West Sussex Fire and Rescue Service Performance Report Quarter 4 2023/24

Deputy Chief Fire Officer

Mark Andrews

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Strategic Performance Board Quarterly Report Quarter 4 2023-2024

The aim of the Quarterly Performance Report is to summarise how West Sussex Fire & Rescue Service/Directorate has performed over the previous four months and to capture how performance contributes cumulatively to the year-end performance outcomes.

The report retrospectively presents information from the Performance and Assurance Framework (PAF) including the core measures and targets for the year which are current at the time of publishing. The report contains performance across the four elements of the PAF, namely Service Provision, Corporate health and where appropriate, Priority Programmes and Risk.

The explanations, mitigations and actions contained within this report are those endorsed by the Service Executive Board (SEB).

This report covers data from the period of 1st January 2024 – 31st March 2024

Cabinet Member Summary



This quarter I was extremely pleased to see the Targeted Education team presented with a recognition award from the High Sheriff of West Sussex, on behalf of The Crown, for the organisation of fire and road safety initiatives for young people. The award formally recognises those in our Fire Service who are working hard behind the scenes to protect and support our communities.

Staff welfare is of the highest priority to the service and the new Fire and Rescue Welfare Unit was put on the run in February. This unit has been specifically designed to provide enhanced support and facilities for our staff during operational incidents. This will ensure that our staff have access to essential comforts whilst attending protracted operational incidents.

The service continues to show good performance against it's performance indictors as detailed in this report. This demonstrates that the recommendations applied by the service are having a real and sustained effect.

Chief Fire Officer Summary



As a Fire and Rescue Service, we are working hard to ensure that the work we undertake for our communities and those who work within the Service uphold the highest of professional and personal standards. Significant work commenced in quarter 4 to undertake Disclosure & Barring Service (DBS) checks for existing employees based on role in line with National Fire Chiefs Council and DBS guidance. This followed the amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 ("Exceptions Order") which now includes fire and rescue service employees.

One of our key objectives is to deliver a new strategy for Fireground Contaminants. Part of our community risk management plan this work which was launched in February means that every fire station is equipped to better deal with firefighter decontamination alongside the launch of a new 7-step decontamination procedure to use at an incident.

Performance conversations took place throughout quarter 4 to ensure that all fire and rescue staff have a meaningful opportunity to reflect on last year's performance and plan for their contribution to the team and service plans for next year. The process has been supported by the latest round of leadership workshops which aligned to cover Effective Performance & Development Conversations.

Quarter 4 also saw the commencement of our much-anticipated Service Delivery Assurance Visits. These visits are designed to provide an objective overview when looking at professional workplace standards to ensure they are being maintained across our fire stations. The aim of the visits is to identify positive areas of best practices, as well as things that could be improved for our staff and customers.

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Performance Summary

At the end of Quarter 3 2023-24 the following performance against 30 core measures was recorded:

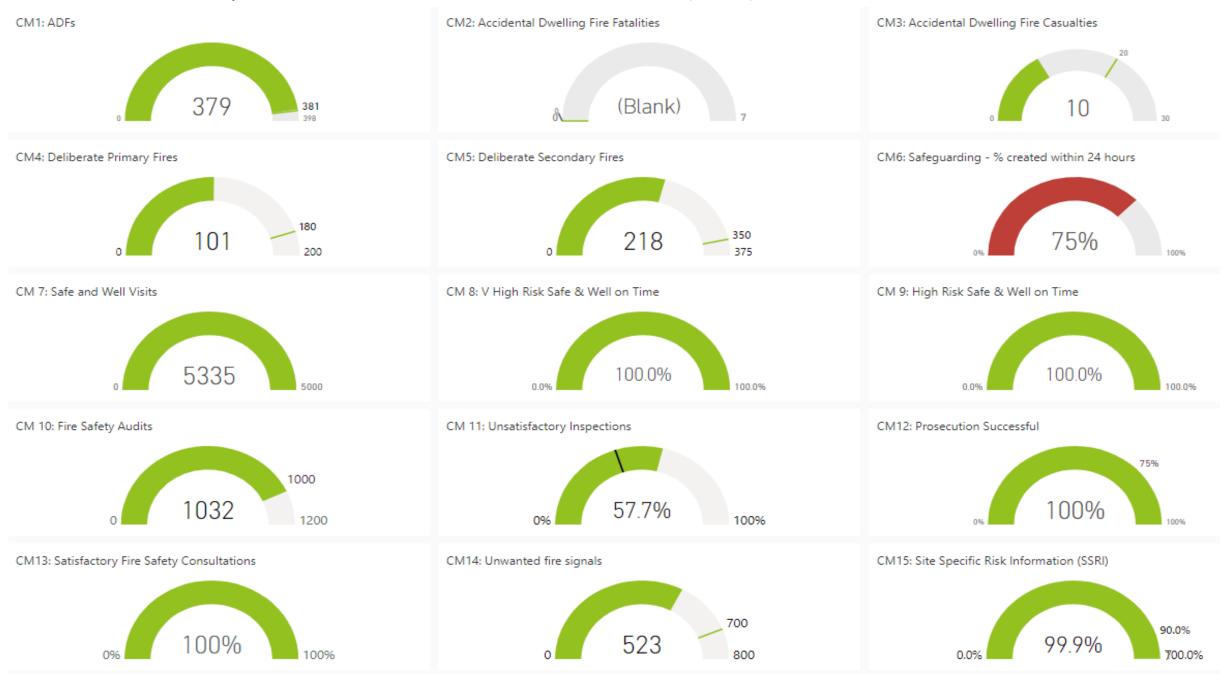
26 had a GREEN status, 2 were AMBER and 2 were RED.

Of the 4 comparable measures that were RED or AMBER last quarter, 3 measures showed an improvement and 1 a decline.

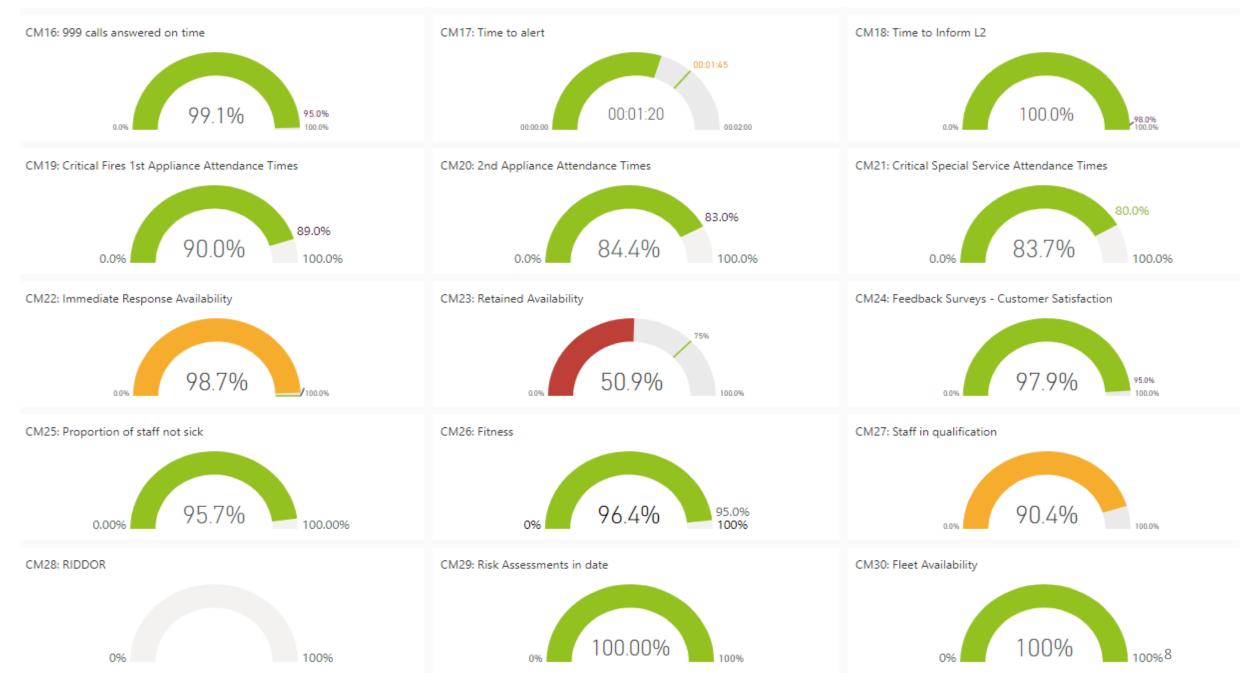
Of the 17 comparable measures that were GREEN last quarter, 4 measures showed a decline and 5 an improvement.

There were no changes in RAG status compared to the previous quarter.

Performance Summary for all core measures at the end of Quarter 4 (1 of 2)



Performance Summary for all core measures at the end of Quarter 4 (2 of 2)



Areas of Significant Improvement and Success

Quarter 4
(1st January – 31st March 2024)

Significant Improvement and Success

The Performance and Assurance Framework of which this report is a part of, has continued to demonstrate fire and rescue service performance and provide assurance to members and the public.

Quarter 4 saw sustained good performance in many areas, with the following measures showing particular success:

- CM1 Accidental Dwelling Fires in West Sussex
- CM3 Accidental Dwelling Fire casualties in West Sussex
- CM7 Number of safe and well visits delivered to those households containing at least 1 person with at least 1 vulnerability or risk factor
- CM10 Number of Fire Safety Order regulated buildings having received an audit
- CM19 Critical fires first appliance attendance times
- CM21 Critical special services first appliance attendance times
- CM25 The proportion of staff not sick across all staff groups

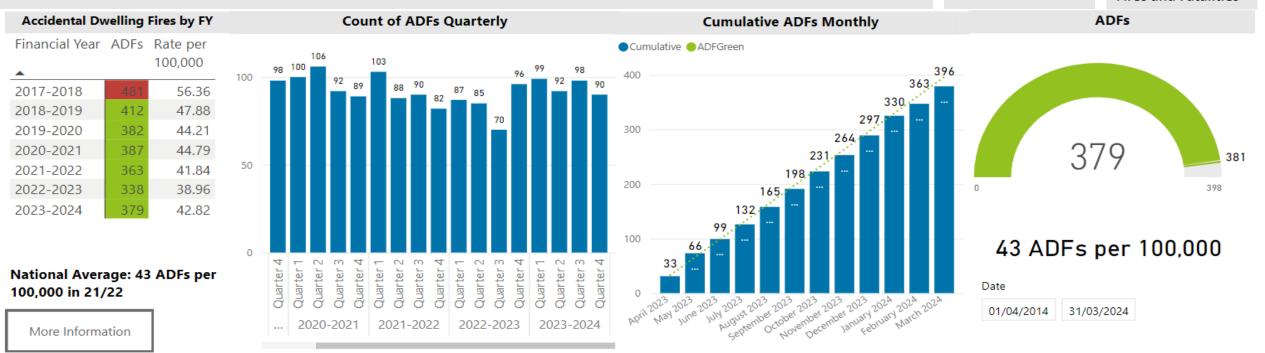
Core Measure 1: Accidental Dwelling Fires in West Sussex

379 fires at the end of Q4 2023-24 Year End Forecast GREEN

Total number of accidental dwelling fires in West Sussex over a year period starting from April

Annual Target: <381Green 381-398 Amber >398 Red

Service Owner:
Nathan Cross
Area:
Fires and Fatalities



Commentary

The number of Accidental Dwelling Fires (ADFs) at the end of Quarter 4 is higher than the previous two years and has returned to pre-Covid figures. The total number of ADFs is aligned to the national average, which has seen a similar increase. The main causes of accidental dwelling fires in Quarter 4 remains unsafe cooking (25% of total). This continues to be a key element of our Safe and Well Visits and forms part of our ongoing fire safety campaigns.

Actions

Treat: We will continue to deliver annual campaigns that are directed at the main causes of accidental fires in people's homes to raise awareness of the causes and provide preventative advice, specifically on cooking related fires. This activity will take place at a targeted local level through the delivery of the station's Local Risk Management Plan supported by the Prevention Team with the aim of driving this figure down further.

Core Measure 3: Accidental Dwelling Fire casualties in West Sussex

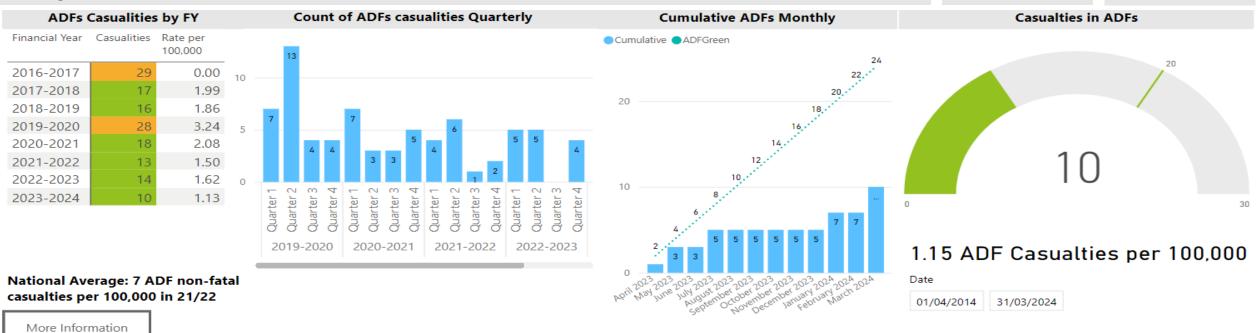
The total number of casualties resulting from an accidental dwelling fire in West Sussex over a

year period starting in April. This is limited to a person whose injury is fire related and was severe

10 casualties at the end of Q4 2023-24

Year
End Forecast
GREEN

Annual Target: <20 Green 20-30 Amber >30 Red Service Owner:
Nathan Cross
Area:
Fires and Fatalities



Commentary

enough to require hospital attendance.

There have been 5 Accidental Dwelling Fire (ADF) casualties recorded in Quarter 4. The total number of ADF casualties for the year is 10. This is a total of 1.26 casualties per 100,000 of population and is far below the national average of 7 per 100,000. Of the 5 casualties this quarter, 1 suffered breathing difficulties, 2 were overcome by gas, smoke or toxic fumes and, 2 suffered from slight burns. Every accidental dwelling fire which results in a casualty is fully investigated as part of our Serious Fire Review. The learning identified from these reviews is then shared back within the organisation and with our multi-agency partners to prevent future incidences from occurring.

Actions

Tolerate and monitor: We attribute these relatively low figures to our extensive fire safety campaigns and partnership work. We will carry on monitoring and identifying trends to ensure we deliver appropriate fire safety messages through our Comms Team and local community safety initiatives.

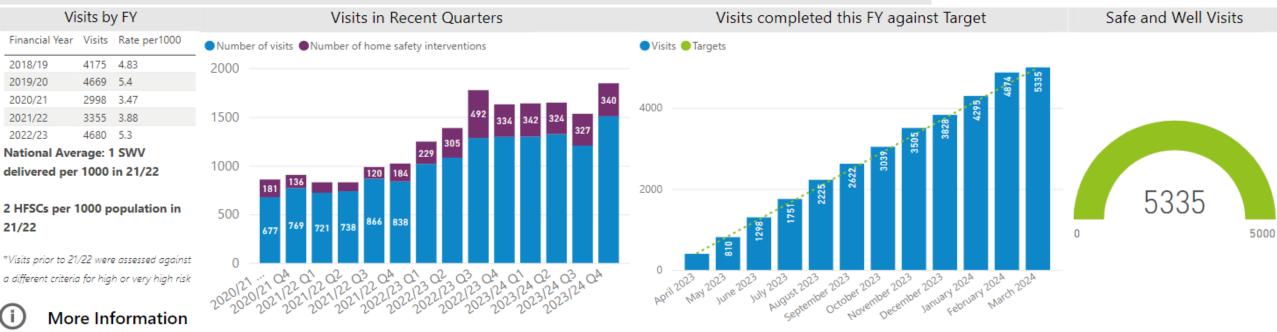
Core Measure 7: Number of safe and well visits (SWVs) delivered to those households containing at least 1 person with at least 1 vulnerability or risk factor.

5335 delivered by end of Q4 2023-24 Year End Forecast GREEN

Number of SWVs delivered to those who are at risk of dying or being injured in the event of a dwelling fire over a year period starting from April. This includes very high, high and medium risk individuals and those low risk individuals with a vulnerability or a fire risk. Home safety interventions are shown here for information and include all low risk safe and well visits where there are no vulnerabilities and instances where we have supplied/fitted equipment.

Annual Target: >=5000 Green 4800-4999 Amber <4800 Red

Service Owner:
Nathan Cross
Area:
Prevention



Commentary

In Quarter 4 we completed 1,507 Safe and Well Visits (SWVs) and 340 home safety interventions. This is the highest total completed in a quarter by the service. In total 5,335 Safe and Well Visits and 1,333 home safety interventions were completed in the year 2023/24, which exceeds the target and demonstrates a service wide commitment to supporting the most vulnerable in our communities. Service Delivery have completed 2580 Safe and Wells this year, a 180% increase on the 1431 completed by Service Delivery in 2022/23.

Actions

Tolerate and monitor: We continue to support referrals and requests for Safe and Well Visits through our partnerships and through local initiatives promoting them. We use data to target those who are most at risk of being injured or dying in a fire.

Core Measure 10: Percentage of FSO regulated buildings having received an audit

1032 completed by end of Q4 2023-24

Year End Forecast GREEN

There are approximately 35,000 Fire Safety Order regulated buildings in West Sussex. This measure examines the total number of audits of these buildings undertaken in a year starting in April, under the Risk Based Inspection Programme (RBIP). The RBIP is a combination of the activities on specific risk premises, thematic risks and IRMP work and at the core of the RBIP is a regular inspection program for known sleeping risks.

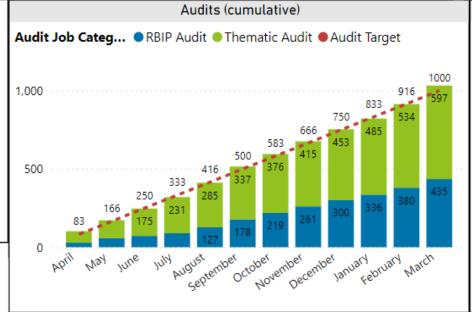
Annual Target: 1000 Green 850-999 Amber >850 Red Service Owner:

Dave Bray

Area:

Protection

Financial Year	Audits	Fire Safety Checks	Audits per 100 premises
· 2020/21	132		0.0
□ 2021/22	801	182	0.0
□ 2022/23	1005	524	2.9
¹¹ 2023/24	1032	769	2.9





National Average: 2 Audits per 100 premises in 21/22

More Information

Last Refresh Date 03/05/2024

Commentary

To exceed the target for Fire Safety Audits during 2023/24 is an incredible achievement considering the levels of development undertaken to address new regulation and competence across the department. What is also important to note over the course of the year, is that as our Regulators have progressed through their development training and increased their level of competency, we have seen a clear increase in the number of higher-risk audits that have been completed in line with our Risk Based Inspection Programme. By year end 42% of our fire safety audit activity had been undertaken in RBIP premises. At the start of the year this sat around 30%.

Actions

Tolerate: As of Quarter 4 we have filled all existing vacancies in the department, and we are making effective use of the Protection Uplift Grant from central Government to temporarily employ new individuals to train and develop as part of succession planning for anticipated vacancies. As our staff attain their fully qualified status this will reduce the training burden, making it possible to spend more time undertaking fire safety audit activities.

Core Measure 19: Critical Fires – First Appliance Attendance

90.0% for Q4 2023-24

Year End Forecast GREEN

West Sussex FRS categorises risk into four types being Very High, High, Medium and Low. It has also set a different attendance time target against each risk type. This measure examines the number of occasions where the first fire engine arrives at an emergency incident within the target number of minutes from the time the emergency call was answered.

Target: 8 min to a very high risk,

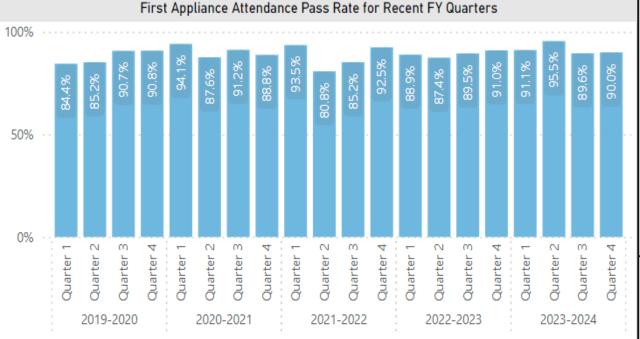
10 to a high, 12 to a medium and 14 to a low. 89% Target for Green Service Owner:

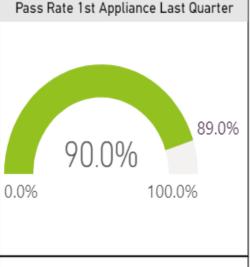
Gary Ball

Area:

Service Delivery

Financial Year	Very High	High	Medium	Low	Total
2015-2016	100.00%	86.27%	86.39%	90.11%	88.10%
2016-2017	75.00%	87.88%	84.84%	90.08%	87.08%
2017-2018	0.00%	100.00%	89.19%	89.49%	90.09%
2018-2019	0.00%	93.10%	89.96%	86.82%	88.67%
2019-2020	0.00%	100.00%	88.05%	85.84%	87.55%
2020-2021	0.00%	92.31%	87.32%	93.19%	90.46%
2021-2022	0.00%	100.00%	87.56%	88.24%	88.07%
2022-2023	0.00%	100.00%	88.24%	89.70%	89.18%
2023-2024	0.00%	100.00%	91.04%	91.73%	91.44%
Total	78.57%	92.44%	87.95%	89.51%	88.90%





89.18%

% First Attendance Time Pass

①

Table of Incidents (i)

1

Map & Station Group

Actions

Tolerate: We will continue to monitor and review the performance data locally at our stations through our Local Risk Management Plans via our Service Delivery Governance meetings, seeking continuous improvements.

Commentary

For the sixth consecutive quarter, our performance continues to be consistently strong, exceeding our targets. Our fire stations, including our new Day Crewed Seven stations, swiftly respond to community incidents, showcasing our unwavering commitment to professional service delivery standards. Our dedicated crews actively engage in fire safety initiatives, allocating more time to being in high-risk community areas, thereby enhancing our rapid response capability. These efforts are meticulously documented in our Local Risk Management Plans, and our joint fire control efficiently allocates resources using the dynamic cover tool to support meeting our response standards.

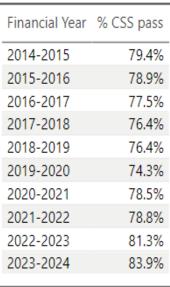
Core Measure 21: Critical Special Services – 1st Appliance Attendance

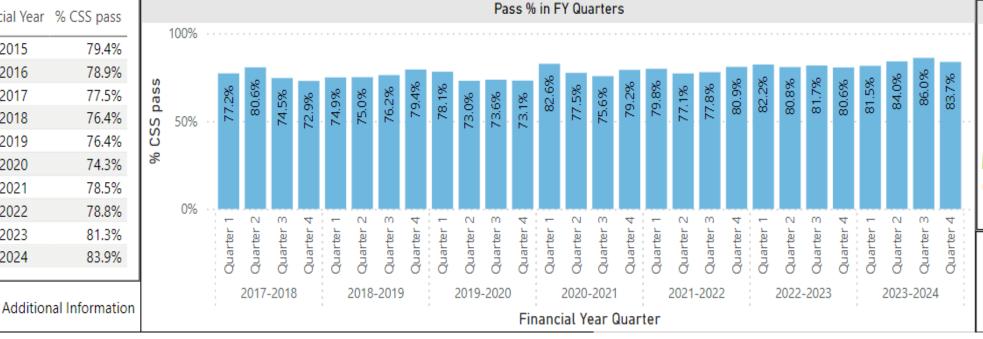
83.7% in Q4 2023-24 **Year End Forecast GREEN**

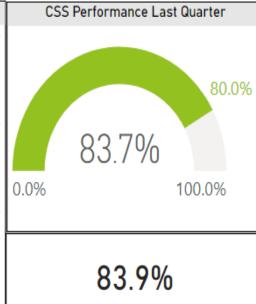
A critical Special Service Incident is a serious incident that does not involve a fire, for example a RTC, an emergency involving a hazardous substance or if someone is trapped. Some areas of the county are more at risk of fires than others, however Special Service incidents can happen anywhere, especially with our extensive road network. For this reason we have a single response time standard of less than 13 minutes for all critical special services incident within 13 minutes of the time the emergency call was answered.

First Fire Appliance is in attendance at critical special service within 13 minutes Target: 80% Green <80% Red

Service Owner: **Gary Ball** Area: **Service Delivery**







Financial Year Performance

Commentary

For the sixth consecutive quarter, our performance remains robust. The seamless integration of the Dynamic Cover Tool into our operational procedures ensures that detailed response time data is readily available to control room operators at district and local levels. This integration plays a critical role in efficiently mobilising fire engines to emergency calls.

Actions

Tolerate: We continue to work with partner agencies to help improve the time taken to transfer calls and information, enabling control staff to mobilise quicker. We are also working hard, maximising the availability of retained fire engines at times of the day when we know these incidents are most likely to occur, using our Crewing Optimisation Group and Retained Liaison Officers.

Core Measure 25: The proportion of staff not sick across all staff groups

95.8% at the end of Q4 2023-24

Year End Forecast Green

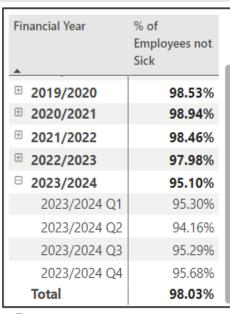
This measure examines the average percentage of staff who are not sick. All FRS employees are included in this measure, including support staff. Staff that are sick benefit from being managed in line with the Sickness Absence policy, ensuring the appropriate wellbeing and support is in place and medical advice is obtained as necessary.

Annual Target: >95% Green 90%-95% Amber <90% Red Service Owner:

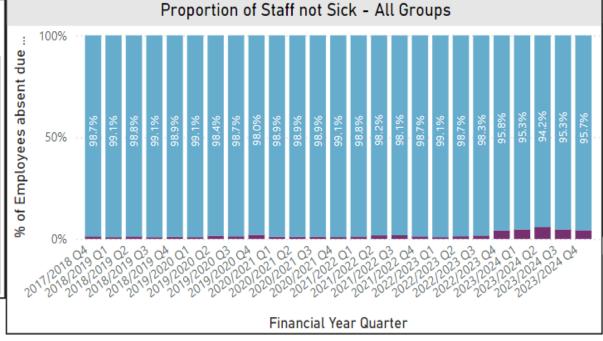
Catherine Walker

Area:

DOT



Additional information





Commentary

Sickness absence levels have continued to reduce month by month meaning we remain on target for attendance. Figures for this quarter are in line with the trends and figures of Q4 in 2023. Musculo-skeletal followed by mental ill-health are the main reasons for absence for the quarter.

Managers and HR continue to support colleagues with strong levels of communication and pastoral support when they are unwell, and we continue to build a culture whereby staff engage with the absence management processes to return to work in a safe and timely manner.

Actions

Treat: Continued emphasis on 'Return to work' interviews is in place by HR team, and an improvement in signposting to this process in the 'booking sick' form has been implemented, alongside the 'return to work' reminder in Firewatch.

All sickness absence cases continue to be reviewed monthly by managers and HR to ensure these are being progressed in a timely manner and staff are able to return to work safely and with the appropriate support/adjustments.

Selected Measures (Red and Amber Status)

Quarter 4
(1st January–31st March 2024)

Selected Measures (Red and Amber Status)

The following red and amber measures have been selected for examination by the Scrutiny Committee:

- CM6: Safeguarding
- CM22: Immediate Response crewing availability
- CM23: Retained Duty System crewing availability
- CM27: Eligible Operational Staff in Qualification

Core Measure 6: Safeguarding referrals made to Social Care colleagues in West Sussex County Council within 24 hours of discovery

75% at the end of Q4 2023-24 Year End Forecast RED

Annual Target: 100% Green 98% - 99.9% Amber

Service Owner: Nathan Cross

Safeguarding referrals made to Social Care colleagues in West Sussex County Council within 24 hours of discovery over a year period starting from April.

To ensure that safeguarding referrals are made in a timely manner for the protection of individuals considered at risk in West Sussex.

This is the time taken from the Duty Officer or Safeguarding Coordinator being made aware of a safeguarding case, to the referral being made to the local authority.



Commentary

A total of 8 safeguarding referrals were made in Quarter 4, of which 6 were within the 24 hour target. Of the two that were not referred within 24 hours, further guidance has been provided to those involved. The percentage completed within 24 hours has improved in comparison to Quarter 3 but it is evident that more work is needed in this area to ensure a 100% accuracy rate.

A total of 50 safeguarding referrals were made in 2023/24 and this is a similar total to previous years. However, the accuracy rate of 84% is lower than in previous years.

Actions

Treat: Safeguarding is now a dedicated agenda point within monthly Service Delivery Governance meetings to ensure that it remains prominent to all operational staff. The Prevention Service Plan 2024/25 has committed to providing safeguard training to all Flexi Duty Officers to ensure that when a concern is identified it is reported accurately and in a timely manner. Safeguarding will be continuously monitored to identify trends and opportunities for improving understanding of the process.

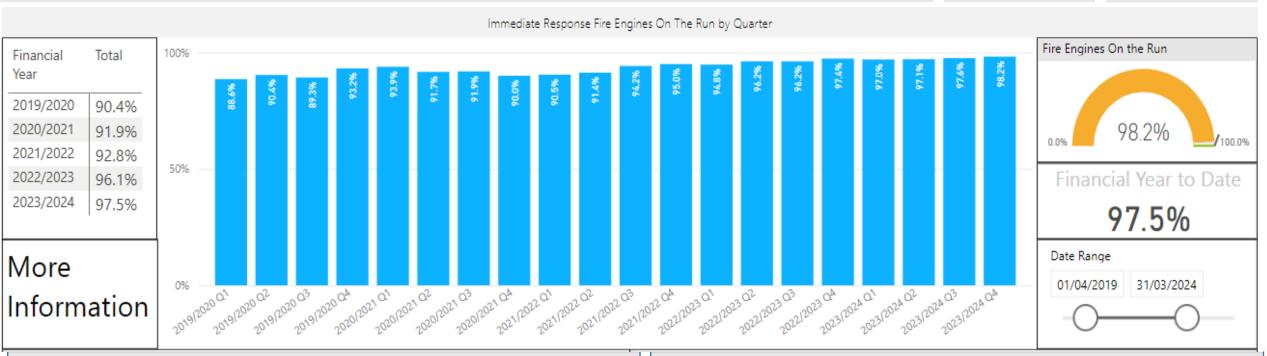
Core Measure 22: Full shifts where there is adequate crewing on all immediate response frontline fire engines

98.2% at the end of Q4 2023-24

Year End Forecast AMBER

An immediate response frontline fire engine is available 24/7, 365 days a year. Four qualified people are required on a frontline fire engine to ensure safety. This measure examines the percentage of shifts (day or night) where there are sufficient minimum qualified fire fighters (4 personnel) on all immediate response fire engines.

Target: 100% Green 95% - <100% Amber <95% Red Service Owner: **Gary Ball** Area: **Service Delivery**



Commentary

This quarter has seen a notable rise in performance, reflecting our ongoing dedication to upholding precise availability records on our Firewatch systems to prevent any inaccuracies in displaying fire engine availability. We have implemented protocols to swiftly identify and document instances of crewing shortages resulting in unavailable fire engines.

Actions

Treat: We continue our efforts to reduce human errors in data input by conducting IT masterclass training sessions and communicating through our Service Delivery Governance meetings via our data analysts. Furthermore, we consistently improve and resolve interface issues between Firewatch and vision systems, ensuring the precise representation of available fire engines and resources on our dynamic cover tool system.

Core Measure 23: Adequate crewing on all retained frontline fire engines (based on 24/7 crewing)

hours where there are sufficient minimum qualified fire fighters (4 personnel) on retained fire engines.

50.9% at the end of Q4 2023-24

75% - 100% Green

65% - 74% Amber

Target:

<65% Red

Year End Forecast RED

Retained frontline fire engines are crewed mainly by on-call fire fighters who are based at stations in more rural locations and, when they receive the call via their pagers, leave their place of work or home and attend emergencies from the local retained station. Four qualified people are required on a frontline fire engine to ensure safety. This measure examines the percentage of Service Owner: **Gary Ball** Area: **Service Delivery**

Financial Year to Date

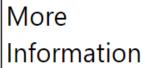
47.4%

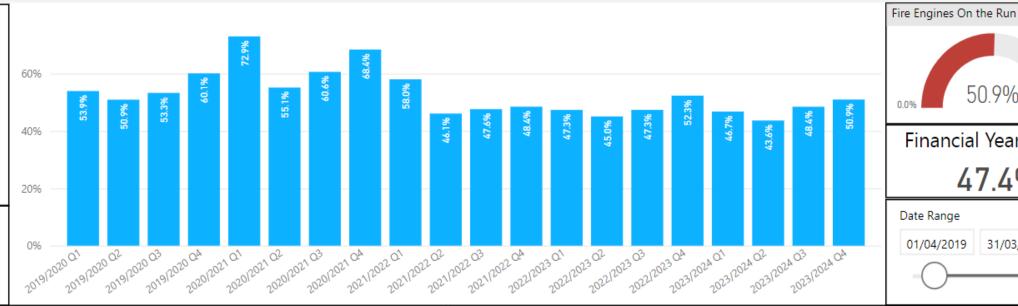
31/03/2024

Date Range

Retained Fire Engines On The Run by Quarter (including current quarter to date)









In Q4, the availability of Retained Duty System (RDS) appliances has improved once more to 50.8%, reflecting a 2.4% increase compared to the previous quarter, despite a 10% reduction in RDS staff numbers from 2023 to 2024. However, the year began with a full complement of Retained Liaison Officers and further proactive initiatives are now in progress to address establishment shortfalls and enhance the efficiency of crewing arrangements, optimising available resources at these stations.

Actions

Treat: The RDS model has become nationally less sustainable with a reduction of approximately 25% of RDS firefighters being observed over the last decade. In this quarter we have formally launched our CRMP commitment to work with staff to develop and implement an operational response model to maximise retained availability in strategic geographical areas aligned to community risk and maintaining our response standards.

Core Measure 27: Eligible operational staff in qualification

90.8% at the end of Q4 2023-24

Year End Forecast AMBER

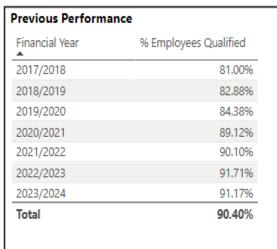
This measure examines the average percentage of operational staff (Station Managers, Watch Managers, Crew Managers and Firefighters) who have current qualifications in the use of breathing apparatus, emergency response driving and incident command (outlined in the 8 core areas of the Fire Professional Framework) as required by their role. This measure includes Retained firefighters who are in training, but who have not yet completed their Breathing Apparatus qualification. TRU staff and staff who are long term sick, on secondment, maternity leave, compassionate leave, unpaid leave or alternative duties are excluded from this measure.

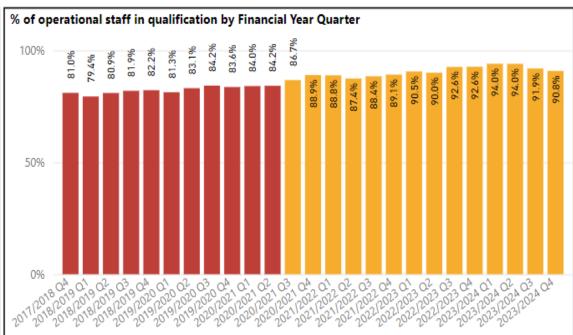
Annual Target: >95% Green 85% - 95% Amber <85% Red Service Owner:

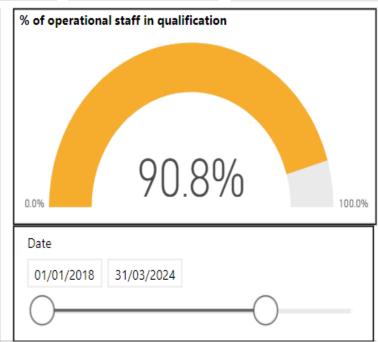
Catherine Walker

Area:

DOT







Commentary

Work and support continues with station management teams to improve this core measure performance. Performance for the qualifications managed by central training team for this period were as follows: Breathing Apparatus at 98%, Incident Command L1 at 94%, Emergency Response Driving at 99%.

This highlights the excellent work going on centrally within the new maintenance of competence framework. These figures also include the retained firefighters who are in training and have not yet undertaken their breathing apparatus training which accounts for 4% of this measure'

Actions

Treat: Service Delivery continue to embed the monthly training plan and systems master classes designed to upskill our managers to help improve accuracy of recording. Better system reporting also allows us to target areas where specific performance improvements are needed and action plans are in place to record this. Further developments continue to be made to improve the data and information held on our systems to ensure the monitoring of performance and the overall compliance with maintenance of competence continues to increase