if the target should be reviewed. The Assistant Chief Fire Officer explained that the robust policies and procedures the Service had in place helped to manage absences and maintain low numbers of absences. The post pandemic effects were still being experienced and the Service monitored absence levels to assist prediction of whether they were gradually returning to pre-pandemic volumes. The Assistant Chief Fire Officer advised that the Head of HR

could be invited to the next committee to discuss findings in absence levels against comparable data sets and whether targets should be reviewed should Members welcome this.

### 1.3.1 Workforce Diversity

This indicator measured diversity as a percentage.

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

Gender:	Female 20%(3%)	Male 80%(81%)
Ethnicity:	BME 3%(3%)	Not stated 3%(3%) White 94%(94%)
Sexual Orientation:	LGBT 4%(3%)	Heterosexual 53%(48%) Not stated 43%(49%)
Disability:	Disability 3%(3%)	No disability 94%(94%) Not stated 3%(3%)

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

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

Gender:	Female	Grey book 9%	Green book 59%
	Male	Grey book 91%	Green book 41%
Ethnicity:	BME	Grey book 3%	Green book 5%
	White	Grey book 95%	Green book 88%
	Not stated	Grey book 2%	Green book 7%
Sexual Orientation:	LGBT	Grey book 4%	Green book 3%
	Heterosexual	Grey book 52%	Green book 57%
	Not stated	Grey book 44%	Green book 40%
Disability:	Disability	Grey book 3%	Green book 2%
	No disability	Grey book 95%	Green book 91%
	Not stated	Grey book 2%	Green book 7%

### 1.3.2 Workforce Diversity Recruited

This new indicator measured workforce diversity recruited as a percentage.

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

Gender:	Female 41%(32%)	Male 59%(68%)	
Ethnicity:	BME 6%(0%)	White 76%(95%)	Not Stated 18%(5%)
Sexual Orientation:	LGBT 6%(14%)	Heterosexual 76%(81%)	Not stated 18%(5%)
Disability:	Disability 6%(0%)	No disability 94%(97%)	Not stated 0%(3%)

During quarter 1, there were a total of 17 new recruits. It was noted that a further breakdown of the data would not be provided as it may enable the identification of individuals, due to the small numbers of recruits during certain periods.

#### **1.4 Staff Accidents**

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

Total number of staff accidents, 16 for quarter 1; year to date 16; previous year to date 8. Quarterly activity increased 100% over the same quarter of the previous year.

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

#### **2.1 Risk Map Score**

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

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

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

The current score was 31,170 and the previous year's score was 31,576 which meant that the fire risk continued to reduce.

In response to a query from Councillor Smith regarding the visibility of the Risk Map, the Assistant Chief Fire Officer stated that he would share data relating to risk gradings of areas, if possible, down to ward level, with Members outside of the meeting. He added that Members could assist with lowering risk by sharing the Service's social media messages and signposting any relevant premises to the Service prevention and protection offerings.

#### **2.2 Overall Activity**



This indicator measured the number of incidents that LFRS attended with one or more pumping appliances. Incidents attended included fires, special service calls, false alarms and collaborative work undertaken with other emergency services i.e.: missing person searches on behalf of the Police and gaining entry incidents at the request of the Ambulance Service.

Incidents attended, year to date 5,116; previous year to date 4,900. Quarterly activity increased 4.41% over the same quarter of the previous year.

In quarter 1, the Service attended 5,116 incidents. The report presented a chart which represented the count and percentage that each activity had contributed to the overall quarter's activity:

- Total False Alarm Calls (due to apparatus, good intent and malicious) – 2071, 41%
- Total Primary Fire Calls (accidental dwelling / building and deliberate dwelling / commercial fires and other primary fires) – 543, 11%
- Total Secondary Fire Calls (deliberate and accidental fires) – 1239, 24%
- Total Special Service Calls (critical incidents, gaining entry, RTCs, Flooding and other critical incidents) – 1246, 24%

### **2.3 Accidental Dwelling Fires (ADF)**

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

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

Accidental Dwelling Fires, 204 in quarter 1; year to date 204; previous year to date 204. Quarterly activity remained static over the same quarter of the previous year.

#### **2.3.1 ADF – Harm to people: Casualties**

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

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

Fatal,	0 in quarter 1; year to date 0; previous year to date 2
Injuries appear Serious	3 in quarter 1; year to date 3; previous year to date 4
Injuries appear Slight	8 in quarter 1; year to date 8; previous year to date 1

Quarterly activity increased 57.14% over the same quarter of the previous year.

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

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

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

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

Current quarter, combined percentage of 84% against same quarter of the previous year, combined percentage of 85%.

Combined quarterly percentage had therefore decreased 0.49% over the same quarter of the previous year.

## **2.4 Accidental Building Fires (ABF) (Commercial Premises)**

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

ABF (Commercial Premises), 68 in quarter 1; year to date 68; previous year to date 68. Quarterly activity remained static over the same quarter of the previous year.

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

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

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

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

- current quarter, combined percentage of 66% against
- same quarter of the previous year, combined percentage of 68%.

Combined quarterly percentage had therefore decreased 1.5% over the same quarter of the previous year.

## **2.5 Accidental Building Fires (Non-Commercial Premises)**

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

ABF (Non-Commercial Premises), 36 in quarter 1; year to date 36; previous year to

date 29. Quarterly activity increased 24.14% over the same quarter of the previous year.

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

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

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

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

- current quarter, combined percentage of 39% against
- same quarter of the previous year, combined percentage of 24%.

Combined quarterly activity had therefore increased 14.8% over the same quarter of the previous year.

## **2.6 Deliberate Fires Total: Specific performance measure of deliberate fires**

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

Deliberate Fires – 681 in quarter 1; year to date 681; previous year to date 730. Quarterly activity decreased 6.71% over the same quarter of the previous year.

### **2.6.1 Deliberate Fires – Dwellings**

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

Deliberate Fires – Dwellings, 24 in quarter 1, year to date 24; previous year to date 16. Quarterly activity increased 50.00% over the same quarter of the previous year.

### **2.6.2 Deliberate Fires - Commercial Premises**

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

Deliberate Fires – Commercial Premises, 43 in quarter 1; year to date 43; previous year to date 33.

Quarterly activity increased 30.30% over the same quarter of the previous year.

The negative exception report was due to the number of deliberate fires being

above the upper control limit during June of quarter 1.

The count of deliberate fires within the first quarter was within the normal range for the months of April and May, however, June had recorded an unusual high of 22 which accounted for 51.2% of fires over the three-month period. In June, the county experienced a protracted period of hot weather which tended to contribute to an increase in the number of secondary fires which, in the case of this KPI, could spread to a building and were then classed as a primary fire.

Over the period April, May, and June, 10 of the incidents occurred in prisons which accounted for almost a quarter of all deliberate fires at commercial premises. On average, this property type had 2.3 fires per month, therefore, the figures for quarter 1 were higher. The most common ignition source was smoking materials where an electronic vape was used to intentionally cause a fire.

Buildings that were not currently in use also made up a significant proportion of quarter 1's figures.

Existing partnerships were being used across areas to tackle the increase and included: LFRS were linking with the owners of buildings and the local authority which would improve security and limit access, targeted work was taking place with Lancashire Constabulary (LanCon) to address areas of anti-social behaviour, and there was joint working between LFRS and the LanCon to secure successful prosecutions and therefore, act as a deterrent.

Prevention activity had been targeted to areas which experienced relatively high levels of activity. This involved the utilisation of education delivery packages to address and educate young people around the consequences of deliberate fire setting and the more bespoke Fire Intervention Response and Education Scheme (FIRES) package aimed specifically towards deliberate fire setters between the ages of four and seventeen.

Targeted Environmental Visual Audits (EVAs) had been carried out to identify waste build up and refer to partners to remove.

Business Fire Safety Checks were being used in areas identified as having a greater risk to identify and educate premise owners in ways they could mitigate against arson.

Work was being carried out with prisons to identify trends and following on from that, preventative measures.

Members discussed the hazards associated with lithium-ion batteries and electronic smoking devices.

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

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

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

Deliberate Fires – Other, 614 in quarter 1; year to date 614; previous year to date 681. Quarterly activity decreased 9.84% over the same quarter of the previous year.

## **2.7 Home Fire Safety Checks**

This indicator reported the percentage of completed Home Fire Safety Checks (HFSC), excluding refusals, carried out where the risk score had been determined to be high.

An improvement was shown if:

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

HFSCs completed, 5,547 in quarter 1; year to date 5,547; previous year to date 5,025. Quarterly activity increased 10.4% over the same quarter of the previous year.

HFSCs with high-risk outcomes, Quarter 1, 54%; previous year Quarter 1, 58%.

Quarterly activity decreased 4.0% over the same quarter of the previous year.

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

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

ChildSafe,	123 sessions delivered to 3,333 attendees;
RoadSense,	141 sessions delivered to 4,090 attendees;
SENDSafe,	6 sessions delivered to 210 attendees;
Wasted Lives,	17 sessions delivered to 1,487 pupils;
Biker Down,	13 sessions delivered to 237 attendees;
FIRES,	53 completed referrals;
Partner Training,	15 organisations/agencies – 84 people.

Specific Education packages – delivered Water Safety, ASB, Deliberate Fire Setting etc (Covers key stages 2, 3 and 4), across 61 sessions, delivered to 6,933 attendees. 6 virtual Water Safety Education sessions delivered to 14,598 prior to Summer Break.

Arson Threat Referrals - 215.

## **2.9 Business Fire Safety Checks**

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

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

A +/-10% tolerance was applied to the completed BFSCs and the year to date (YTD) BFSCs, against both the quarterly and YTD targets. When both counts were outside of the 10% tolerance they would be deemed in exception which enabled local delivery to flex with the needs of their district plan over the quarters.

BFSCs completed, 820 in quarter 1; Cumulative 820; YTD target, 625; previous YTD 231.

Cumulative YTD BFSCs being satisfactory, 698. Top 5 completed satisfactory premise types (Shops 313, Offices 76, Factories/Warehouses 66, Schools 58, Other workplaces 58).

Cumulative YTD BFSCs being unsatisfactory, 122. Top 5 completed unsatisfactory premise types (Shops 60, Licensed premises 16, Schools 14, Other workplaces 11, Offices 5).

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

Since the initial BFSC training in 2022/23 that upskilled all Wholetime (WT) crews on built environment risk, crews had been directed to ensure they embedded the training and delivered as many BFSCs as possible to help gain confidence and competency in carrying out this service and using the newly developed digital products. This had ensured that the BFSC project was being embedded for crews and businesses and the project team were able to conduct effective evaluation to continually improve the delivery of this service.

Area Manager, Matt Hamer explained that the classification of commercial premises was carried out by the Local Authority, and many were unidentified which placed them under the category of 'other workplaces.' The Service's app would be refined to allow a change to a building classification and the Local Authority would be informed once a building type had been identified, allowing for more comprehensive data to be collated in the future.

### **2.9.1 Fire Safety Activity (including Business Fire Safety Checks)**

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

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

Total Fire Safety Enforcement Inspections, Quarter 1, 530;  
Formal Activity in Quarter 1, 7%, same quarter of the previous year 6%.  
Quarterly activity decreased 1% over the same quarter of the previous year.

Members noted the cumulative number of Business Fire Safety Check follow-up visits undertaken for 2023/24 was 530.

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

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

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

In Quarter 1, Building Regulation Consultations received 262, of which 239 were completed within timeframe (LFRS should make comments in writing within 15 working days of receiving a BRC).

Improvement Actions were noted as follows:

To comply with the NFCC Competency Framework for Fire Safety Regulators, consultations must be completed by Level 4 qualified Fire Safety Inspectors. It was the same inspectors who were required to complete the more complex audits required by the risk-based inspection program, consequently use of finite resources must be fully co-ordinated and balanced. To achieve this and ensure consultation timelines were achieved:

- Development work continued to qualify more of the existing staff to L4 standard and ensured the Service had competent staff to undertake future buildings regs, giving consideration to the retirement profile of competent staff.
- Invested in dedicated Schools building regulation (BRegs) training courses for staff to deliver the Service's schools BRegs.
- Improved BRegs administration and consultation monitoring with a more centralised system.
- Introduced a pan-Lancashire targeting approach, rather than area based.
- Assigned a Building Safety Regulator (BSR) single point of contact to ensure new Building Safety Act requirements were implemented and embedded.

## **KPI 3 - Responding to fire and other emergencies quickly**

### **3.1 Critical Fire Response – 1<sup>st</sup> Fire Engine Attendance**

This indicator reported the 'Time of Call' (TOC) and 'Time in Attendance' (TIA) of

the first fire engine arriving at the incident in less than the relevant response standard.

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

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

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

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

Critical Fire Response – 1<sup>st</sup> Fire Engine Attendance, Quarter 1, Very High 05:39 min; High 05:47 min, Medium 06:54 min, Low 09:18 min.

Q1 overall 07:38 min. Year to date overall 07:38 min. Previous year to date overall 06:57 min.

It was noted by Members that the response times for all critical fire response categories were less than the response standard.

### **3.2 Critical Special Service Response – 1<sup>st</sup> Fire Engine Attendance**

This indicator reported the 'Time of Call' (TOC) and 'Time in Attendance' (TIA) of the first fire engine arriving at the incident in less than the relevant response standard.

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

Critical Special Service Response – 1<sup>st</sup> Fire Engine Attendance, 08:26 min in quarter 1; year to date 08:26 min; previous year to date 08:17 min.

In response to a question from the Chair in relation to Special Appliance Attendance, the Assistant Chief Fire Officer explained that the nearest fire engine would still attend an incident along with specialist appliances but that this KPI specifically measured the time for the first fire engine to attend rather than any subsequent special appliance.

### **3.3 Total Fire Engine Availability**



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

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

Total Fire Engine Availability, 89.48% in quarter 1; year to date 89.48%; previous year to date 89.38%.

Quarterly availability increased 0.10% over the same quarter of the previous year.

The negative exception report was due to the 1<sup>st</sup> fire appliance availability percentage being below the lower control limit during quarter 1.

Overall availability across all stations for the quarter recorded 89.48%, just 0.52% below the 90% standard.

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

Wholetime – 99.29%

Day Crewing Plus – 99.25%

Flexi Day Crewing – 99.44%

On-Call – 76.78%

Total – 89.48%

Whilst all of the Whole-Time appliances achieved exceptional availability, the 1<sup>st</sup> appliance at the 12 wholly On-Call stations contributed to the availability falling below the 90% standard. As such, the exception report was focused on On-Call availability.

A shortage of staff with the Officer in Charge (OIC), Large Goods Vehicle (LGV) and Emergency Response Driver (ERD) skill was a significant contributing factor to low On-Call availability. On-Call Support Officers (OCSO) were working with station-based staff and management, along with Training Centre, to support those in development and identify opportunities for high-performing individuals to acquire those skills earlier in their career.

The Breathing Apparatus (BA) skill was another factor contributing to low On-Call availability, however, a rolling programme of BA initial training combined with BA Team Leader courses was ensuring demand for those skills was met.

A new inter-service transfer policy would assist with On-Call recruitment, simplifying the process for transferees to join LFRS.

Actions being taken to improve performance:

- The Service would continue to deliver a recruitment strategy, which incorporated targeted recruitment. The latest recruitment window closed on 2<sup>nd</sup> July. 157 applicants had passed the application stage and were completing their Saville and Holdsworth (SHL) tests or had been booked on to the fitness tests.
- Increase visibility of On-Call units in the community. This could inform off

station training, or community engagement events.

- Broadening the skills of On-Call staff (as per the Emergency Cover Review) in addition to exploring new opportunities or ways of working for On-Call or Dual Contract staff would further improve On-Call availability.

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

### **4.1 Progress Against Allocated Budget**

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

The annual budget for 2023/24 was set at £68.5 million. Spend at the end of June was £17m, £0.3m less than budget. The majority of the underspend was linked to pay due to vacancies in quarter 1.

Quarter 1 variance -0.44%.

### **4.2 Partnership Collaboration**

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

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

- **Improved Outcomes** – The collaboration maintains or improves the service we provide to local people and local communities;
- **Reduce Demand** – The collaboration should contribute towards our longer-term strategic objective of decreasing risk in communities and reducing demand on services;
- **Better Value for Money** – The collaboration produces quantifiable efficiencies either on implementation or in the longer term;
- **Reduced inequalities within our communities** – The collaboration contributes towards reducing inequalities wherever possible.

This indicator provided Members with an update on partnership collaboration during the period.

#### **Update**

At the 4<sup>th</sup> May 2023 meeting of the Blue Light Collaboration board, an update on the ongoing projects was presented to the strategic leads. An agreement was also made in terms on ensuring that a suitable evaluation process was implemented for each project. This would provide evidence in terms of outputs and outcomes, additionally, it would enable learning to be identified.

#### **Missing Persons (MisPer)**

It had been identified that LFRS mobilisations had reduced. Therefore, the main project objective was to improve the existing collaborative approach to identification

of the location of missing persons. Learning had been identified from the original process and improvements had been made. LFRS was reviewing the mobilisation of specialist assets and the memorandum of understanding would be updated.

In terms of practical items, the Missing from Home Manager training for specific LFRS staff was being planned. This training would develop knowledge and understanding regarding aspects of planning and undertaking a search.

Furthermore, Lancashire Constabulary had provided training to Control staff to raise awareness. There had already been an increase in the number of LFRS mobilisations.

LFRS had actively supported a number of high-profile cases for missing persons, demonstrating the effectiveness of the collaborative workstream.

### **Estates and Co-location**

This project was a longer-term work stream with interdependencies, as there were several internal projects within Lancashire Constabulary to review current building stock. This included Lancashire Constabulary headquarters, and various police stations. Property Leads from all three agencies had been in regular contact and the most recent meeting was on the 22<sup>nd</sup> June 2023 and bi-monthly meetings were now scheduled. LFRS were also working with LanCon to renew existing collaborative arrangements at both Lytham and St Annes Fire Stations.

### **Community First Responder**

A phased approach had been agreed in terms of volunteers signing up to the scheme. Phase 1 was being rolled out to non-operational LFRS staff, such as Community Fire Safety. Subsequently, phase 2 would consider the roll out to Flexi Duty Officers (FDOs) and On-Call staff.

Progress on phase 1 had resulted in the successful onboarding of one non-operational member of LFRS who was responding to category 1 incidents and had already provided lifesaving care whilst responding. A further 4 members of staff had successfully been on-boarded and would receive the relevant training through quarter 2 of the current year.

In terms of technology, the NWAS application that was used to mobilise First Responders had been updated, which had significantly improved effectiveness. Staff using the system had an option to accept or decline the request forwarded to them which offered some flexibility.

Further discussion would take place with Lancashire Constabulary to review if there were any suitable non-operational roles that could be added as First Responders. It was noted that operational staff, including Armed Response units did attend cardiac arrests alongside NWAS and that collaboration to this effect was already taking place.

### **Leadership Development**

Initial scoping had been completed, in terms of what each organisation currently delivered for leadership development. The project was being delivered in two phases. Phase 1 covered some short-term objectives, seeking to maximise existing

courses and events, and provide opportunities for staff from all three organisations to utilise places on these courses. Staff from Lancashire Constabulary's organisational development team attended LFRS values and behaviours module that new firefighter apprentices completed, to observe the content and how it was delivered.

LFRS had also identified 3 middle managers to participate in the 'Inside Out' leadership programme, which was offered by LanCon. It was anticipated that the benefit would be improved efficiency, through utilisation of unfilled places. Additionally, it would provide a platform for discussing ideas and sharing learning, as many of the leadership challenges were cross cutting in all three organisations. It also provided opportunity to strengthen relationships across the blue light sector and build upon raising awareness of capabilities which led to more effective and efficient collaborative working.

Phase 2 would scope opportunities to collaborate on specific elements of supervisory and middle manager leadership programmes. This would lead to some efficiencies, as well as a platform to share ideas.

### **Command Units**

The aim of this project was to establish and deliver additional collaborative uses of the command units in LFRS to support effective multi agency working amongst emergency responders. The key objectives were to improve operational effectiveness and in line with the LFRS mission; 'Making Lancashire Safer.'

LFRS were currently rolling out a small command unit and had two further large command units in build as part of a previously agreed capital vehicle replacement project. It was anticipated the two larger units would be in Service by October 2023. It was expected that the initial benefits to be realised would be technological advances that would further develop information sharing and situational awareness aligned to improving and embedding the Joint Emergency Services Interoperability Principles (JESIP). Further scoping and development would be overseen by the Blue Light Collaboration board to ensure opportunities for joint working were effectively co-ordinated and delivered.

### **4.3 Overall User Satisfaction**

People surveyed included those who had experienced an accidental dwelling fire, a commercial fire, or a special service incident that the Service attended. The standard was achieved if the percentage of satisfied responses was greater than the standard.

Annual Standard: 97.50%

In quarter 1, 74 people had been surveyed and the number satisfied with the service was 73. The running number of people surveyed for the year was 3,340 with 3,299 of those people being satisfied with the Service; 98.77% against a standard of 97.50%; a variance of 1.31%.

Members gave thanks for an excellent report and the work of the Service.

	<p>The Chair thanked the Assistant Fire Officer for his comprehensive report and congratulated the Service on keeping Lancashire safe.</p> <p><b>Resolved:</b> - That the Performance Committee noted and endorsed the Quarter 1 Measuring Progress report, including one positive and four negative exceptions.</p>
13/23	<b>Date of Next Meeting</b>
	<p>The next meeting of the Committee would be held on <b>13 December 2023</b> at 10:00 hours in the Main Conference Room at Lancashire Fire and Rescue Service Headquarters, Fulwood.</p> <p>Further meeting dates were noted for 6 March 2024 and 26 June 2024 and agreed for 4 September 2024.</p>

**M Nolan**  
**Clerk to CFA**

**LFRS HQ**  
**Fulwood**