



**Wednesday,
27 February 2019
10.00 am**

**Meeting of
Performance and
Overview Committee
Sadler Road
Winsford**

Contact Officer:
Donna Linton
Democratic Services

Cheshire Fire and Rescue Service, Sadler Road, Winsford, Cheshire, CW7 2FQ

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Cheshire Fire Authority

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MEETING OF THE PERFORMANCE AND OVERVIEW COMMITTEE WEDNESDAY, 27 FEBRUARY 2019

Time: 10.00 am

Lecture Theatre - Sadler Road, Cheshire

AGENDA

PART 1 - BUSINESS TO BE DISCUSSED

1 PROCEDURAL MATTERS

1A Record of Meeting

Members are reminded that this meeting will be audio-recorded.

1B Apologies for Absence

1C Declaration of Members' Interests

Members are reminded that the Members' Code of Conduct requires the disclosure of Statutory Disclosable Pecuniary Interests, Non-Statutory Disclosable Pecuniary Interests and Disclosable Non-Pecuniary Interests.

1D Minutes of the Performance and Overview Committee

(Pages 1 - 6)

To confirm as a correct record the Minutes of the meeting of the Performance and Overview Committee held on 28 November 2018. (attached as Annex 1)

ITEMS REQUIRING DISCUSSION/DECISION

2 Finance Report - Quarter 3, 2018-19

(Pages 7 - 16)

3 Programme Report - Quarter 3, 2018-19

(Pages 17 - 34)

4 Performance Report - Quarter 3, 2018-19

(Pages 35 - 72)

5 Internal Audit Plan 2018-19 - Quarter 3 Progress Report

(Pages 73 - 88)

6 Equality and Inclusion Update

(Pages 89 - 94)

7 Bonfire Report 2018

(Pages 95 - 114)

8 HMICFRS Inspection 2018 - Action Plan

(Pages 115 - 122)

9 Forward Work Programme

(Pages 123 - 124)

The table includes those items that have been identified/agreed to-date. Members are asked to agree any additional items at the end of the meeting which need to be added to the programme.



**MINUTES OF THE MEETING OF THE PERFORMANCE AND OVERVIEW COMMITTEE
held on Wednesday, 28 November 2018 at Lecture Theatre - Sadler Road, Cheshire at
10.00 am**

PRESENT: Councillors P Harris (chair), M Biggin, G Hayes, K Mundry, M Simon,
T Sherlock and independent member (non-elected) D Barnett

Also present: Councillor S Nelson (attended to observe).

1 PROCEDURAL MATTERS

A Record of Meeting

Members were reminded that the meeting would be audio-recorded.

B Apologies for Absence

There were no apologies for absence received.

C Declaration of Members' Interests

There were no declarations of Members' interests.

D Minutes of the Performance and Overview Committee

RESOLVED:

**That the minutes of the Performance and Overview Committee held on 5
September 2018 be confirmed as a correct record.**

2 FINANCE REPORT - QUARTER 2, 2018-19

The Treasurer introduced the report, which provided a summary of the Service's mid-year revenue position, reserves position and the status of projects in the capital programme.

He informed Members that the Quarter 2 review was reporting a forecast underspend of £1.5m in relation to the revenue budget. He confirmed that the majority of the underspend was due to uncertainties around price inflation and the firefighters national pay award.

The Treasurer drew Members attention to the reserves position set out in Appendix 2 to the report. He explained that as part of the Authority's Reserves Strategy, reserves would be used to fund most of the Authority's ambitious capital programme which totalled £39m over the next 5 years.

RESOLVED: That

[1] **Members notes the forecast outturn position; and**

[2] **Member approve the movement in reserves as set out in Appendix 2.**

3 PROGRAMME REPORT - QUARTER 2, 2018-19

The Director of Governance and Commissioning introduced the report, which provided an update on the Service's 2018-19 Integrated Risk Management Plan programmes and projects. He referred Members to Appendix 1 to the report, which contained the Health Report for the second quarter of 2018-19.

He drew Members attention to the Blue Light Collaboration Programme update, which had an amber progress status. He explained that the programme was due to complete in October 2018 but due to difficulties delivering the Multi Force Shared Service (MFSS) element of the programme, it had been provisionally rescheduled to conclude on the 1st April 2019.

The Director of Governance and Commissioning highlighted some of the issues that had been concluded during the quarter. There had been some changes to the original relocation plan with Fire Authority meetings expected to take place at Clemonds Hey. Due to access issues, significant costs and parking problems a decision had been made to cease any activity to create the necessary meeting rooms. Key Members had been consulted and it had been agreed that future Fire Authority meetings would continue to take place at the Service's Sadler Road site. He confirmed that a more detailed update including the overall savings associated with the programme would be provided to Members in the near future.

A Member queried the risk management arrangements in place for the risks associated with the Blue Light Collaboration programme. The Director of Governance and Commissioning advised that strategic risks were managed at Risk Management Board where mitigating actions are considered. He informed Members that it was his intention to report to Members about the MFSS in due course when the risks would be considered.

The Director of Governance and Commissioning provided Members with an update on the Replacement of Chester Fire Station project. He informed them that the planning application was rejected by the Cheshire West and Chester Planning Committee on 6th November. He continued that the Authority would protect its position by lodging an appeal and by preparing a fresh planning application. Unfortunately, the project would be delayed by around 6 months.

The Assistant Chief Fire Officer for Operational Assurance and Service Improvement provided an update on the Cardiac Response Pilot, which was on hold due to National Pay Negotiations. A Member emphasised his support for the pilot and queried if Cheshire could create a local arrangement. The Assistant Chief Fire Officer for Operational Assurance and Service Improvement advised Members that the possibility would be explored and Members would receive an update in due course.

RESOLVED: That

[1] the Quarter 2 Programme Report 2018-19 be noted.

4 PERFORMANCE REPORT - QUARTER 2, 2018-19

The Head of Protection and Organisational Performance introduced the report which provided Members with an update on the Service's performance against the key performance indicators (KPIs) for Quarter 2 2018-19. Appendix 1 to the report contained the corporate performance scorecard reflecting the Quarter 2 position against targets set and the year-on-year direction of travel for the Service's KPIs.

Members were referred to Appendix 2 of the report which contained a detailed description of each KPI, including a summary of current performance and any actions taken to improve performance. Alongside the Head of Protection and Organisational Performance, the Head of Prevention and Head of Service Delivery provided further information on the KPIs relevant to their departments.

The Head of Protection and Organisational Performance drew Member's attention to the number of non-domestic premises fire safety audits completed by the end of the quarter, which was below target. He explained that the reason for this was the low numbers of competent Fire Safety Officers. A breakdown of staff capacity and competence against performance for each unitary area was detailed within the report. He advised Members that members of the team had made good progress in gaining their Level 4 Audit Competency allowing them to carry out audits on some of Cheshire's more complex premises and this would have a positive impact on the performance for the remainder of the year.

The Head of Service Delivery drew Members attention to the KPI for on-call availability. He commended the on-call staff at Sandbach, Nantwich and Poynton Fire Stations for achieving their target for the quarter. He advised Members that whilst overall performance was behind for the quarter, a plan had been developed by officers, which should enable on-call to achieve 85% availability pan-Cheshire but would take 12 months to embed. The Assistant Chief Fire Officer for Service Delivery added that the availability of on-call resources remained a key priority for the Service.

The independent Member of the Committee queried whether Prevention and Protection staff had been considered to provide operational cover. The Head of Service Delivery advised that the team had been working with the two departments to explore if it was a possible option.

RESOLVED: That

[1] the Quarter 2 Performance Report 2018-19 be noted.

5 INTERNAL AUDIT PLAN - QUARTER 2, 2018-19 - PROGRESS REPORT

Ann-Marie Harrop (the Auditor), a representative from Mersey Internal Audit Agency (MIAA) was in attendance at the meeting to present the quarterly progress summary

of the 2018-19 Internal Audit Plan (attached as Appendix 1 to the report).

She provided Members with a brief overview of the progress made against the audit plan and informed them that progress was on track against the timeline.

RESOLVED: That

[1] the report be noted.

6 HEALTH, SAFETY AND WELLBEING ANNUAL REPORT 2017-18

The Health, Safety and Wellbeing Manager introduced the report which provided an update on the management of health and safety in the Service. He highlighted to Members the key achievements of the Service throughout 2017-18 and reports on both reactive and proactive measures of performance.

He informed Members that there has been a small increase in the number of minor injuries but explained that this figure fluctuated from year to year and continued on a downward trend.

Members were informed that there had been twelve incidents of violence and aggression towards staff during the reporting period. A Member queried how many of the incidents were physical violence. The Health, Safety and Wellbeing Manager confirmed there has been two incidents of physical violence and that the rest had been verbal abuse.

A Member commended the scope and depth of the information provided within the report and thanked the Health, Safety and Wellbeing Manager for his work.

RESOLVED: That

[1] the Health, Safety and Wellbeing Annual Report 2017-18 be noted.

7 ROAD SAFETY ANNUAL REPORT 2017-18

The Arson Reduction and Road Safety Manager introduced the report which appended the Authority's Annual Road Safety Report 2017-18, containing details of interventions delivered by the Service. He highlighted that the Service had received two awards for its road safety work.

A Member congratulated the team for the excellent and extensive partnership work achieved during the year.

RESOLVED: That

[1] the Annual Road Safety Report 2017-18 be noted.

8 'ON THE STREETS' ANNUAL REPORT 2017-18

The Youth Development Manager introduced the report which provided Members with an update on the work undertaken by the 'On the Streets' (OTS) team over the past 12 months. She explained that the programme was delivered in areas with high levels of arson, small deliberate fires and anti-social behaviour.

The Youth Development Manager summarised the local engagement that had occurred with the OTS teams in each of the unitary areas within Cheshire. She informed Members that working across all four unitary areas had resulted in increased community engagement. She highlighted that the Service had seen an improved level of engagement particularly in the Wharton area of Winsford and reported that the team were engaging with up to 25 young people per night.

RESOLVED: That

[1] the report be noted.

9 INTERIM BONFIRE UPDATE 2018

The Arson Reduction and Road Safety Manager provided Members with a verbal interim update on the preventative and operational activities of the Service during the bonfire period. He confirmed that a full report would be presented to the Committee at its next meeting in February 2019.

Members were informed that 87 secondary deliberate fires were recorded during the bonfire period (24 October 2018 – 7 November 2018), which was a 13.9% reduction compared to the 2017 bonfire period.

10 FORWARD WORK PROGRAMME

The table included those items that have been identified/agreed to-date. Members were asked to agree and note the forward work programme for February 2019.

RESOLVED: That:

[1] The Forward Work Programme be noted.

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CHESHIRE FIRE AUTHORITY

MEETING OF: PERFORMANCE AND OVERVIEW COMMITTEE
DATE: 27 FEBRUARY 2019
REPORT OF: HEAD OF FINANCE
AUTHOR: WENDY BEBBINGTON

SUBJECT: FINANCE REPORT - QUARTER 3, 2018-19

Purpose of report

1. This report provides a review of the Service's forecast financial outturn and reports on the progress against 2018-19 capital projects.

Recommended: That Members

- [1] note the forecast outturn position.
- [2] approve the movement in reserves as set out in Appendix 2.

Background

2. On 14th February 2018 the Authority approved the 2018-19 revenue budget of £41.57m together with a 2018/19 capital programme of £9.8m. This report provides an indication of the forecast level of expenditure when compared to the approved budget and capital programme.

Information

Forecast Revenue Spending

3. At first quarter review, an early assessment indicated a small forecast underspend of £62k based on a number of unknown factors such as pay awards. Since then, the pay award position has been clarified and the unused funding that was set aside has now been released. This, together with other key changes resulted in a mid-year forecast underspend of £1.6m. At the end of December, the forecast has been revised further to show a forecast underspend of an additional £0.8m as shown in the table below with further details of each service area's forecast outturn set out in Appendix 1.

	Revised Budget £000	Forecast Spend £000	Variance £000
Summary			
Firefighting and Rescue Operations	£24,740	£24,572	-£168
Protection	£2,043	£1,767	-£276
Prevention	£2,411	£2,346	-£65
Support Services	£9,603	£9,229	-£374
Unitary Performance Groups	£100	£100	£0
Finance Resources	£2,021	£1,761	-£260
Corporate Resources	-£432	-£432	£0
Contributions to/(from) reserves	£1,569	£1,933	£364
Net Revenue Position	£42,055	£41,276	-£779
Funding:			
Council Tax	-£27,735	-£27,735	£0
Collection Fund Surplus (council tax)	-£522	-£522	£0
Business Rates Retention scheme	-£9,313	-£9,313	£0
Collection Fund Deficit (business rates)	£28	£28	£0
RSG	-£4,513	-£4,513	£0
Overall Net Underspend	£0	-£779	-£779

4. Firefighting and Rescue Operations forecast underspend relates mainly to vacancies within the admin hub and OPA. In addition, there are a number of employees choosing to not join the pension scheme. This is being monitored through Human Resources.
5. Within Protection, funding had been allocated to provide support to landlords for sprinklers. This has not been utilised and is being held over until 2019/20 and this is reflected in the forecast underspend.
6. The impact of blue light collaboration on Support Services is providing savings on equipment, photocopying etc., due to sharing these costs with the Constabulary. In addition, Fleet is reporting an underspend for leased vehicles including funding relating to the delayed cardiac response scheme.
7. Finance Resources holds funding for debt management and interest. At the end of December, the approved new borrowing has not yet been taken up and therefore, interest payments remain unspent. In addition, the level of cash held remains high with interest earned exceeding the budget. Both are monitored daily as part of the Treasury Management Strategy.
8. When the 2018/19 budget was set, it included a net contribution from reserves of £0.4m. At the end of December, the amount forecast to be transferred to reserves is £1.933m as shown in the table above. This is due to the underspends reported at first and second quarter reviews together with other agreed transfers. A full breakdown of all reserve movements is included in Appendix 2.

9. As part of the overall financial review including reserves, the Service Management Team challenged a number of earmarked reserves and their purpose. As a result, a number of earmarked reserves have been released and given the capital programme funding requirements, the proposal is for £1.9m to be transferred to the capital reserve.
10. In summary, the overall position at three quarter year review, when forecast expenditure and improved funding are brought together, is for a forecast underspend in this quarter of £0.8m (or 1.85%) when compared to the revised budget and an overall forecast underspend of £2.4m (or 5.7%) from 1 April 2018. The position will continue to be monitored during the final quarter.

Capital Programme

11. At the end of June 2018, the Authority had an approved capital programme of £9.8m. At quarter 2 it was reported that additional schemes have been approved including an increase to the Training Centre project and the rebuild of Chester Fire Station. The additional scheme for the new joint facility at Crewe was also approved by the Fire Authority in September 2018 and earmarked £5m.
12. In this last quarter a couple of small additional schemes have been approved by the relevant officers including £45k for the transport management system. In addition, approval was given for a new drill tower at Poynton Fire Station (£60k) following the deteriorating condition of the existing tower which posed safety issues and was deemed unusable and unrepairable. All these capital schemes, together with prior year schemes, gives an overall capital programme of £23.8m. At the end of December 2018 the forecast outturn is £23.4m – an underspend of £0.4m (1.6% variance).
13. Details of all the schemes are in Appendix 3.
14. Funding for the Training Centre was approved through borrowing, the timing of which is being kept under review in consultation with the Authority's Treasury Management Advisors. At the end December, no borrowing had taken place.

Financial implications

15. This report considers financial matters.

Legal Implications

16. There are no legal implications arising from the report.

Equality and diversity implications

17. There are no equality and diversity implications arising from this report.

Environmental implications

18. There are no environmental implications arising from this report.

BACKGROUND PAPERS: NONE

CHESHIRE FIRE AUTHORITY QUARTER 3 2018/19

	Revised Budget £000	Forecast Spend £000	Variance £000
Firefighting and rescue operations			
Service Delivery	£19,869	£19,818	-£51
Operational Policy and Assurance	£4,871	£4,754	-£117
Protection	£2,043	£1,767	-£276
Prevention			
Community Safety	£2,009	£1,962	-£47
Safety Centre	£402	£384	-£18
Support Services			
Executive Management	£902	£841	-£61
Workforce Transformation	£126	£128	£2
Property Management	£1,478	£1,379	-£99
Finance	£383	£380	-£3
ICT	£1,668	£1,653	-£15
Legal and Democratic Services	£496	£462	-£34
People and Development	£1,815	£1,859	£44
Planning, Performance & Communications	£896	£843	-£53
Procurement and Stores	£246	£243	-£3
Fleet services	£1,593	£1,441	-£152
Unitary Performance Groups	£100	£100	£0
Finance Resources	£2,021	£1,761	-£260
Business Rates Specific grants	-£462	-£462	£0
Provision for non collection of funding	£30	£30	£0
Total Service Expenditure	£40,486	£39,343	-£1,143
Contributions to/(from) capital reserves	-£2,060	£4,711	£6,771
Contributions to/(from) revenue reserves	£3,629	-£2,840	-£6,469
Contributions to/(from) general reserves	£0	£62	£62
Total Net Revenue Expenditure	£42,055	£41,276	-£779
Funding of Net Revenue Expenditure:			
Council Tax	-£27,735	-£27,735	£0
Collection Fund Surplus (council tax)	-£522	-£522	£0
Business Rates Retention scheme	-£9,313	-£9,313	£0
Collection Fund Deficit (business rates)	£28	£28	£0
RSG	-£4,513	-£4,513	£0
Total Funding	-£42,055	-£42,055	£0
Forecast Net Underspend	£0	-£779	-£779

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MOVEMENT IN RESERVES 2018/19

<u>Department</u>	<u>Description</u>	£000
Finance Resources	Land & Building 2018-19 valuation	-£10
Service Delivery	Funding for EP & Crewe 2nd pumps	-£900
Service Delivery	ERP2 Project team	-£60
OPA	Temporary training facilities - year 1 of 2	-£100
Protection	(1) Sprinkler Campaign - one off	-£250
Community Safety	Engagement Officer - Halton	-£13
Fleet	Engagement Officer - Halton, vehicle element	-£5
Property Management	Temporary SM B (no flexi) - New Training Centre (OPA)	-£57
Finance Resources	Annual Contribution to Capital	£935
	Approved as part of 2018-19 Budget	-£460
OPA	Annual contribution to Uniform PPE	£100
Community Safety	Annual contribution to Cadet Vehicle Replacement	£20
Property Management	Annual contribution to Alsager Station Maintenance	£20
Property Management	Annual contribution of RHI Income to Environment Reserve	£25
Property Management	Annual contribution Poynton Maintenance	£5
ICT	Annual contribution MDTs	£34
	Annual Contributions	£204

Contributions To Reserves (reported Qtr 1 to P&O, 5 Sept 2018):

Finance Resources	Funding for new loan costs - not required in year	£63
Finance Resources	Repayment of LGPS actuarial costs funded from reserves	£260
OPA	New Dimensions Grant - transfer to reserves	£6
Workforce Transformation	Contribution to staff survey reserve - bi-annual	£11
Property Management	Additional RHI Income to Environment Reserve	£3
	First Quarter Transfers	£342

Contributions To Reserves (reported Qtr 2 to P&O, 28 Nov 2018):

Finance Resources	First Quarter Review underspend to capital reserve	£62
Finance Resources	Funding for new loan costs - not required in year (2nd Qtr)	£63
Finance Resources	Ill Health pension costs	-£15
Finance Resources	Insurance reserve	£100
ICT	Station End equipment approved 2017-18	-£123
ICT	Replacement equipment / refresh kit	-£56
Property Mgt	Revenue contribution to station modernisation works	£120
OPA	Gym equipment	-£6
OPA	Hydrant repairs	-£10
People & development	Apprentices funded from reserves	-£213
Protection	(2) Sprinkler burn demo funded from reserve	-£3
	Second Quarter Transfers	-£82

MOVEMENT IN RESERVES 2018/19 (continued)

Further Contributions To Reserves :

<u>Department</u>	<u>Description</u>	<u>£000</u>
Finance Resources	Second Quarter Review underspend to capital reserve	£1,566
Finance Resources	Funding for new loan costs - not required in year (3 rd + 4th Qtr)	£125
Finance Resources	Additional Investment Income	£50
Finance Resources	Ill Health pension costs	-£6
Service Delivery	Training costs funded from reserve	-£2
ICT	Delayed 2017-18 training plan funded from reserve	-£58
Property Mgt	Revenue contribution to station modernisation works	£60
OPA	Vehicle stabilisation equipment (2017-18 Qtr3)	-£27
OPA	NOGS post funded from reserve (part year)	-£23
Protection	Fire Safety Prosecution costs	-£9
Protection	(1) Sprinkler Campaign - one off	£250
Protection	(2) Sprinkler burn demo funded from UPG not reserve	£3
Finance Resources	(3) Realignment of reserves (revenue to capital) £1.9m	£-
	Third Quarter Transfers	£1,929
	TOTAL POTENTIAL NET CONTRIBUTION TO RESERVES	£1,933

Note (1) - Sprinkler Campaign to be funded from reserves included in base budget as a one-off item for 2019-20, expenditure is likely to be incurred in 2019-20 so reserve movement reversed at 3rd quarter.

Note (2) - Sprinkler burn demonstration at 2nd quarter anticipated this would be funded from reserves but Protection have since been successful with a bid to the Unitary Performance Groups (UPG) again reserve movement reversed at 3rd quarter.

Note (3) - SMT BMB 27/11/2018 reviewed the Authority's reserves and there has been realignment of earmarked revenue reserves (contribution from revenue reserves £1.9m offset by contribution to capital reserve).

CHESHIRE FIRE AUTHORITY CAPITAL QUARTER 3 2018-19

Service Area	Description	2018-19 Budget £000	Revised Budget £000	Expenditure to date £000	Expected Outturn £000	Variance £000
Prior year schemes:	ICT Review/Server Replacement Programme	0	507	311	507	0
	Line Rescue Vehicle	0	80	79	83	3
	2 * water incident units	0	154	97	97	(57)
	1 * 4 Wheel drive resilience	0	55	0	0	(55)
	Support vehicles replacement programme	0	60	60	60	0
	1 * display unit (chip pan demo unit)	0	25	17	17	(8)
	Salvation Army Vehicle	0	22	23	23	1
	Sub-total	0	903	587	787	(116)
2018-19 Schemes	2 * cadets vehicles	20	20	0	20	0
	Three New Appliances	810	810	0	810	0
	1 * 4 wheel drive vehicle	55	55	0	0	(55)
	support vehicles replacement programme	60	60	0	60	0
	Hazardous materials units / containers	75	75	0	0	(75)
	Server replacement programme	50	50	0	50	0
	ICT - storage space	50	50	0	0	(50)
	Replacement thermal image cameras (phased replacement)	28	28	0	28	0
	Capital contingency	107	107	0	0	(107)
	New Operational Training Facility	8,550	11,000	542	11,000	0
	Sub-total	9,805	12,255	542	11,968	(287)
In-year approvals:	Chester Fire Station	0	5,510	234	5,510	0
	Crewe Joint Fire/Police Facility (CFA Share of Cost)	0	5,000	0	5,000	0
	Transport management system	0	45	45	45	0
	New Drill Tower – Poynton Fire Station	0	60	0	60	0
	Total	9,805	23,773	1,408	23,370	(403)

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CHESHIRE FIRE & RESCUE SERVICE

MEETING OF: PERFORMANCE AND OVERVIEW COMMITTEE
DATE: 27 FEBRUARY 2019
REPORT OF: CHIEF FIRE OFFICER AND CHIEF EXECUTIVE
AUTHOR: JOANNE CARTLEDGE/SUSAN WATKINS

SUBJECT: PROGRAMME REPORT - QUARTER 3, 2018-19

Purpose of Report

1. To update Members on the Service's programmes and projects (including those contained within the Authority's annual IRMP action plan).

Recommended: That

- [1] Members review the information provided.

Background

2. This report forms part of the Authority's quarterly performance reporting cycle which also includes reports on key performance indicators and financial performance.

Information

3. Progress on delivery of the programmes and projects is reported in the form of a quarterly health report to the Service's Performance and Programme Board (members of Service Management Team). The Board is responsible for ensuring the successful delivery of programmes and projects contained in the Authority's annual IRMP action plans. The Programme Health Report for the third quarter of 2018-19, (based on the document that was recently considered at Performance and Programme Board) is attached as Appendix 1 to this report. It was produced in January 2019 and verbal updates will be provided, where necessary.

Financial Implications

4. Specific financial and budget impacts are detailed in the finance report presented separately by the Head of Finance.

Legal Implications

5. There are no issues to report that impact upon the Service's ability to meet its statutory or other legal obligations.

Equality and Diversity Implications

6. Programmes and projects are required to have equality impact assessments completed in accordance with the approved Project Management Framework.

Environmental Implications

7. Projects are individually assessed for environmental implications by the relevant project managers in accordance with the Service's Project Management Framework.

CONTACT: DONNA LINTON, CLEMONDS HEY, WINSFORD

TEL [01606] 868804

BACKGROUND PAPERS: NONE

APPENDIX 1 – PROGRAMME HEALTH REPORT

Performance and Programme Board – Programme Health Report

All data supplied in the report has been populated directly from the Cheshire Planning System on 15th January 2019, any changes after this date will not be reflected.

Reporting Period	FROM	1st October 2018	TO	31st December 2018
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PROJECT PROGRESS SUMMARIES, RAG STATUS AND IMPACT MITIGATION

1226	BLUE LIGHT COLLABORATION PROGRAMME			
PROGRAMME MANAGER		Head of Strategic Change		
Previous status	Current status	<u>Mitigating steps</u> (where status is red or amber)		
		CFRS has decided that it is unable to go-live with MFSS at this time and the implications are being worked through. The underlease, end state collaborating agreement, charging model and some of the estates work is still outstanding.		
Programme Update				
<p>The underlease for the office accommodation at Clemonds Hey has been agreed. Unfortunately, it is still not signed and it is not clear why there is a continuing delay. The MFSS collaboration agreement and deed of adherence are not available. An outline of the BLC end state collaboration agreement has been shared. There remain some areas that require further development. Work on the charging model is being revisited. The outline will be further developed in the next few months, with a view to completing the document this calendar year.</p> <p>CFRS has decided that it is unable to go-live with MFSS at this time. There are various reasons, not least concerns about costs and uncertainties over governance. This has left CFRS in a difficult position and the implications are being worked through. This will have an impact on the transitional work being carried out in the joint teams.</p> <p>The Estates work is progressing as follows:</p> <ul style="list-style-type: none"> • An alternative approach to car parking at Clemonds Hey has been identified, which is intended to create a similar number of car parking spaces to those planned originally. It is not clear when this will be delivered. • The construction completion date for the print department works at Clemonds Hey has been re-forecast. It is likely that the print department will not be able to return to Clemonds Hey until March 2019. • The external signage at Clemonds Hey is now the subject of a planning application. 				

1561		WHOLE SERVICE REVIEW	
PROJECT SPONSOR		Chief Fire Officer and Chief Executive	PROJECT MANAGER
		Assistant Chief Fire Officer, Operational Assurance and Service Improvement	
Previous status	Current status	<u>Mitigating steps</u> (where status is red or amber)	
N/A			
Programme Update			
<p>The revised template for the IRMP has been used for the current consultation of IRMP 16 (2019/20). This has incorporated recommendations from the new national framework and show predicted risks and anticipated numbers. Following any consultation amendments, it is anticipated this will be sign off by CFA on the February 13th 2019 meeting.</p> <p>The review reports for Wilmslow and Penketh Fire Stations duty systems and Ellesmere Port's second pump have commenced.</p> <p>The review of the Cheshire standard has also commenced with a variety of options and considerations being worked through with the aim of meeting Members desire for an improved standard.</p> <p>The CRM policy review is ongoing, the new approach to CRM is being worked through as part of the Whole Service Review (WSR) and development of the next IRMP and first action plan (2020/21). Once this has been delivered and worked through then the policy will be written up and taken through due process.</p> <p>We have created a Risk/Demand review, compiling the known risks for Cheshire. These risks tend to be larger scale risks, above and beyond the current demand we face, for example; large ten pump plus incidents & spate conditions etc. Evaluating the current and predicted risk of these, current outcomes and how well we are prepared to respond across CFRS in relation to prevention, protection, assurance and response. We have incorporated the LRF's community risk report and also the national risk report. The business intelligence unit is currently working through the risk/demand aspect to formulate current demand and predicated figures to support this assessment.</p> <p>The risk report is in draft awaiting outcomes from the CRM process. First Strategic Focus Group is programmed for early February where the risk report and CRM outcomes will be shared with the PO's. This will also be where the 'T.E.S.' (Transformation options, Efficiency options, Stop/reduce options) will be discussed based on existing delivery.</p> <p>The WSR programme intends to seek independent assessment of aspects of its work as per previous reviews (for example Greenstreet Berman).</p> <p>Heads of Department meetings have been programmed for late February and early March to deliver the CRM and risk report and review current departmental activities with HOD's to debate the TES options the analysis highlights. Further feedback and direction was sort from CFA members at the planning day on 11th Jan 2019. The compilation of the consultation and SMT visits has commenced and will then be delivered to the staff engagement forum for feedback and to generate options and proposals.</p> <p>Consultation through JCNP has commenced seeking ideas and feedback. The WSR is now a standard agenda item at JCNP and ACFO Waller is attending each time.</p>			

Operational Policy and Assurance

1490		SADLER ROAD TRAINING CENTRE PROGRAMME		
PROGRAMME SPONSOR		Assistant Chief Fire Officer, Operational Assurance and Service Improvement	PROGRAMME MANAGER	Head of Operational Policy and Assurance
Previous status	Current status	Mitigating steps (where status is red or amber)		
		The programme remains on the same timescales included in the previous quarter update and remains in Amber status following some slippage as a result of the detailed design and costings work included in Stage 1 of the programme.		
Programme Update				
<p>The project steering group has met every two weeks during the past few months to review all of the detailed plans for each area of the new training centre, including the mechanical and electrical and architectural drawings. This has resulted in the plans now being frozen allowing the main contractor to work on them so a robust price will be presented to the Authority for the programme; this is expected during the next quarter.</p> <p>The planning application has been submitted to the local authority and was expected to be concluded by the 10th January 19. Following a request by the local authority to extend the application process it is now expected that a decision will be received during February 19. This extension is not expected to delay the start date on site, though this is dependent on any pre commencement conditions from the planning permission.</p> <p>The relocation of training project remains on target to relocate training courses to other planned locations by the 4th March 19, with the decommissioning of the Incident Command Training Suite now started so training can be carried out at Frodsham Fire Station from January 19. Discussions have taken place between the Service, Greater Manchester FRS and Manchester Airport to communicate our plans for the future and our exit strategy from the Airport fire ground, including the plans to return the attack containers to new training site during 2020.</p> <p>All risk and milestones have been reviewed and a new risk has been included at the Q3 period following lessons learned from the Chester Fire Station planning application, though the likelihood of this risk affecting this programme is low following the building consultant's advice. The programme therefore remains on the same timescales included in the previous quarter update and remains in Amber status following some slippage as a result of the detailed design and costings work included in Stage 1 of the programme.</p>				

1553		OPERATIONAL TRAINING GROUP REVIEW			
PROJECT SPONSOR		Assistant Chief Fire Officer, Operational Assurance and Service Improvement	PROJECT MANAGER		Head of Operational Policy and Assurance
Previous status	Current status	<u>Mitigating steps</u> (where status is red or amber)			
		The project remains Amber as it has now changed scope to include the command trainers.			
Programme Update					
<p>Since the previous quarterly update this project has taken a new direction to include all training instructors from both the Operational Training Team and the Command Training Team.</p> <p>The newly formed Shift Working Group (SWG) which now includes representatives from both training teams met on the 8th January 19 to discuss the combined work that will be required for a joint training team structure and duty system in the future. A proposed structure has been presented to the group by the project manager which includes a combination of Station Managers and Watch Managers that is within the parameters of the budget.</p> <p>It was agreed by the group that the SWG representatives from the teams would now use this structure to work on a duty system, which will be presented at the next meeting on the 29th January 19. The project manager will also produce a grey book compliant duty system that will meet the project System Evaluation Template as an alternative for any negotiation.</p>					

1318		CARDIAC ARREST RESPONSE PROJECT			
PROJECT SPONSOR		Assistant Chief Fire Officer, Operational Assurance and Service Improvement	PROJECT MANAGER		Head of Operational Policy and Assurance
Previous status	Current status	<u>Mitigating steps</u> (where status is red or amber)			
		Current status remains red due to lack of progress on the project.			
<p>There continues to be no progress with this project during quarter 3 as it remains on hold awaiting the outcomes of national discussions for the wider Fire Fighter role linked to pay and conditions.</p>					

1313		EMERGENCY SERVICES MOBILE COMMUNICATION PROGRAMME			
PROJECT SPONSOR		Assistant Chief Fire Officer, Operational Assurance and Service Improvement	PROJECT MANAGER		Station Manager - Operational Policy and Assurance
Previous status	Current status	Mitigating steps (where status is red or amber)			
		<p>Latest projection for the data and critical voice implementation via Emergency Services Network (ESN) for the North West is now Autumn 2020.</p> <p>This slippage has been the result of an extension to national programme of works for the ESN programme.</p>			
Programme Update					
<p>Latest projection for the data and critical voice implementation via Emergency Services Network (ESN) for the North West is now Autumn 2020. To mitigate any risks to the Airwave network, the network currently used by all blue light agencies, an extension to the contract has been agreed at national level though there are currently no details regarding costings or liabilities for the extension.</p> <p>Motorola have purchased the rights to Kodiak, an application that can be used to deliver some of the push to talk (PTT) integration into the ESN project which should assist is the overall project delivery.</p> <p>The regional Fire and Rescue Services and National Fire Chiefs Council leads have visited Cheshire for our view of the new phased implementation of the project.</p> <p>Additional funding has now been agreed (71K per FRS) to support the delivery of ESN until the end of 2020. Further additional funding has also been agreed for the NW region to appoint a technical lead to support and advise the regional and individual FRS transition teams on a 12 month fixed term basis.</p>					

1535		COLLABORATIVE DRONE PILOT			
PROJECT SPONSOR		Assistant Chief Fire Officer, Operational Assurance and Service Improvement	PROJECT MANAGER		Station Manager - Operational Policy and Assurance
Previous status	Current status	Mitigating steps (where status is red or amber)			
		<p>The current collaborative trial with Cheshire Constabulary has not proved as successful as hoped and is being closed, hence the change in status from green to amber.</p> <p>It has been agreed for Fire to pull together their own standalone UAS team and utilise the drone currently based at Clemonds Hey based out of a Fire location.</p>			

Programme Update

A UAS (unmanned aerial vehicle) options moving forward paper was submitted to Service Management Team (SMT) and discussed on the 21st January 2019. The current collaborative trial with Cheshire Constabulary has not proved as successful as hoped and is being closed.

The trial has been useful from a lessons learned perspective and has helped inform the decision making going forward for the drone provision for Cheshire Fire.

It has been agreed for Fire to pull together their own standalone UAS team and utilise the drone currently based at Clemonds Hey based out of a Fire location. There are several pieces of work that will need to be completed including a new PfCO (Permission for Commercial Operations), utilising FRIC for insurance purposes, selection and training of new team members.

Joint areas of interest for both Fire and Police involving the use of drones will continue to be reviewed where appropriate.

Service Delivery

1544		Replacement of Chester Fire Station		
PROGRAMME SPONSOR		Director of Governance and Commissioning	PROGRAMME MANAGER	Group Manager – Cheshire West and Chester
Previous status	Current status	Mitigating steps (where status is red or amber)		
		Remains red due to planning status.		
Programme Update				
<p>The planning application was refused at Chester Planning committee. An assessment of the current position has been undertaken and both a new application and appeal will be submitted. The Appeal was submitted in January 2019, with the revised planning application due to be submitted in February 2019.</p> <p>Dates, aligned to the old milestones are to be reviewed with the Portfolio Office in the coming weeks to better reflect achievable dates for the build. Land and Property meetings have provided updated position statements.</p> <p>Staff engagement has been considered and a decision to return displaced staff to Chester offices on the 23rd January 2019 has been taken. Continued staff updates are being provided on a regular basis.</p>				

1557	STATION MODERNISATION PROGRAMME		
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PROJECT SPONSOR		Director of Governance and Commissioning	PROJECT MANAGER	Group Manager
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Previous status	Current status	<u>Mitigating steps</u> (where status is red or amber)		
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N/A				
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Programme Update				
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Cruden Construction was selected through a procurement framework for Tarporley and Bollington. The rationale for selecting these two stations on their own was to ensure progress against the overall programme.

TACP architects won a competitive tendering process for developing the plans for Tarporley and Bollington.

Initial meetings on site with Cruden and TACP have been completed and On Call staff engaged with during this process.

Designs received and comments returned by Paul Binyon and Andy Selley. Meeting was held on 9th January 2019 to review plans and add in changes.

Group Manager has visited Tarporley on 10th January and Bollington on 14th January to discuss plans with all the On Call staff.

The plan is to start work on site in February.

Communications have been sent out on the programme internally.

The procurement framework for the North West Construction Hub is now open and the remainder of the Modernisation Programme is likely to be tendered utilising this. This has been sourced by the Procurement Team.

1556	ON-CALL PROGRAMME		
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PROJECT SPONSOR		Head of Service Delivery	PROJECT MANAGER	Group Manager – Cheshire West and Chester
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Previous status	Current status	<u>Mitigating steps</u> (where status is red or amber)	
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N/A			
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Programme Update

Several On Call (OC) meetings have been undertaken to establish a benchmark of the current status of the OC management. A date has been set for the inaugural OC programme team meeting on the 25th January. During the meeting individuals will be detailed to assist with the identified tasks associated with the 4 strands.

Current On-Call Station Managers additional workstreams have been identified and will be aligned to the identified strands of Role, Financial, Recruitment & Availability.

Financial - Initial investigations into claims for the cleaning of equipment have been carried out and will be evaluated.

Recruitment - Significant work has been undertaken with the initial recruitment process:

- Application forms and contracted hours are now electronic
- Online tests have been evaluated and concentrated on numerical and written
- Practical assessments are now completed on a monthly basis and interviews will be completed within 2 weeks of the practical assessment.

Availability - The CFA approved the 2 year pilot of 6 Temporary Crew Managers who will be aligned to the OC staffing between the core hours of 0900hrs to 1700hrs. Documents on job description, guiding principles and PID have been written in support. Advert has been written and will be issued w/c 14th January.

A follow up OC planning away day has been provisionally booked for May 2019 where evaluation and accountability for progress will be made.

The table below shows the latest figures:

Awaiting functional hearing test	2
Awaiting interview	10
Awaiting medical (incl booked in)	9
Contacted to inform of change in process, no response	18
Injured	1
Application stage (incl sent, awaiting return etc)	18

Numerical & Verbal phase	7	
Application form to panel	3	
DBS phase	5	
Practical Feb	7	
Total	80	

1540 AERIAL LADDER PLATFORM REVIEW				
PROJECT SPONSOR		Assistant Chief Fire Officer, Operational Assurance and Service Improvement	PROJECT MANAGER	Station Manager
Previous status	Current status	<u>Mitigating steps</u> (where status is red or amber)		
				
Programme Update				
This project now forms part of the Whole Service Review.				

Protection and Organisation Performance

1058 SPRINKLER CAMPAIGN 2014				
PROJECT SPONSOR		Assistant Chief Fire Officer, Operational Assurance and Service Improvement	PROJECT MANAGER	Head of Protection and Organisational Performance
Previous status	Current status	<u>Mitigating steps</u> (where status is red or amber)		
				
Sprinklers installations are confirmed in Churchill Mansions, Runcorn (excluding 3 flats where legal action is being taken) and all 3 Joseph Groome Towers blocks, Ellesmere Port. Waverley Court in Crewe is in the project planning stage to install sprinklers.				
No progress has been made, despite significant efforts, with either Peninsula House or Kingsway in Warrington regarding their intentions to fit sprinklers but efforts are still being made to obtain an official response. It is our understanding at this stage that Peninsula House has had a major refurbishment and is in the process of being sold and is unlikely to be				

fitted with sprinklers.

No funding has been transferred for any projects at this stage and we are liaising with legal to develop the relevant documents to allow this to take place and to ensure the appropriate governance is in place.

1549		HIGH RISE SPRINKLER CAMPAIGN 2018			
PROJECT SPONSOR		Assistant Chief Fire Officer, Operational Assurance and Service Improvement	PROJECT MANAGER		Head of Protection and Organisational Performance
Previous status	Current status	Mitigating steps (where status is red or amber)			
					
<p>Following consultation Onward Housing have confirmed that they are to sprinker their 3 tower blocks in Handforth in Cheshire East.</p> <p>Efforts have also been made with Peaks and Plains regarding blocks in Macclesfield but with no positive return at this stage.</p> <p>There are three funding packages which remain available across the two sprinkler projects and we are aiming to align at least one but preferably two of these packages to Warrington projects. Only 4 of the high rise blocks in the service area will not be protected by sprinklers by 2020 if all of the commitments made are followed through.</p> <p>All sprinkler demonstrations have now been completed with a variety of stakeholders attending to observe a sprinkler protected room and non-sprinkler protected room when set alight. These have been heavily promoted on social media and in the press.</p> <p>No funding has been transferred for any projects at this stage and we are liaising with legal to develop the relevant documents to allow this to take place and to ensure the appropriate governance is in place.</p>					

1554		PROTECTION REVIEW			
PROJECT SPONSOR		Assistant Chief Fire Officer, Operational Assurance and Service Improvement	PROJECT MANAGER		Head of Protection and Organisational Performance
Previous status	Current status	Mitigating steps (where status is red or amber)			
					
Programme Update					
<p>Six draft report sections have been submitted and are in the process of review and revision. Five additional sections are in the process of being completed and three sections remain unallocated as yet. HMICFRS reports have been reviewed in the area of protection for comparative purposes and Lancashire FRS were visited to discuss delivery of their Protection function. The initial report will be presented to the ACFO by the end of February.</p> <p>Staff survey feedback was collated from survey monkey and the project team have discussed the outcomes and the need to be cognisant of the feedback when writing individual sections of the report to ensure the feedback is captured and specifically considered.</p>					

Prevention

1500		SAFE AND WELL PHASE 2 – LONELINESS AND ISOLATION			
PROJECT SPONSOR		Assistant Chief Fire Officer, Service Delivery	PROJECT MANAGER		Partnership Co-ordinator
Previous status	Current status	Mitigating steps (where status is red or amber)			
					
Project Update					
<p>Documentation to support delivery of training is complete.</p> <p>Training of fire-fighters and advocate staff in relation to delivering Loneliness and Social Isolation work within Safe and Well Visits will commence on the 15th January 2019 and finish on the 25th March 2019, these dates have been finalised and will occur across stations and at Sadler Road. Jenny Maskell and Lee McGarity will be delivering this training package.</p> <p>The current Memorandum Of Understanding (MOU) expires on 31st March 2019, a new MOU will be drafted and agreed by all parties prior to this date.</p> <p>Each CFRS Prevention admin hub (East, West, and Warrington & Halton) will forward details of referrals via secure</p>					

email to the British Red Cross (BRC) once a week. BRC will provide one central email address for these to be sent to and also one contact number in case of queries. BRC and The Silver Line have agreed their own referral mechanism between each other for the onward referrals of householders requiring The Silver Line support, this will be in place from 1st April 2019. BRC will work with The Silver Line to discuss support in areas where BRC service provision may be limited.

1496		SAFE AND WELL PHASE 2 – HYPERTENSION, BLOOD PRESSURE and ATRIAL FIBRILLATION	
PROJECT SPONSOR		Assistant Chief Fire Officer, Service Delivery	PROJECT MANAGER
			Prevention Policy and Projects Manager
Previous status	Current status	<u>Mitigating steps</u> (where status is red or amber)	
			
Project Update			
<p>Blood Pressure</p> <p>We have worked with the Operational Policy and Assurance Department to develop a training programme for all operational and prevention staff for blood pressure and loneliness. Both health issues comprise Safe and Well Phase 3. The training will take place during February and March 2019. In addition, we will use the training time to provide further information to staff on provisions of new GDPR obligations, in particular consent issues and a refresher to staff on what happens once we have referred a person to health. The blood pressure training will be delivered by Halton Local Authority Public Health. Loneliness and isolation will be delivered by CFRS staff.</p> <p>We continue to work with CHAMPS (overarching body for Cheshire Directors of Public Health) to draft and agree a covering Memorandum of Understanding for Blood Pressure. We are currently awaiting a draft MoU from CHAMPS. Once received we will work with CFRS legal to ensure we are happy with the MoU. The intention is that the MoU will be signed by CFRS Director of Governance and Wirral LA legal (Wirral LA is the parent body for CHAMPS).</p> <p>We would expect Safe and Well Phase 3 to go live around April/May 2019.</p> <p>Warrington Atrial Fibrillation</p> <p>The Warrington Director of Public Health has now agreed that CFRS can add atrial fibrillation to the Safe and Well work in Warrington in line with the work we are conducting in the other 5 Cheshire CCG areas. Next steps will be for Prevention policy team to train operational and prevention staff to conduct AF screening work in Warrington. We would expect this to happen quite quickly and be able to go live in line with the Safe and Well Phase 3 timescale.</p>			

RISK MANAGEMENT

CPS Ref	Risk Detail	Risk Owner	Risk Score	Progress Update
1226: BLUE LIGHT COLLABORATION PROGRAMME				
987	<p>MFSS – As a result of the introduction of a new version of Oracle and unfamiliarity with the changes in technology there is a risk that technical challenges could lead to delays in data migration and external system integration testing.</p>	MFSS Project Manager	N/A	<p>Risk Closed Due to a number of factors CFRS has decided to defer it's on boarding to the MFSS to a later date to ensure a more successful go-live. As a result this risk is no longer relevant and can be closed.</p>
979	<p>MFSS On boarding – slippage to programme timelines</p> <p>As a result of a number of partners on boarding to Oracle at the same time there is a risk that the project will slip beyond the planned go-live date. Delays for partners could be caused by a number of factors including parallel payroll runs, delays in testing poor data quality, resourcing problems.</p> <p>The impact of this risk may be increased costs, in terms of extra resources and the requirement to renew system contracts. There would also be an impact on organisational expectations and reputation of continuing change.</p>	MFSS Project Manager	N/A	<p>Risk Closed Due to a number of factors CFRS has decided to defer it's on boarding to the MFSS to a later date to ensure a more successful go-live. As a result this risk is no longer relevant and can be closed.</p>
992	<p>MFSS - As a result of a significant amount of defects found within Oracle Cloud during UAT there is a risk that progression into UAT 2 and the future phases of the project will be delayed if the number of defects can't be satisfactorily fixed.</p> <p>This may result in in delays to the planned go live date and further significant costs.</p>	MFSS Project Manager	N/A	<p>Risk Closed Due to a number of factors CFRS has decided to defer it's on boarding to the MFSS to a later date to ensure a more successful go-live. As a result this risk is no longer relevant and can be closed.</p>
993	<p>MFSS - As a result of lack of dedicated project resources to work on the CFRS elements of</p>	MFSS Project Manager	16	<p>Risk Closed Due to a number of factors CFRS has decided to defer it's on boarding to the MFSS to a later</p>

	the MFSS Programme there is a risk that key task and milestones will be missed, work will be rushed and the SME's will become over worked.			date to ensure a more successful go-live. As a result this risk is no longer relevant and can be closed.
950	<p>BLC - As a result of a lack of clarity regarding the overall governance and service model there is a risk that overall timescales for the collaboration agreement may be compromised.</p> <p>This may result in increased costs and impact on Programme delivery.</p>	Director of Governance and Commissioning	<p>9</p> 	Risk score reduced since last quarter. Some progress has been made and the parties will work together to achieve an acceptable amicable arrangement.

ISSUE MANAGEMENT

CPS Ref	Issue Detail	Issue Owner	Progress Update
1313: ESMCP - Financial Implications to the Service should the Airwave contract need extending beyond 2020			
970	As a result of slippage/delay in the ESMCP Programme nationally the Airwave TETRA network will need to remain operational beyond March 2020	Head of Operational Policy and Assurance	<p>Following on from the recent Performance and Programme Board it was decided that this risk is now an issue as it has been agreed the airwave contract will be extended.</p> <p>There may be additional risks identified from the airwave contact extension however at this time they are not known.</p> <p>Update January 19 - Airwave network has officially been extended until 31/12/2022. Call off contract with Airwave to be investigated to feed into financial planning around the extension.</p> <p>If the original Firelink contract was dated with an actual finish date it will need to be discussed with Airwave to ensure we transition onto the extension period. This is being picked up by the ESN Project Manager.</p>
1226: BLUE LIGHT COLLABORATION PROGRAMME			
987	MFSS – As a result of the introduction of a new version of Oracle and unfamiliarity with the	MFSS Project Manager	<p style="color: red;">Issue Closed</p> <p>Due to a number of factors CFRS has decided to defer it's on boarding to the MFSS to a later date to ensure a</p>

	changes in technology issues have been caused due to the lack of system knowledge.		more successful go-live. As a result this issue is no longer relevant and can be closed.
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CHESHIRE FIRE AUTHORITY

MEETING OF: PERFORMANCE AND OVERVIEW COMMITTEE
DATE: 27 FEBRUARY 2019
REPORT OF: HEAD OF PROTECTION AND ORGANISATIONAL
PERFORMANCE
AUTHOR: ANTHONY JONES

SUBJECT: PERFORMANCE REPORT – QUARTER 3, 2018-19

Purpose of Report

1. To present the review of performance for each of the Service's Key Performance Indicators (KPIs) at the end of Quarter 3, 2018-19.

Recommended that:

- [1] Members review and consider the information presented in this report.

Background

2. This report forms part of the Authority's performance reporting cycle and provides a summary of the Service's performance against the KPIs for Quarter 3 (Q3).

Information

3. The Service's Performance and Programme Board (members of the Service Management Team) receives a quarterly review of performance against KPIs. The Board is responsible for monitoring and reviewing progress against performance targets and ensuring that action is taken wherever possible if targets are not being met. The performance reviews are in turn presented to the Performance and Overview Committee.
4. The Corporate Performance Scorecard is attached to this report as Appendix 1. It reflects the Q3 position against targets set and the year-on-year direction of travel for the Service's KPIs.
5. A more detailed description of each KPI including a summary of current performance and any actions required to improve performance is set out in the Performance Health Report which is attached to this report as Appendix 2. In addition the following appendices supplement this information:

Appendix 3 - Safety Central Infographic
Appendix 4 – Safe and Well Infographic
Appendix 5 – On-call Availability

Financial implications

6. There are no financial implications associated with this report.

Legal implications

7. There are no issues to report at the end of Q3 that should impact upon the Service's ability to meet its statutory or other legal obligations.

Equality and Diversity implications

8. The Service has for a number of years collected and reported equality monitoring data across a number of indicators. This is reported quarterly to the Equality Steering Group and annually to this committee so that trends can be identified and addressed.

Environmental implications

9. There are no specific environmental implications. Environmental performance targets are reviewed and monitored as part of the delivery of the Authority's Environmental Strategy.

Appendix 1 - Q3 2018-19 Corporate Scorecard

Appendix 2 - Q3 Performance Health Report plus Appendices

Appendix 3 - Safety Central Infographic

Appendix 4 – Safe and Well Infographic

Appendix 5 – On-call Availability

Quarter 3 2018/19 Performance

A Cheshire where there are no deaths, injuries or damage from fires or other emergencies

Vision

IRMP Theme

Outcomes

Outputs

Protecting Local Communities

	Actual	Target	Q3 Year on Year	Q3 2017-18
Deaths in Primary Fires	1	0	↔	1
Injuries in Primary Fires	38	35	↓	51
Accidental dwelling fires	275	280	↓	289
- % starting in kitchens	54%	n/a	↓	168 (58%)
- % in homes with residents over pensionable age	16%	n/a	↓	58 (20%)
Deliberate fires (Primary and Secondary)	885	997	↓	1,012
Fires in Non Domestic Premises	120	128	↓	143
AFAs in Non Domestic Premises	328	456	↓	422

	Actual	Target	Q3 Year on Year	Q3 2017-18
HSAs Delivered to Heightened Risk	32,112	30,000	↑	30,678
Platinum address success rate	66%	65%	↑	60%
Thematic Inspections Completed	1,507	1,503	↓	1,518
NDP Fire Safety Audits Completed	1,152	1,350	↑	1,013

Responding to Emergencies

	Actual	Target	Q3 Year on Year	Q3 2017-18
10 Minute Standard	85%	80%	↓	88%
On Call Availability	62%	85%	↓	66%
Nucleus OC pumps	99%	85%		
Primary OC pumps	61%	85%		
Secondary OC pumps	43%	85%		

Developing the organisation

	Actual	Target	Q3 Year on Year	Q3 2017-18
Average Days/Shifts Lost to sickness	3.17	4.13	↓	4
Working Days Lost To Injury	37	24	↑	20

Performance key

- Meeting target
- Within 10% of target
- Failing against target by at least 10%

Year on year direction key

- ↑ ↓ Direction of travel year on year
- ↔ No change in direction of travel
- ↑ ↓ Direction of travel year on year by up to 10%
- ↑ ↓ Direction of travel year on year by at least 10%

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Performance and Programme Board – Performance Report

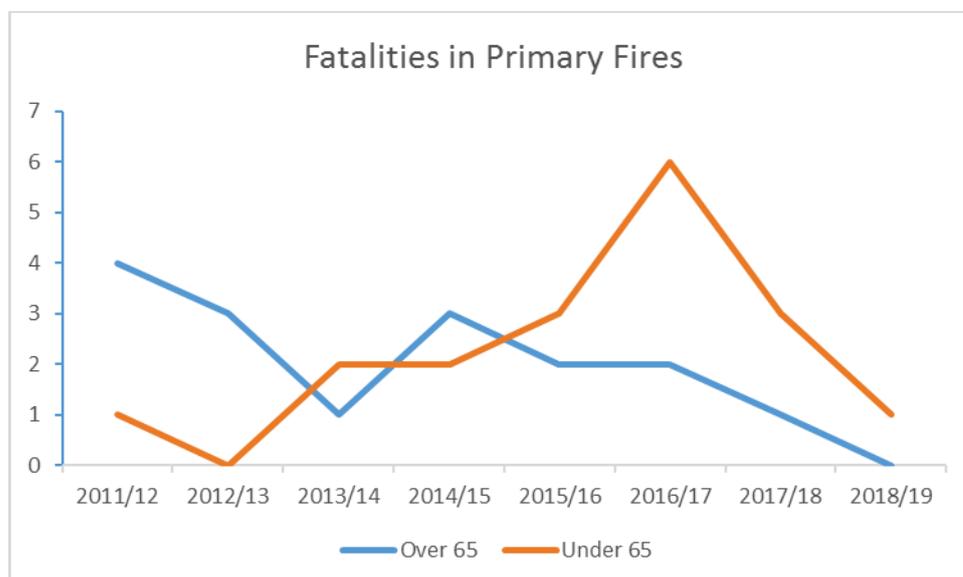
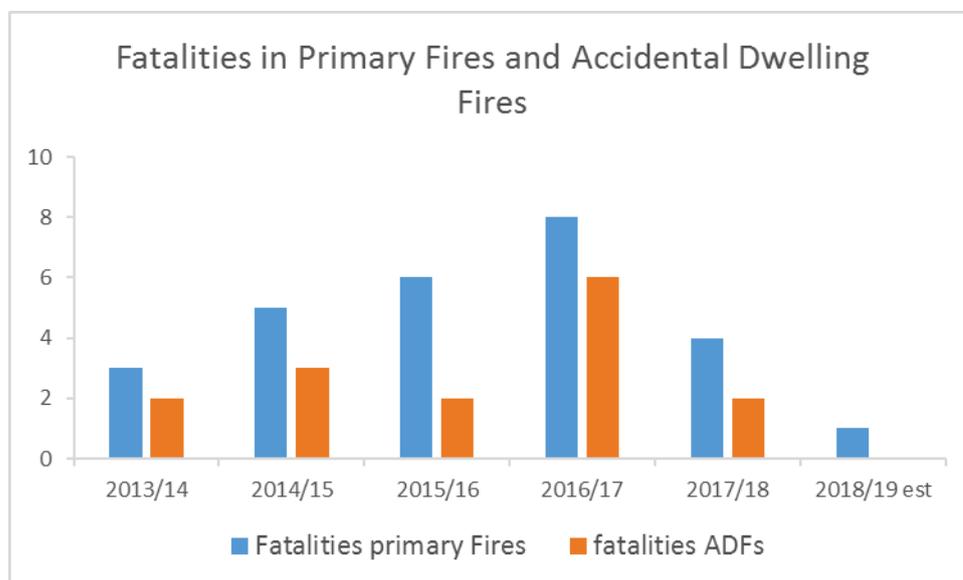
Reporting Period Q3		01/04/2018 To 31/12/2018	
Target	0	Actual	1

Indicator: [Number of Deaths in Primary Fires]

Primary fires include all fires in buildings, vehicles and some outdoor structures or any fire involving casualties, rescues or fires attended by five or more appliances

Previous Status	Current Status
	

Summary of Current Performance



Nationally, in 2017/18 41% of fatalities, in accidental dwelling fires, involved people aged 65 or older. However, within Cheshire over the last three years 13 out of the last 18 fatalities (72%) in primary fires have involved victims aged under 65. The single fatality in 2018/19 involved a vehicle fire and is currently under investigation as to the cause.

Fire Investigation Officers will continue to investigate the causes of fatal fires and work with partner agencies and other stakeholders to prevent further fires occurring.

What actions will be required to improve performance?

- Our officers will continue to work with partner agencies and other stakeholders to examine the causes of fires and identify any emerging trends to better inform our prevention and protection activities.
- The Heads of Department meet every two months as the Incidents of Interest Scrutiny Group. Findings, outcomes and actions associated with any fire fatalities, serious injuries, 2in 24s and other 'incidents of interest', e.g. Grenfell Towers, are monitored and scrutinised by Heads of Department at the group to ensure that the Service continually improves and learns from these incidents to prevent further fires occurring. All fatal fires are subject to a full investigation and report.
- It is acknowledged that people with poor mental health are at heightened risk from dying in a fire. As reported at Q2, a jointly funded mental health advocate will be appointed to the Prevention team to work with vulnerable people at risk in our communities. We are awaiting signature of the partnership agreement with Cheshire & Wirral NHS Trust so that the appointment process can begin.

Performance and Programme Board – Performance Report

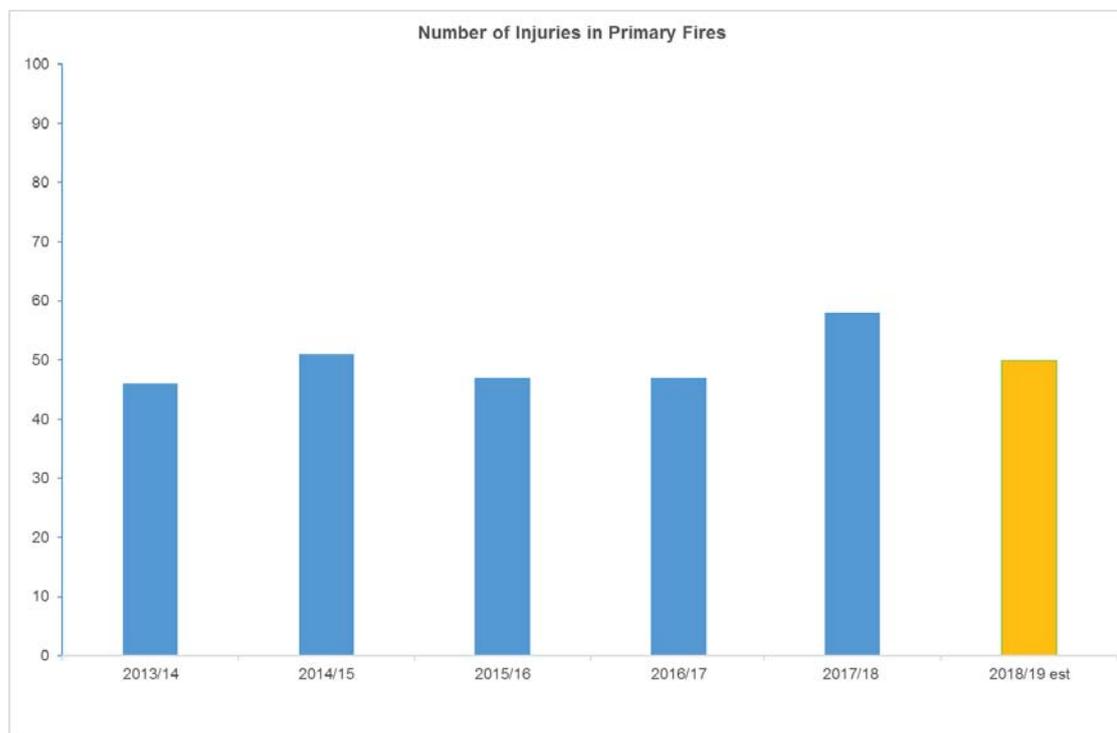
Reporting Period Q3		01/04/2018 To 31/12/2018	
Target	35	Actual	38

Indicator: [Injuries in Primary Fires]

Primary fires include all fires in buildings, vehicles and some outdoor structures or any fire involving casualties, rescues or fires attended by five or more appliances.

Previous Status	Current Status
	

Summary of Current Performance



The number of Injuries in primary fires are marginally off target:

- 38 injuries recorded during the first three quarters of 2018/19, compared to 51 for the same period last year.
- 14 occurred in September - 9 at three incidents
- 21 of the 38 injuries took place in accidental dwelling fires.
- 10 injuries were fuel/chemical related with 2 incidents accounting for 7 of these injuries with only 1 injury occurring in Q3

Unitary Authority		Number of Injuries	
Cheshire East		5	
Cheshire West & Chester		10	
Halton		14	
Warrington		9	
Total		38	

Cause		Number of Injuries	
Smoking Related		6	
Cooking Appliance		9	
Matches and Candles		5	
Fuel/Chemical Related		10	
Electricity Supply		4	
Vehicle		2	
Fridge/Freezer		1	
Spread from Secondary Fire		1	
Total		38	

Age Group	Number of Injuries	
	Severe	Slight
0-9	0	1
10-19	0	1
20-29	0	5
30-39	2	8
40-49	1	5
50-59	0	5
60-69	0	4
70-79	1	2
80-89	0	3
90+	0	0
Total	4	34

Injury Description	Number of Injuries	
	Severe	Slight
Burns - severe	3	0
Burns - slight	0	12
Overcome by gas, smoke or toxic fumes; asphyxiation	1	20
Breathing Difficulties (Other than 'Overcome by gas, smoke or toxic fumes, asphyxiation)	0	1
Other	0	1
Total	4	34

What actions will be required to improve performance?

- As a means of improving the way we respond to incidents and ensuring that our activities are focussed on preventing further injuries caused by fire the Service's Fatal Fire Policy is in the process of being reviewed. The policy will become the *Fatal Fire and Serious Injuries Reporting Policy*. This is to ensure that where a serious injury occurs, as a result of fire, a thorough internal review will take place and any actions and learning points are monitored and communicated effectively. Internal Serious Injuries Review Reports will then be scrutinised alongside Fatal Fire Review Reports by the Heads of Department at the Interests of Interest Scrutiny group on a bi-monthly basis.
- Service Delivery Managers are encouraging operational crews to increase social media presence to raise fire safety awareness, especially the dangers associated with smoking due to a couple of incidents where serious injuries resulted from fires caused by smoking. Fire stations now have their own Twitter accounts so activity can be specific to the local area:

Halton & Warrington:

a serious injury occurred in Warrington as a result of smoking and the individual failed to respond to the fire alarm sounding due to being medicated. The address had been previously visited, but the individual had been in hospital. Managers are working with the Prevention teams to ensure post-incident home safety visit.

Cheshire West & Chester:

a female suffered serious head and facial injuries at a fire in Knutsford. The fire was smoking related and confined to the individual who had set fire to hair extensions when drunk. This was a late fire call – the individual suffers with her mental health and a mistrust of authority so did not raise the alarm. Her partner forced entry and called for help.

Cheshire East:

a Gas safe engineer responding to a call about a faulty boiler in Knutsford was overcome by fumes when using a solvent weld glue. The gas boiler pilot light is suspected to have ignited the solvent vapours resulting in burns to hands. Officers will engage with Gas Safe to ensure that we learn from this incident.

Performance and Programme Board – Performance Report

Reporting Period Q3		01/04/2018 To 31/12/2018	
Target	280	Actual	275

Indicator: [Number of Accidental Dwelling Fires (ADFs)]

Previous Status	Current Status
	

Summary of Current Performance



At the end of Q3 there has been 275 Accidental Dwelling Fires compared to a target of 280. There has been a decrease of 14 incidents compared to the same period in 2017/18.

Looking at the key risk areas, there have been reductions in the number of kitchen fires from 168 to 149. There has also been a reduction in the number of fires involving occupants over the pensionable age who live on their own, from 58 to 44.

In addition, no fire-fighting action was required at 89 incidents (32%) and no fire spread beyond the room of origin in 254 (92%) of Accidental Dwelling Fires.

Unitary Authority	Total
Cheshire East	95
Cheshire West & Chester	77
Halton	39
Warrington	64
Total	275

Fire Location	Total
Kitchen	149
Bedroom	30
Living room	16
Roof/Roof Space	16
External fittings	7
Other	9
Utility room	10
External structures	7
Bathroom/Toilet	7
Garage	9
Conservatory	3
Corridor/Hall	6
Airing/Drying cupboard	1
Stairs	1
Under stairs (enclosed, storage area)	4
Total	275

Occupancy Type	Was a smoke alarm present? Yes	Did the alarm activate? Yes
3 or more adults with dependant children	100%	59%
Lone person over pensionable age	97%	93%
3 or more adults under pensionable age, no children	94%	59%
Couple one or more over pensionable age, no children	95%	61%
Lone parent with dependant children	93%	68%
Couple with dependant children	85%	67%
Lone person under pensionable age	86%	83%
Couple both under pensionable age with no children	80%	63%
Total	90%	71%

Occupancy Type	No of Incidents	Dwellings	Indexed Score
Lone person over pensionable age	44	56533	288
Lone person under pensionable age	41	73421	207
Lone parent with dependant children	32	82396	144
Couple one or more over pensionable age, no children	28	80559	129
Couple with dependant children	65	347436	69
Couple both under pensionable age with no children	31	167332	69
Other	34	209308	60

The indexed score is a risk score which compares the rate of incidents for each occupancy type against the average rate of accidental dwelling fires within Cheshire. The rate is converted to an indexed score, with the average rate for Cheshire being converted to a score of 100. The indexed score is used rather than the rate so that simple comparisons can be made quarter on quarter and across occupancy types. For example an indexed score of 200 indicates that occupancy type is twice as likely as average to have an accidental dwelling fire.

What actions will be required to improve performance?

- **Warrington**

Whilst performance is good across the board it is acknowledged that Warrington has seen numbers significantly over target during Q3 with 31 fires against a target of 18. In response Warrington operational crews are continuing with a number of Impact Events in high risk areas, which include use of the Kitchen Safety Unit.

A scrutiny meeting has taken place with the Beat Sergeant and Head of Community Enablement Officers (part of the Families & Wellbeing Directorate at Warrington Borough Council) to look at multi-partnership working along with the local Housing Trust which will include kitchen safety and Anti-Social Behaviour in Radley Common (wheelie bin storage etc.).

‘Operation Scattered’ is in effect in the Radley Common area to include our partners Cheshire Police, Housing Trust, Environmental Officers, Prevention Advocates and our On the Streets team. This initiative focusses on kitchen safety and anti-social behaviour. A community event has taken place using the Kitchen Safety Unit at the Community Centre in Radley Common with increased use of our Social Media accounts to high-light the event.

In the Warrington area following the impact event in December there have only been 2 further incidents. During this event over 120 properties were engaged with by our staff and partners. There is another impact event being held in the Latchford area on the 25th February which will also focus on kitchen safety & awareness.

Electrical Safety is also being highlighted via our Twitter and Facebook pages for all areas in the Unitary Area.

- **Safety Central**

Since 1st April 2018 Safety Central has welcomed 4,959 visitors: including 2,472 pupils and 289 adults from 59 mainstream schools; 289 young people and 94 adults from 15 non-mainstream schools and colleges; 696 people and 142 helpers from 53 community groups and 977 stakeholders attending training or meetings. The projected number of visitors for 2018/19 is 6,900. There is on average a 79% improvement in test of key life-skills subject knowledge (up 5% on Q2). 100% of 95 teachers surveyed rated their visit as 'very good' or excellent with all saying that they would visit again – see Infographic attached as Appendix 3.

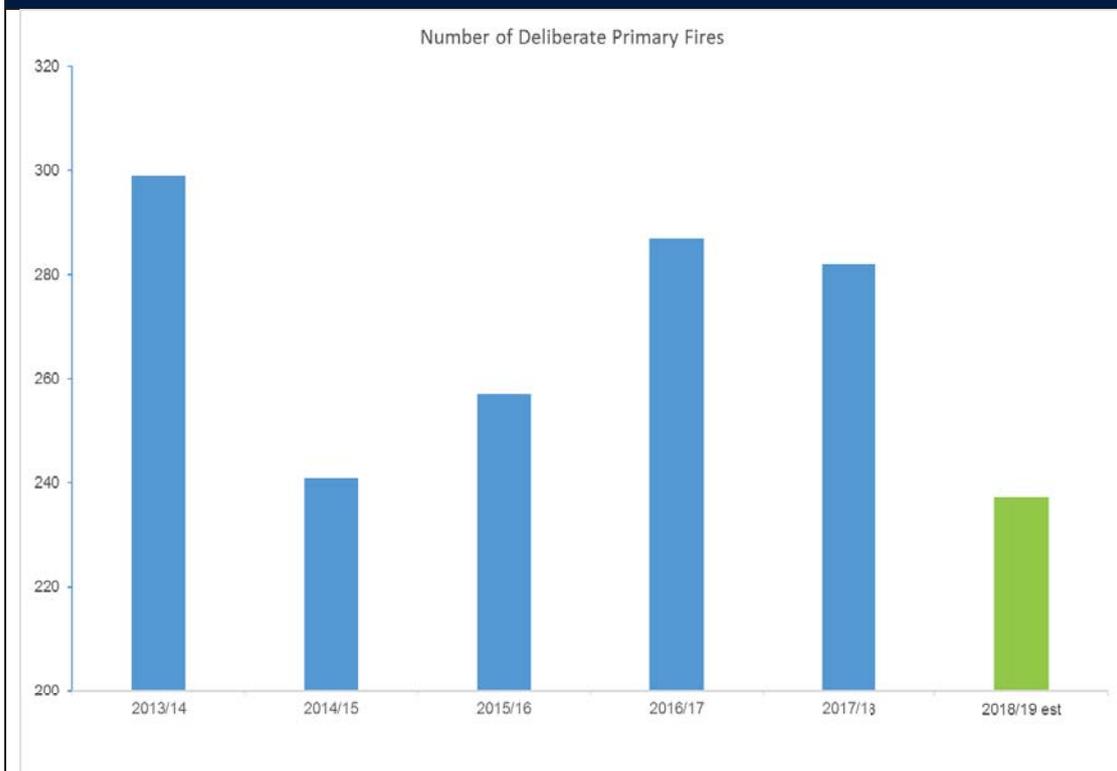
Performance and Programme Board – Performance Report

Reporting Period Q3		01/04/2018 To 31/12/2018	
Target (Primary)	207	Actual (Primary)	188
(Secondary)	790	(Secondary)	697

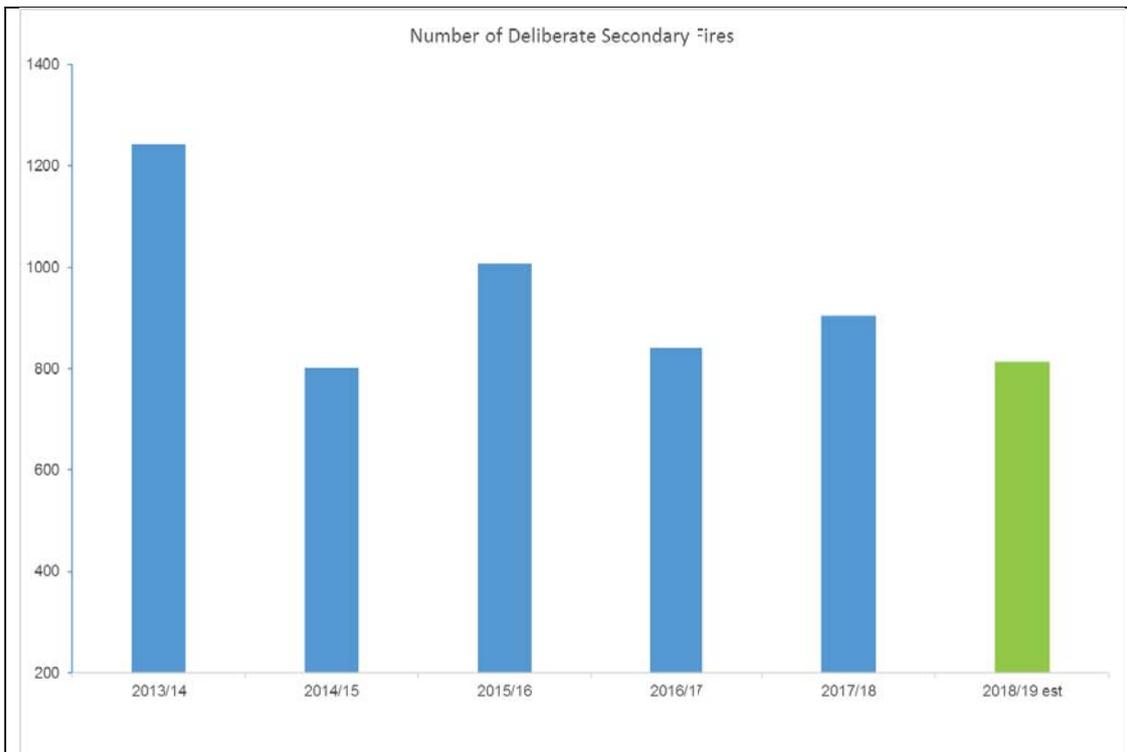
Indicator: [Number of Deliberate Fires]

Previous Status	Current Status
	

Summary of Current Performance



- Overall 188 deliberate primary fires were recorded at the end of Q3, against a target of 207. Overall the station area with the highest number of incidents is Warrington (35).
- Across Cheshire, 95 incidents (51%) involved the deliberate ignition of a road vehicle. Of these, 60 were cars and 19 motorcycles. The station areas with the highest number of incidents involving motor vehicles is Widnes (21).



The number of deliberate secondary fires recorded in Q3 was 697 which is 93 under target. The highest number of incidents have been in Warrington (131) and Ellesmere Port (101), which account for 33.3% of all incidents.

The main property types are loose refuse (182) and Small refuse/rubbish/recycling container, wheelie bins and small reuse/recycling containers (191). The stations with the highest number of fires involving wheelie bin/recycling containers is Warrington (32) followed by Widnes (20).

There has been a steady increase in wheelie bin fires since quarter 1, particularly in Warrington and Widnes.

What actions will be required to improve performance?

- The Digital Media team promoted our safety messages through the Service’s social media channels to good effect throughout the Bonfire period as well as the festival of light and Christmas.
- **Cheshire West & Chester**
Ellesmere Port – a spate of car fires in the area took totals slightly over target. Officers are working with the local police to establish whether these incidents are related to Organised Crime Gang activity.
 The Ellesmere Port town ward accounts for 50 to 60% of the deliberate fires in the local area. Our local authority partners are working with us to identify local groups/causes in Ellesmere Port and Neston who would benefit from YADE (Youth Anti-Social Behaviour Distraction Events) activities. These activities include engagement with Children and Young People through activities such as football and X-Box.
 Local police teams have deployed increased resources in these areas especially over the bonfire period (Operations Proportion and Treacle).

- **Halton**

a bid for Unitary Performance Group funds will support the purchase of Striker cameras (CCTV) to monitor anti-social behaviour in areas where concerns have been identified.

- **Warrington**

Radley Common boxing club has become an instrumental part of the localised strategy to tackle anti-social behaviour, with a big focus on dealing with bin related fires. For many years the area has had issues with young people setting fire to bins and causing anti-social behaviour in the local area. In a partnership project between the Service and Livewire the Radley Common boxing project has been established to engage young people on a Friday evening and provide much needed diversionary activity. The sessions provide an opportunity for parents to help out or assist with sessions improving community cohesion and giving staff members the opportunity to discuss any local issues that have arisen.

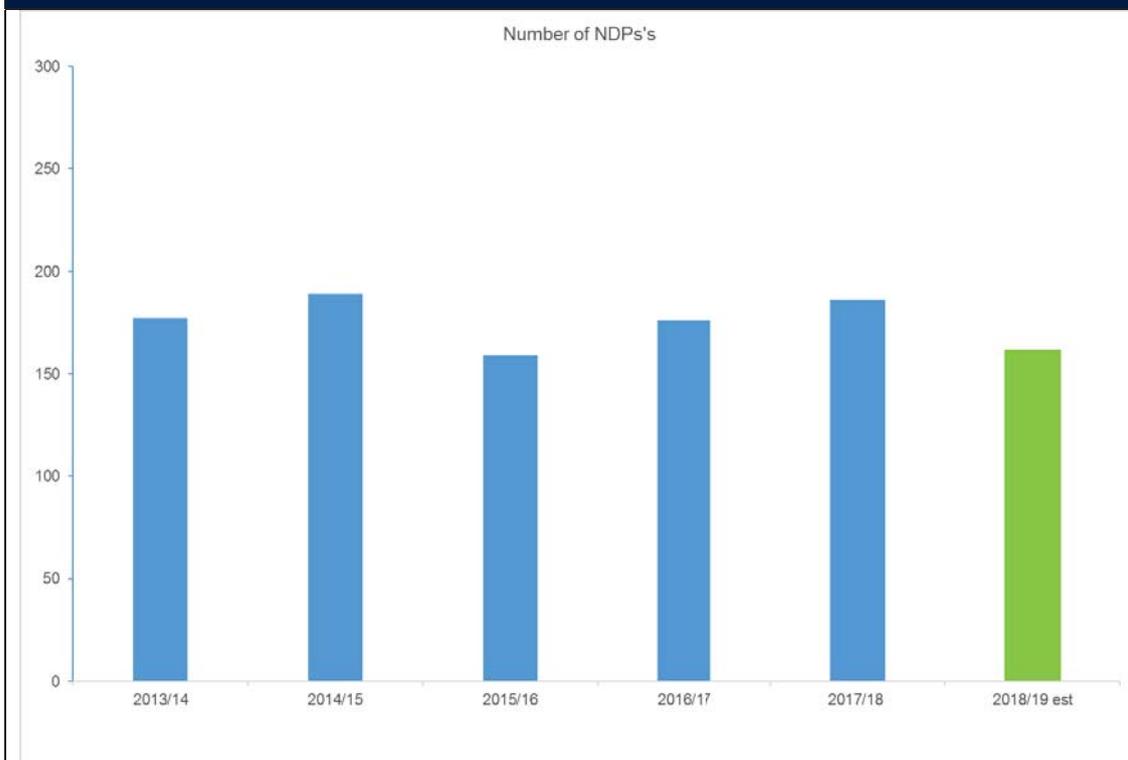
Performance and Programme Board – Performance Report

Reporting Period Q3		01/04/2018 To 31/12/2018	
Target	128	Actual	120

Indicator: [Fires in Non-Domestic Premises]

Previous Status	Current Status
	

Summary of Current Performance



There have been 120 Non-Domestic Premises fires between April and December compared to 143 for the same period last year.

The most significant numbers of fires have been identified in the following building types – with other categories having less than 5 occurrences:

- Retail, Single shop - 15
- Pub/Wine bar/bar - 9

The main causes for fires in Non-Domestic Premises:

- 29 electrical causes - including fluorescent lights, other lights, batteries, wires and cabling.
- 21 industrial equipment including kilns and dryers.
- 14 cooking related incidents - including cookers, deep fat fryers and microwaves.

73% of the 120 fires (88 incidents) were either confined to the item first ignited (66) or involved smoke and heat damage only (12). Whilst a further 19 fires were confined to the room of origin.

Cause	Heat or smoke damage only	Confined to item 1st ignited	Confined to Room of origin	Other
Electrical	3	17	4	5
Industrial Equipment	4	12	3	2
Cooking	0	11	1	2

Unitary Area	Accidental	Deliberate
Cheshire East	29	4
Cheshire West & Chester	37	2
Halton	19	2
Warrington	17	10
Grand Total	102	18

What actions will be required to improve performance?

- **Cheshire West and Chester**

Cheshire - a combined multi-agency event is planned for the 28th February for the city centre. Operational crews will focus the attention of their thematic inspections in city centre premises.

Ellesmere Port – three fires have occurred in shipping containers used by motorcycle scramblers on waste land and have been recorded as Non-Domestic Premises fires. It is thought that these fires may be deliberate. Officers are working with local police to establish ownership of the containers and cause as there is not thought to be any electricity supply to the containers.

- We are in the process of reviewing our risk- based inspection strategy to incorporate additional risk factors to improve targeting methodology.
- Protection officers continue to take enforcement action in accordance with our enforcement management model and prosecute duty holders as appropriate. Where businesses are successfully prosecuted we will use social media and the press to highlight these cases by means of deterrent.
- Our Business Safety Manager has delivered training across the Protection team to encourage the use of the Service’s social media platforms as a method of raising fire safety awareness amongst the local business community. In addition, free fire-risk assessment templates are available on the Service’s website to assist businesses with improving fire safety on their own premises.
- A ‘Business Information Pack’ is now sent to new businesses across the Service Area including all relevant fire safety messages.
- The Service is running a twelve month Sprinkler Campaign to promote the benefits of fire sprinkler systems. The Protection team are working with social landlords across the

Service Area and Onward Homes have confirmed that they will be retro-fitting sprinklers in 3 of their high-rise tower blocks in the Wilmslow area.

- In February the Protection team will be hosting the National Fire Sprinkler Network's Annual General Meeting at Sadler Road which will be attended by key partners, industry experts, campaigners and other fire and rescue services. The Protection team will be sharing best practice by delivering a presentation focussing on our Sprinkler Campaign.

Performance and Programme Board – Performance Report

Reporting Period Q3	01/04/2018 To 31/12/2018
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Target	456	Actual	328
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Indicator: [Number of Automatic Fire Alarms (AFAs) in Non-Domestic Premises]/False Alarms

Previous Status	Current Status
	

Summary of Current Performance

An Unwanted Fire Signal is defined by the British Fire Protection System Association as “any alarm signal other than a genuine fire or test signal”. Any false alarm which is subsequently passed to the fire and rescue service from an Automatic Fire Alarm is classed as an Unwanted Fire Signal.

At the end of Q3 there have been 328 attendances to Automatic Fire Alarms in Non-Domestic Premises against a target of 456.

The station areas with the highest number of calls are Chester, Macclesfield and Warrington which together account for 50% (163) of the overall total.

The main property types for Automatic Fire Alarms are hospitals (113) and nursing, retirement or care homes (98).

The most common reason for the alarm to go off was a fault (126), followed by accidentally/carelessly set off (46).

What actions will be required to improve performance?

- Fire Safety Inspecting Officers continue to work with business representatives where there have been instances of multiple false alarms to reduce calls, e.g. hospitals and residential care homes.
- A review is underway of ‘out of policy attendance’ to scrutinise these incidents to ensure that our policy does not exclude any premises unintentionally.

Performance and Programme Board – Performance Report

Reporting Period Q3		01/04/2018 To 31/12/2018	
Target	A) 30,000 B) 65%	Actual	A) 31,711 B) 66%

Indicator: [A] Number of Safe and Well visits delivered to properties of Heightened Risk]

Previous Status	Current Status
	

Summary of Current Performance

Number of Safe and Well Visits

In Q3 31,711 heightened risk visits have been completed by Prevention and whole-time operational staff. Since 1st April 2018 8.3% of visits have resulted in referrals to partner health agencies – see Infographic attached at Appendix 4. The number of Safe and Well visits within the infographic is different as it includes non-High Risk Data visits and those completed by members of staff who don't have a target but may conduct a Safe and Well visit e.g. On-call staff.

Indicator: [B] Platinum Address Success Rate

Previous Status	Current Status
	

Summary of Current Performance

Platinum Address Success Rate –

“Platinum” – the top 10,000 households identified at most risk from fire.

The percentage of platinum addresses that we have completed a Safe and Well visit is 66% which is above our target of 65% and an improvement on the same period last year.

What actions will be required to improve performance?

- A series of training sessions are scheduled between January and the end of March for Operational Crews and Prevention staff on Phase 3 of the Safe and Well Project. Phase 3 covers the addition of loneliness and isolation (pan-Cheshire) and blood pressure testing (in station areas with high density population, i.e. Ellesmere Port, Chester, Widnes, Runcorn, Warrington, Birchwood, Crewe, Macclesfield and Winsford). The sessions will also cover General Data Protection Regulations and a refresh of Phase 1 and 2 elements. Presently, the intention is to go live with Phase 3 in the first quarter of 19/20.
- We are continuing to see a steady improvement with team and individual performance monitored via weekly performance sheets and challenged where appropriate.

- As shown earlier in the report our highest risk households are single occupancy under 65; single occupancy over 65 and single parent with dependant children, therefore from April 2019 there will be an update to the targeting methodology for Safe and Well visits. As before our core target group will still include over 65s, however in addition to this we will look to target all households with a single adult living at the address, to incorporate all the highest risk households. Supplementary data based on smoking, alcohol consumption, mobility and tenure will be used to stratify the risk.

Performance and Programme Board – Performance Report

Reporting Period Q3		01/04/2018 To 31/12/2018	
Target	1,503	Actual	1,507

Indicator: [Thematic Inspections Completed by Operational Crews]

Previous Status	Current Status
	

Summary of Current Performance

A thematic inspection is a fire safety assessment carried out by operational crews of low-risk Non-Domestic Premises. Thematic inspection targets are allocated to all stations with the exception of On-call. By the end of Q3 a total of 1,507 thematic inspections were completed against a year to date target of 1,503.

Cheshire West & Chester: 473

Cheshire East: 304

Halton and Warrington: 730

Each Unitary Area is on target to achieve the year end target figure of 2,004.

What actions will be required to improve performance?

- The Protection team continue to monitor, identify and inform crews of any emerging trends to ensure that the correct types of premises are targeted for thematic inspections. The focus in Q3 was on fireworks during the Bonfire period and over-stocking in the lead up to Christmas. In Q4 the focus of thematic inspections for operational crews will be small shops, allowing the Protection officers to focus on fire safety audits of higher risk premises.
- The Protection team will continue to follow-up on any issues operational crews find during their visits and take enforcement action where appropriate. Operational crews are also reminded on the importance of referring information via the thematic inspection process during operational fire safety training sessions.

Performance and Programme Board – Performance Report

Reporting Period Q3		01/04/2018 To 31/12/2018	
Target	1,350	Actual	1,152

Indicator: [Fire Safety Audits in Non-Domestic Premises]

Previous Status	Current Status
	

Summary of Current Performance

At the end of Q3 a total of 1,152 Non-Domestic Premises fire safety audits have been completed against a target of 1,350 (85%). Whilst the service has not achieved the target, this is set locally and when compared to the national average Cheshire Fire and Rescue Service carry out over 60% more audits per 100 known premises.

Area	Performance		Staff Capacity and Competence			
	Q3 Target	Q3 Actual	*Level 4	**Level 3	Development	Total Staff
CW&C	450	305	4	1	1	6
Cheshire East	450	463	5	2	0	7
Halton & Warrington	450	384	4	2	0	6

*Level 4 enables Officers to audit at complex premises and **level 3 at less complex premises.

Outcomes of these audits resulted in:

- Educate and Inform – 863
- Notification of Deficiencies – 206
- Action Plan – 66
- Enforcement Notice – 16
- Prohibition – 4
- Alteration Notice – 0

What actions will be required to improve performance?

- Q3 performance demonstrates a significant improvement on Q2 at which point only 67% of the cumulative target for audits had been completed. The number of audits carried out in Q3 alone has almost equalled the combined total of 600 for quarters 1 and 2.
- Individual and team targets have been adjusted and performance continues to be monitored robustly by Protection managers in a bid to ensure year end targets are achieved. Staff continue to move through the development process which is also having a positive impact on performance against target.

Performance and Programme Board – Performance Report

Reporting Period Q3	01/04/2018 To 31/12/2018
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Target	80%	Actual	85%
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Indicator: [10 Minute Standard]

Previous Status	Current Status
	

Summary of Current Performance

Overall 85% of life risk incidents were attended within 10 minutes, which is above the target of 80%. The average attendance time for life risk incidents is 8 minutes and 21 seconds.

Dwellings

89% of dwelling fires were attended within 10 minutes.

There were 29 attendances to dwelling fires which failed the standard. The average attendance time for a first pump to a dwelling fire between April 2018 and December 2018 inclusive was 7 minutes and 27 seconds.

Road Traffic Collisions

81% of Road Traffic Collisions were attended within 10 minutes. Overall there were 39 incidents which failed the standard. The average time from alert to in attendance was 9 minutes 22 seconds.

Reasons for missing the attendance target:

Cheshire West & Chester

Dwelling fires- Three of the five incidents had an estimated time of arrival greater than the 10 minute standard

Road Traffic Collisions – Of the nine incidents, four had an estimated time of arrival of greater than the 10minute standard. A number involved the motorway network and the consequential traffic issues.

Cheshire East

Dwelling fires - Six responses to dwelling fires failed the 10 minute standard - one was due to Mobile Data Terminal failure and on three occasions the predicted time was greater than 10 mins and heavy traffic caused delay in another

Road Traffic Collisions – Of the eight 10 minute standard failures – at two the location was different to that given by the 999 caller, One a predicted attendance greater than 10 mins. One motorway incident had heavy traffic and another Mobile Data Terminal failure,

Warrington

Dwelling Fires – All four incidents that did not meet the standard had an ETA in excess of 10 minutes

Road Traffic Collisions – one incident at Warrington had an ETA in excess of 10 minutes and it took over 11 minutes

Halton

One incident occurred in Halton and this was due to the incorrect address being provided

Call Handling data

North West Fire Control report on the average time taken in seconds from the time of call to the time that the first resource is mobilised, based on all incidents with the following omissions:

- "Any incident classified on Incident Recording System or within North West Fire Control system as 'Other'" – these are predominantly test and admin incidents some of which do not feed into the Fire Service Incident Recording Systems.
- "Chemical Suicide/Gassing Off"
- "Concern for Welfare"
- "Gaining Entry"
- "Calls to Assist Other Agencies Non-Life Risk (i.e. Police or Ambulance)"
- "Suspect Package/White Powder/Bomb"
- "Arson Threat"
- "Threatening to Jump (from height or into water)"
- "Attendance to be made to a non-critical incident within 2 hours."

FRS	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19
Cheshire	105 seconds	104 seconds	105 seconds	105 seconds

What actions will be required to improve performance?

- The Service performs consistently over and above its target in this area demonstrating good performance.
- However, all failures to respond within the ten minute standard continue to be scrutinised by the responsible station manager and Service Delivery Managers to identify areas for improvement to reduce any such failures.

Performance and Programme Board – Performance Report

Reporting Period Q3	01/04/2018 To 31/12/2018		
Target	85%	Actual	62%

Indicator: [On-call Availability]

Nucleus		Primary on-call		Secondary on-call	
Previous Status	Current Status	Previous Status	Current Status	Previous Status	Current Status
					

Summary of Current Performance

- On-call availability for the year to date is 62.22%.

There are significant variations of availability between the differing on-call shift systems, where an:

- On-call pump is part of nucleus crewing, availability is 99.18%, a significant improvement on target
- On-call pump is the primary pump, availability is 60.95%. (e.g. Malpas, Poynton etc.).
- On-call pump is the second pump, availability is 43.31% (e.g. Winsford etc.)

The Individual figures for each pump over the last 12 months are shown in Appendix 5.

	on-call availability	on-call availability as SIU
All OC Pumps (average)	62.22%	69.23%
Nucleus OC Pumps	99.18%	99.57%
Primary OC Pumps	60.95%	70.18%
Secondary OC Pumps	43.31%	48.57%

What actions will be required to improve performance?

In order to address the current shortfall in on-call appliance availability and to strengthen and improve the on-call Duty System, a proposal to introduce six on-call Support Crew Managers positions into the system has been supported by Service Management Team and Cheshire Fire Authority Members. These positions will be managed by the existing on-call Support Station Managers.

The primary focus of the two years pilot is to increased availability across on-call stations during weekdays, predominantly 0900-1700hrs. It is anticipated that on-call availability will increase by up to 5% using this model.

As well as providing operational cover and improving appliance availability, additional areas of focus will include recruitment, retention of staff, training/fire fighter safety, development to competence and staff engagement.

The Service continues to support the National Fire Chief's Council on-call national recruitment campaign 'Need More'. Using eye catching publicity and real-life stories from on-call firefighters, it gives an insight into what the role entails, what recruits can expect and enables people to directly contact their local fire and rescue service to express an interest in available roles. This approach is in addition to local campaigns coordinated by the service and supported heavily by local crews.

Currently there are 62 individuals from across the county that are going through the various stages of the recruitment process. This is the highest number the service has seen for a considerable period of time, and demonstrates that the revised approach to recruitment is proving to be effective.

Performance and Programme Board – Performance Report

Reporting Period Q3		01/04/2018 To 31/12/2018	
Target	4.13	Actual	3.17

Indicator: [Average Days/Shifts Lost to Sickness]

Previous Status	Current Status
	

Summary of Current Performance

The Q3 statistics show that performance for operational staff is strong with the Service currently under target (2.33) for this group, the performance for non-operational staff has shown an increase in days lost when compared with Q3 last year, and for this staff group during Q3 we are currently above target (6.22). This appears to be as a result of a relatively small number of support staff being on long term sick during the 3 quarters with serious, long term conditions of long durations. In addition the support staff who have left as a result of Blue Light Collaboration, historically had lower levels of sickness than the support staff departments which remain within the Service meaning that average days lost may now appear higher.

Overall across all staff groups the Service is still under target for the quarter.

Staff Category	# of sickness days/shifts	Headcount	Average working days lost to sickness per person
Whole-time	868	433	2.0
On-call	833	297	2.8
Uniform Total	1701	730	2.33
Support	1250.5	201	6.22
Q3 Total	2951.5	931	3.17

Sickness is also monitored at a national level and a report is compiled by Cleveland Fire & Rescue Service on a quarterly basis. At the time of writing the Q3 figures were not available however the Q2 national results showed that Cheshire continues to perform at a very high level across the UK, particularly in respect of whole-time operational staff, achieving the lowest level of sickness days lost of all fire and rescue services.

What actions will be required to improve performance?

- Monthly scrutiny at the Attendance Management meetings continues to be applied to all absence cases to ensure that the appropriate interventions are put in place to ensure staff are given adequate support to assist with their return to the workplace.
- Quarterly contract meetings with Occupational Health Unit are also ongoing to monitor service delivery and performance.
- The Human Resource Business Partner team will continue to undertake some specific analysis of the absence data for non-operational staff to determine if any specific actions/interventions can be applied to reduce the upward trend in absence for this staff group. This was undertaken for quarter 2 and identified that 48% of non-operational sickness days lost in Q1 and Q2 were as a result of 3 members of staff.
- Development of wellbeing initiatives to reduce absence are ongoing coupled with a desktop review to assess effectiveness of Service's existing support mechanisms in respect of wellbeing (College of Policing Wellbeing Framework).

Performance and Programme Board – Performance Report

Reporting Period Q3	01/04/2018 To 31/12/2018
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Target	24	Actual	37
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Indicator: [Working Days Lost to Injury]

Previous Status	Current Status
	

Summary of Current Performance

The number of days lost as a result of injury is already greater than in the whole of the previous reporting year. This is as a result of several injuries resulting in prolonged periods of absence as set out below:

- One person suffered a back injury rising from a resting chair (15 working days)
- One person suffered a broken finger (5 Days)
- One person suffered a back injury at training centre (38 days in total with 15 working days)

The trend in Q3 is however in line with the target for the quarter. There were four duty days lost as a result of one accident in this quarter.

What actions will be required to improve performance?

The Service Health Safety and Well-Being Committee continues to monitor accident trends in an attempt to identify any causes of accidents where we can take proactive measures to prevent future occurrences. However one serious accident can skew the figure considerably.

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Performance at the end of December 2018



Since April 1st we have welcomed a total of **4,959** visitors including:

2,472 pupils and **289** adults from **59** mainstream schools

289 young people and **94** adults from **15** non-mainstream schools and colleges

696 people and **142** helpers from **53** community groups

977 stakeholders attending training or meetings

"Very grateful to the team for adapting to the needs of different pupils"



25 volunteers are currently active and

6 more have applied or are in training. A total of

2,646 volunteer hours have been logged this year.



Pre-visit



Post-visit

Average **improvement** of **79%** in test of key lifeskills subject knowledge

"Absolutely fantastic"



"Excellent day! Lots of fantastic real-life learning situations."



127 schools and groups in total

"The young people really enjoyed the activities and learnt a lot about keeping safe"

"Already booked for next year. Very useful to my Year 6 as they start to become more independent."



Visitor experience

100% of 95 teachers rated their visit as 'very good' or 'excellent' and **100%** would visit again.

93% of 930 pupils and students gave their visit **4 or 5** out of 5.



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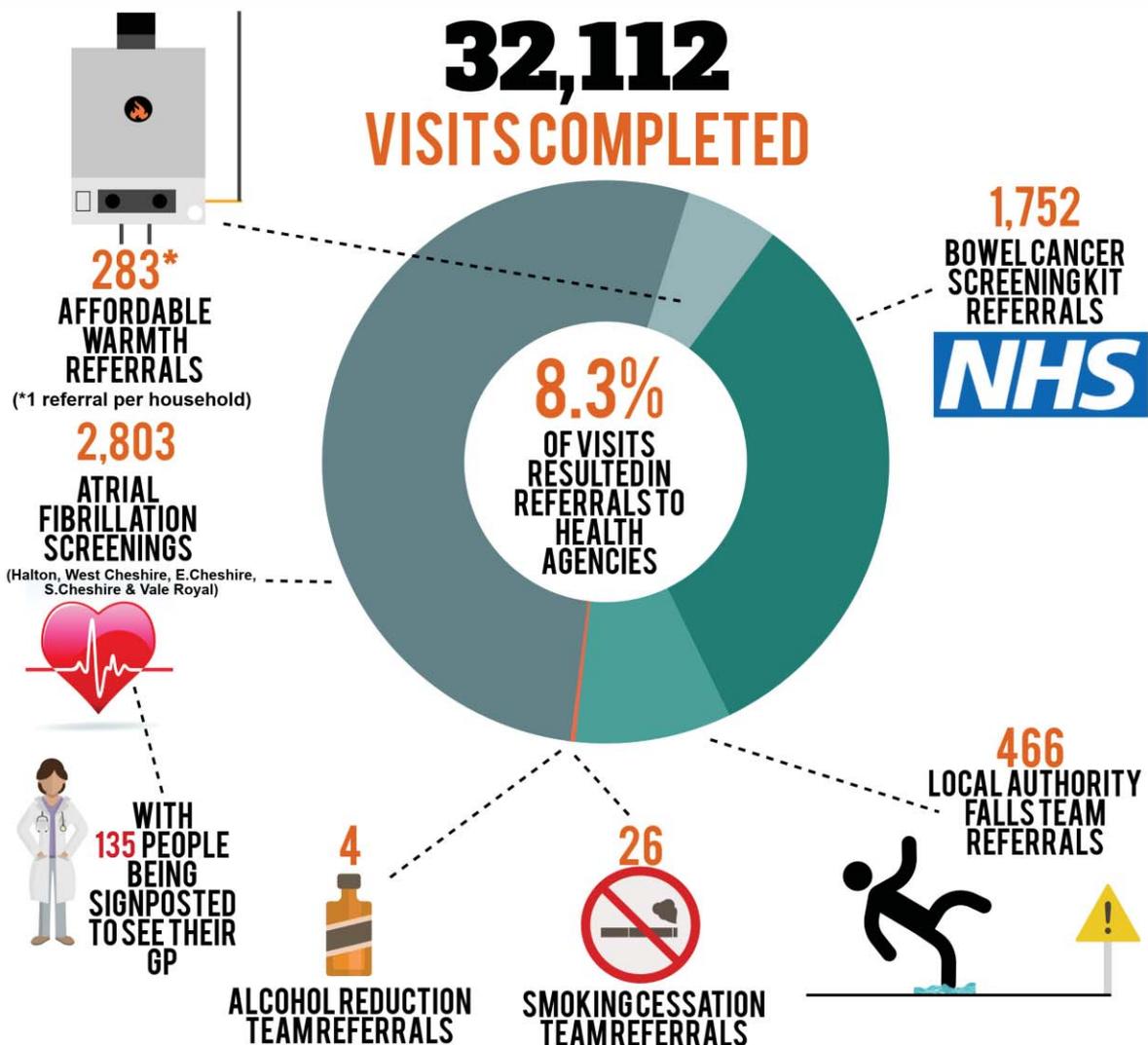


SAFE AND WELL

Initiative

1ST APRIL 2018 – 31ST DECEMBER 2018

Cheshire Fire and Rescue Service has a proud record of delivering successful fire safety, road safety and youth engagement initiatives. This excellent record is now being extended and expanded to provide help to our health partners for some key local health priorities through Safe and Well visits, which the Service commenced on 1st February 2017.

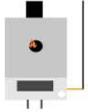


SAFE AND WELL Initiative

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SAFE AND WELL UNITARY OVERVIEW

UNITARY AREA	VISITS COMPLETED <small>*FIGURES REPRESENT THE PHYSICAL LOCATION OF THE VISIT/REFERRAL</small>	% TO REFERRAL	FALLS REFERRAL 	NHS BOWEL CANCER SCREENING KIT REFERRAL 	SMOKING CESSATION REFERRAL 	ALCOHOL REDUCTION TEAM REFERRAL 	ATRIAL FIBRILLATION SCREENINGS 	AFFORDABLE WARMTH REFERRAL 
 Cheshire East Council	11,680	10.3%	163	801	2	1	1658	152
 Cheshire West and Chester	10996	6.8%	163	463	9	1	693	88
 HALTON BOROUGH COUNCIL	3782	6.6%	65	139	1	0	452	14
 Warrington Borough Council	5654	8.3%	75	349	14	2	0	29

ON CALL AVAILABILITY																
Shift System*	Appliance Location	Call Sign	Quarter 4			Quarter 1			Quarter 2			Quarter 3			Percentage	Rolling 12 month Percentage as SIU
			January 2018	February 2018	March 2018	April 2018	May 2018	June 2018	July 2018	August 2018	September 2018	October 2018	November 2018	December 2018		
Nucleus OC	Birchwood	E02P1	99.93%	100.00%	100.00%	99.65%	100.00%	99.10%	100.00%	99.60%	100.00%	99.60%	100.00%	99.73%	99.80%	99.93%
Nucleus OC	Macclesfield	E19P1	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	96.77%	99.73%	99.73%
Nucleus OC	Wilmslow	E23P1	93.01%	97.92%	100.00%	100.00%	94.09%	96.53%	98.52%	98.66%	98.75%	99.73%	98.06%	99.13%	97.86%	98.04%
Primary OC	Nantwich	E12P1	93.75%	90.44%	89.28%	84.10%	91.87%	94.76%	95.23%	94.19%	92.40%	95.73%	96.11%	96.47%	92.89%	92.89%
Primary OC	Middlewich	E26P1	91.83%	84.67%	91.87%	87.33%	68.88%	77.99%	71.07%	63.51%	79.03%	82.06%	78.33%	75.47%	79.28%	87.60%
Primary OC	Sandbach	E16P1	90.05%	94.83%	89.31%	86.04%	76.18%	75.97%	74.33%	69.72%	68.51%	78.60%	67.60%	72.08%	78.51%	84.37%
Primary OC	Poynton	E22P1	78.39%	86.20%	82.09%	81.88%	83.94%	76.11%	75.84%	69.99%	72.53%	68.58%	74.13%	84.71%	77.82%	81.58%
Primary OC	Alsager	E14P1	79.81%	85.57%	78.70%	81.63%	65.73%	81.49%	73.29%	72.55%	77.22%	57.43%	72.33%	77.15%	75.12%	81.45%
Primary OC	Bollington	E20P1	86.49%	79.43%	75.27%	67.95%	55.71%	56.01%	62.57%	59.85%	59.10%	70.43%	66.01%	48.99%	65.57%	77.31%
Primary OC	Malpas	E11P1	79.60%	75.74%	76.21%	61.91%	59.58%	59.97%	61.90%	48.72%	59.38%	58.90%	57.74%	69.46%	64.04%	74.02%
Primary OC	Audlem	E13P1	78.06%	72.88%	55.71%	64.79%	57.19%	54.62%	55.68%	42.34%	62.08%	65.39%	76.91%	64.42%	62.40%	72.27%
Primary OC	Holmes Chapel	E17P1	56.45%	61.79%	67.91%	62.85%	54.64%	76.22%	49.80%	55.01%	55.90%	50.67%	53.68%	52.52%	58.05%	70.78%
Primary OC	Tarporley	E10P1	58.10%	49.03%	51.75%	49.06%	49.16%	49.79%	57.53%	47.61%	49.20%	61.76%	54.97%	53.49%	52.67%	69.39%
Primary OC	Knutsford	E24P1	51.98%	30.13%	30.34%	45.56%	41.97%	56.18%	55.28%	43.85%	53.09%	55.65%	49.24%	32.39%	45.54%	57.59%
Primary OC	Stockton Heath	E03P1	57.12%	59.82%	53.73%	47.05%	44.86%	48.75%	32.83%	47.58%	39.58%	45.16%	39.10%	21.03%	44.61%	53.48%
Primary OC	Frodsham	E06P1	42.41%	25.04%	17.31%	22.01%	18.75%	26.42%	23.66%	8.40%	22.95%	28.43%	19.69%	10.75%	22.12%	32.36%
Secondary OC	Northwich	E25P2	64.99%	67.45%	79.74%	59.62%	66.53%	59.76%	63.98%	54.91%	58.02%	59.61%	55.80%	51.41%	61.81%	71.03%
Secondary OC	Macclesfield	E19P2	65.86%	64.66%	56.52%	54.34%	49.09%	57.08%	49.13%	41.70%	56.53%	90.39%	60.21%	49.43%	57.87%	64.41%
Secondary OC	Penketh	E29P2	69.66%	60.19%	59.34%	54.86%	56.49%	42.81%	40.76%	48.62%	46.22%	51.68%	47.05%	46.34%	51.98%	56.86%
Secondary OC	Runcorn	E05P2	66.73%	59.19%	59.74%	40.07%	34.61%	30.56%	36.49%	23.56%	38.72%	28.97%	30.87%	17.44%	38.79%	42.28%
Secondary OC	Winsford	E27P2	42.27%	47.58%	45.97%	38.47%	16.06%	23.02%	22.01%	13.00%	16.32%	21.51%	34.13%	11.02%	27.45%	31.30%
Monthly Availability			70.97%	68.13%	66.95%	63.67%	59.01%	62.15%	61.14%	55.88%	60.46%	63.67%	61.38%	55.69%	64.52%	71.46%
Quarterly Availability			71.43%			63.77%			60.46%			62.42%				
Quarterly Availability as SIU			78.12%			70.16%			68.16%			69.29%				

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CHESHIRE FIRE AUTHORITY

MEETING OF: PERFORMANCE AND OVERVIEW COMMITTEE
DATE: 27 FEBRUARY 2019
REPORT OF: DIRECTOR OF GOVERNANCE AND COMMISSIONING
AUTHOR: LOUISE WILLIS/CHRIS ASTALL

SUBJECT: INTERNAL AUDIT PLAN 2018-19 – QUARTER 3
PROGRESS REPORT

Purpose of Report

1. To present to Members, the internal Audit Plan 2018-19, Quarter 3.

Recommended: That Members

- [1] Review and note the attached report; and
- [2] Highlight any specific audit findings that they would like to hear more about.

Background

2. Internal audit is an assurance function that provides an independent opinion to the Authority on the organisation's control environment.
3. Recommendations made by Merseyside Internal Audit (MIAA) are presented formally in a report to relevant senior officers. Each recommendation is prioritised as Critical, High, Medium, or Low to reflect the assessment of risk. It is a management responsibility to respond to the recommendations and identify actions that can be taken to mitigate or reduce the risk.
4. Terms of reference and final audit reports are reviewed by senior officers and significant risks identified may be referred to the Risk Management Board (RMB). This Committee receives quarterly updates for the purpose of monitoring and scrutiny of progress against the internal Audit Plan.
5. Delivery against recommendations is monitored and tracked on the Service's Cheshire Planning System (CPS).

Information

6. The Progress Report is attached to this report at Appendix 1. The audit activity for this quarter is summarised below:-
 - Operational Training – **Final Report**
 - Safe and Well (Information Governance) – **Final Report**
 - Station Management Framework – **Final Report**

- Financial Systems User Acceptance Testing (UAT) **Phase 1 Briefing**
- Performance and Data Quality – **Internal Quality Assurance**

7. There have been no requests for change during the Quarter 3 reporting period.

Financial Implications

8. Internal audit is an outsourced service funded from base budget. Any additional financial implications arising from internal audit recommendation are assessed individually as part of the management response to final audit reports.

Legal Implications

9. Legal implications are considered when audit reports are presented to senior managers.

Equality and Diversity Implications

10. There are no differential impacts on any particular section of the community arising from this report.

Environmental Implications

11. There are no specific impacts on the environment arising from this report.

CONTACT: DONNA LINTON, DEMOCRATIC SERVICES, CLEMONDS HEY, WINSFORD TEL [01606] 868804

BACKGROUND PAPERS: Information provided by Mersey Internal Audit Agency (MIAA)

Appendix 1 – Internal Audit Plan 2018-19 - Quarter 3 Progress Report

Internal Audit Progress Report Performance and Overview Committee (27th February 2019)

Cheshire Fire Authority / Fire & Rescue Service

Contents

1. Introduction
2. Key Messages for Committee Attention
3. Work in progress and planned
4. Request for Audit Plan Changes

Appendix A: Risk Classification and Assurance Levels

Appendix B: Contract Performance

Appendix C: Critical & High Level Risk Action Plans

1. Introduction

This progress report provides an update to the Performance and Overview Committee in respect of the assurances, key issues and progress against the Internal Audit Plan for 2018/19. Comprehensive reports detailing findings, recommendations and agreed actions are provided to the organisation, and are available to Committee Members on request. In addition a consolidated follow up position is reported on a periodic basis to the Performance and Overview Committee.

2. Key Messages for Audit Committee Attention

Since the previous meeting of the Performance and Overview Committee we have completed the following reviews:

- Operational Training – Substantial Assurance
- Safe and Well – Substantial Assurance
- Station Management Framework – Substantial Assurance

Our work in relation to Performance and Data Quality is undergoing internal quality assurance prior to draft report issue. Our financial systems work focusing on the User Acceptance Testing within Oracle Fusion as at December 2018 and February 2019 is complete. However as Cheshire Fire and Rescue Service are not joining the Multi Force Shared Service (MFSS) at this time this will no longer be reported to this committee.

The remaining work in relation to NFI data matching and Vehicle Fleet is at planning stage.

The table below identifies the key areas from our work and the actions to be delivered by management. Appendix A provides the categorisation of assurance levels and risk ratings and Appendix B confirms performance against plan. Details of High Level actions agreed are provided in Appendix C.

Title	Assurance Level	Recommendations	
Operational Training	Substantial	0 x Critical 0 x High	2 x Medium 1 x Low
Management Sponsor: Stewart Forshaw, Head of Operational Policy and Assurance / Area Manager.			
Objective: To undertake a review of operational training, ensuring that training is appropriately determined, delivered and monitored.			
Summary:			

Title	Assurance Level	Recommendations
<p>In accordance with the Fire and Rescue Services Act 2007 and the Health and Safety at Work etc. Act 1974, training is clearly a high priority for CFRS. This was apparent from a review of relevant documentation and discussions with the Head of Operational Policy and Assurance / Area Manager, the Operational Training Manager, the Command Training Manager and Station Managers tasked with specific training related responsibilities. Although discussions indicated a range of oversight and monitoring activity, there is a lack of clarity over where strategic oversight takes place and how this is evidenced. This has been recognised and the Service plans to report training information to the Performance and Overview Committee.</p> <p>The Operational Training Strategy drives operational training and is supported by a number of underpinning training policies which were regularly reviewed. Contents of the new Fire and Rescue National Framework for England and recently-issued National Operational Guidance mean that it is timely to undertake a thorough review of the Strategy and recommendations have been made accordingly. The Annual Delivery plan was found to reflect the contents of the Operational Training Strategy, and our review of training for whole-time and on-call staff, including apprentices and those responsible for incident command, showed that records were accurate and training was delivered on a timely basis.</p> <p>A Transition Plan has been prepared as a result of the impact of the construction of the new training centre at Sadler Road on existing training facilities and a Station Manager is currently seconded to lead the planning and delivery process, reporting directly to the Area Manager, Operational Policy and Assurance Department. The plan encompasses planned actions and delivery dates. These were found to be largely adhered to and updated on a regular basis. There was evidence that actions indicated as being complete had occurred.</p> <p>Key areas agreed for action:</p> <p>Two medium level risk recommendations were agreed:</p> <p>A summarised report providing assurance in respect of Training Plan delivery will be presented at the Performance and Overview Committee annually in the future, with the 2018/19 report being the first.</p> <p>The Training Strategy will be re-drafted, and reviewed by the Service Management Team, ensuring that:</p> <ul style="list-style-type: none">• The Names of Operational Policies are accurately reflected;• There is reference to the need to align operational training policies to NOG based standard operating procedures;• It is sufficiently specific regarding how compliance will be evidenced; and• Continues to reflect the ethos and values of CFRS.		

Title	Assurance Level	Recommendations	
<p>One low level risk recommendation was agreed in relation to the Breathing Apparatus Training Policy which will be updated to include the agreed practice of extension of a 3-month period for wearers who may have missed a refresher course following a professional assessment.</p>			
<p>Safe and Well: Process / Information Governance Review</p>	<p>Substantial</p>	<p>0 x Critical 0 x High</p>	<p>8 x Medium 1 x Low</p>
<p>Management Sponsor: Nick Evans, Head of Prevention</p>			
<p>Objective: To provide assurance on the effectiveness of the internal control arrangements and the Safe and Well systems and processes. Our work focused on compliance with the requirements of GDPR, whilst also considering the collecting, processing, storing and disposal of data obtained through Safe and Well visits.</p>			
<p>Summary:</p>			
<p>In December 2016, the Fire Authority, NHS England and the four Councils within Cheshire signed an agreement enabling CFRS to undertake free Safe and Well visits. The visits are targeted at those deemed to be the highest risk, namely people aged 65 and over and those being referred by partner agencies to CFRS because they are considered to be a particular risk.</p>			
<p>The current Integrated Risk Management Plan (IRMP) states that CFRS have a target to deliver 40,000 Safe and Well visits in 2018/19, with visits undertaken by both operational fire fighters and the prevention team (advocates).</p>			
<p>The Safe and Well visits incorporate traditional Home Fire Safety checks including the fitting of smoke alarms and each of the additional services listed below are offered subject to householder consent.</p>			
<p><i>Safe and Well visit includes the following additional services:</i></p>			
<ul style="list-style-type: none"> • Slips, trip and falls; • Smoking cessation; • Alcohol reduction; • Bowel Cancer Screening; • Fuel poverty; and • Atrial Fibrillation (except Warrington). 			
<p>There is possibility of additional two services being added in the future.</p>			
<p>The Safe and Well programme is a fantastic initiative delivering impressive results for the health and wellbeing of the local population. We acknowledge the hard work and commitment of all staff involved in the development and delivery of the programme, working in partnership with health and council colleagues.</p>			

Title	Assurance Level	Recommendations
<p>Our review confirmed that the Safe and Well information was securely retained within the Cheshire Fire Rescue Management Information System (CFRMIS), with restrictions on access to data. Safe and Well users are informed via data privacy notices that their data may be retained on Police systems. Privacy statements also include details of how data will be shared and used on the internet.</p> <p>All details obtained during the Safe and Well visit are recorded on a tablet portable device, we confirmed the data security management arrangements in place and the restrictions on access and download controls.</p> <p>We have made a number of recommendations to strengthen the existing control arrangements in relation to compliance with updated GDPR requirements, data privacy and consent.</p> <p>Key areas agreed for action:</p> <p>Eight medium level risk recommendations were agreed with management:</p> <ul style="list-style-type: none"> • Update of the statement within the Safe and Well Booklet to specifically signpost the relevant area of the website for Data Privacy. • Seek confirmation from the current Business Intelligence Manager to ensure that any addresses that have refused Safe and Well visit are excluded for two years as documented in the Safe and Well Policy. • To check the currency of CFRS’s overarching policy and e-learning resources and where they are not Data Protection Act 2018 /GDPR compliant this will be updated as a priority. In addition there will be specific guidance for staff outlining all matters that are Safe and Well related. • Review the wording within the Safe and Well booklet in relation to data retention. • Ensure appropriate processes are put into place to ensure that records are removed when requested. Also ensuring that all associated records held by CFRS are removed. • There is an SLA in place for the Information Governance department to meet annually with departmental /system owners to review their information governance arrangements. Shared Services Information Governance should develop the process, train Prevention Managers and staff and program the audits. • Review the length of time that documents are being retained ensuring compliance with the CFRS policies and that of GDPR and also progress the development of an automated deletion tool. • In relation to a Fire and Rescue Service Risk Assessment (FRSRA) undertaken during a safe and well visit the team will liaise with the Information Manager to review 		

Title	Assurance Level	Recommendations	
<p>the process to ensure there is a record that we asked for/ were given consent or at least record the rationale for sharing without consent.</p> <p>One low level recommendation was agreed in relation to update of the customer questionnaire to assist in obtaining confirmation of consent. namely:</p> <ul style="list-style-type: none"> • Did you provide consent for the services received? • Were you provided with a copy of the data statement? 			
<p>Station Management Framework (SMF)</p>	<p>Substantial</p>	<p>0 x Critical 0 x High</p>	<p>1 x Medium 1 x Low</p>
<p>Management Sponsor: Steve Barnes, Head of Service Delivery</p>			
<p>Objective: To provide assurance on the effectiveness of the controls and processes in place at a local level for compliance with the Station Management and Audit Framework.</p>			
<p>this review included a review of the effectiveness of controls in place at a sample of four stations:</p>			
<ul style="list-style-type: none"> • Runcorn (WDS); • Northwich (DCS); • Birchwood (NDS); and, • Holmes Chapel (OCS). 			
<p>Summary:</p>			
<p><u>Roles and Responsibilities</u></p>			
<p>The Station Management Framework clearly demonstrates all of the key roles and responsibilities across the Service. The Framework states that the responsibilities for ensuring compliance with the Framework sits with all staff within the stations, from firefighters completing routine tasks, with oversight by Crew and Watch Managers, through to the Station Manager.</p>			
<p>Responsibility for the annual review of the Framework and assurance in respect of compliance and implementation sits with the Head of Service Delivery. At the time of our audit, the Framework had recently been updated with a last review date of October 2018 and a future review due date of October 2019.</p>			
<p>At each of the four stations we visited as part of our testing it was confirmed that all had the relevant and most up to date forms covering the 'daily', 'weekly', 'monthly' and 'quarterly' checks, and these were held on file. The standards were visible and made available to staff</p>			

Title	Assurance Level	Recommendations
<p>and from our review we found that the requirement to adhere to the Framework and its supporting standards was well embedded at a Station level.</p>		
<p><u>Compliance with the SMF requirements</u></p>		
<p>As part of our audit testing, each of the four stations were visited and supporting evidence was reviewed across the key elements of the Framework. All visits were undertaken week commencing the 3rd of December 2018 and supporting records covered the period of 1st September 2018 to the date of the site visit.</p>		
<p>Audit review of available evidence to demonstrate the level of compliance with the overarching requirements of the SMF confirmed overall good levels of compliance with a limited number of partially compliant standards where there was a process in place but a significant number areas of non-compliance noted.</p>		
<p>We reviewed the completion of daily, weekly and monthly SMF sheets during September, October and November 2018. Overall, there was high level of compliance across all four stations. However, a number of instances were noted where tasks had not been evidenced as completed or signed off by the individual carrying out the checks. Watch Managers should be reminded of the need to review that all tasks are complete for each shift. In addition, it should be ensured that sign off is obtained by the Station Manager where applicable.</p>		
<p><u>Standards</u></p>		
<p>A sample of 13 'Standards' within the Station Management Framework were selected and records were reviewed to ensure that the specific checks have been carried out. Overall from the records reviewed there was a strong level of compliance across the standards. For example, this included recording of station specific activities, retention of SMF documentation and all relevant incident information is recorded in the Station Handover Book. There were some areas identified from testing that require improvement, and a low level risk recommendation was agreed with management to address.</p>		
<p>Key areas agreed for action:</p>		
<p>One medium level risk recommendation was agreed to remind Watch Managers of the need to review SMF sign off forms to ensure that all tasks have been fully completed and evidenced. These should be signed off on the same day of the checks being carried out.</p>		
<p>One low level risk recommendation to develop an action plan to address the specific compliance issues has been taken forward by the Holmes Chapel, Birchwood and Runcorn stations. Assurance will be sought in February from the Station Managers that these issues have been addressed and compliance will be monitored long term.</p>		

3. Work in Progress and Planned

The following pieces of work are in progress and/or planned and will be reported to Committee following completion:

Work In progress

- Risk Management Board attendance
- Performance and Data Quality – Internal Quality Assurance

Work planned

- National Fraud Initiative – Awaiting Match data
- Vehicle Fleet – Planning
- HMICFRS – Awaiting confirmation of audit support requirements

4. Request for Audit Plan Changes

It is recognised that we may need to update the audit plan during the year as different risks emerge. Any proposed changes to the plan are discussed with the Service Management Team and this will be reported to the Performance and Overview Committee to facilitate the monitoring process.

- There are no proposed amendments to the audit plan for consideration by the committee.

Appendix A: Assurance Definitions and Risk Classifications

Level of Assurance	Description
High	There is a strong system of internal control which has been effectively designed to meet the system objectives, and that controls are consistently applied in all areas reviewed.
Substantial	There is a good system of internal control designed to meet the system objectives, and that controls are generally being applied consistently.
Moderate	There is an adequate system of internal control, however, in some areas weaknesses in design and/or inconsistent application of controls puts the achievement of some aspects of the system objectives at risk.
Limited	There is a compromised system of internal control as weaknesses in the design and/or inconsistent application of controls puts the achievement of the system objectives at risk.
No	There is an inadequate system of internal control as weaknesses in control, and/or consistent non-compliance with controls could/has resulted in failure to achieve the system objectives.

Risk Rating	Assessment Rationale
Critical	Control weakness that could have a significant impact upon, not only the system, function or process objectives but also the achievement of the organisation's objectives in relation to: <ul style="list-style-type: none"> the efficient and effective use of resources the safeguarding of assets the preparation of reliable financial and operational information compliance with laws and regulations.
High	Control weakness that has or is likely to have a significant impact upon the achievement of key system, function or process objectives. This weakness, whilst high impact for the system, function or process does not have a significant impact on the achievement of the overall organisation objectives.
Medium	Control weakness that: <ul style="list-style-type: none"> has a low impact on the achievement of the key system, function or process objectives; has exposed the system, function or process to a key risk, however the likelihood of this risk occurring is low.
Low	Control weakness that does not impact upon the achievement of key system, function or process objectives; however implementation of the recommendation would improve overall control.

Appendix B: Contract Performance

The primary measure of your internal auditor’s performance is the outputs deriving from work undertaken. The plan has also been discussed with lead officers to determine the appropriate timing of individual work-streams to accommodate priorities, availability, mandatory requirements and external audit views.

General Performance Indicators

The following provides some general performance indicator information to support the Committee in assessing the performance of Internal Audit.

Element	Status	Summary
Progress against plan	Green	Audit reviews are on track in terms of planned completion.
Timeliness	Green	Generally, reviews are progressing in line with planned delivery.
Qualified Staff	Green	MIAA Audit Staff consist of: <ul style="list-style-type: none"> • 65% Qualified (CCAB, IIA etc.) • 35% Part Qualified
Quality	Green	MIAA operate systems to ISO Quality Standards. The External Quality Assessment, undertaken by CIPFA, provides assurance of MIAA’s compliance with the Public Sector Internal Audit Standards.

Overview of Output Delivery

REVIEW TITLE	PLANNED REPORTING TO P & O				ASSURANCE LEVEL	Commentary
	Sep	Nov	Feb	April		
CORPORATE SERVICES						
Financial Systems: Oracle Fusion			✓		N/A	Complete
Local Code of Corporate Governance		✓		•		Working group attendance / support
National Fraud Initiative				•		Await data matches
PROTECTION & ORGANISATIONAL PERFORMANCE						
Performance Reporting			•			QA Draft Report
HMICFRS				•		Call off Days
SERVICE DELIVERY / OPERATIONAL POLICY & ASSURANCE						
Operational Training		✓			Substantial	Complete
Vehicle Fleet				•		Planning
Station Management Framework			✓			Complete
PREVENTION						
Safe and Well		✓			Substantial	Complete
FOLLOW-UP AND CONTINGENCY						
Follow-up	✓					Final Report
Contingency		✓		•		Risk Management Board

Key

o = Planned • = In Progress

✓ = Complete

Appendix C: Critical / High Risk Recommendations

There were no Critical or High Risk recommendations raised within any of the finalised report this period.

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CHESHIRE FIRE AUTHORITY

MEETING OF: PERFORMANCE AND OVERVIEW COMMITTEE
DATE: 27TH FEBRUARY 2019
REPORT OF: DIRECTOR OF TRANSFORMATION
AUTHOR: MELANIE HOCKENHULL

SUBJECT: EQUALITY AND INCLUSION UPDATE

Purpose of Report

1. To provide an overview of key equality, diversity and inclusion developments within the Service; the recent progress made against the Equality, Diversity and Inclusion Action Plan; and to highlight upcoming work.

Recommended: That

- [1] Members note the progress to date and highlight any issues for further discussion or clarification.

Background

2. Under the Equality Act 2010, public sector organisations including Cheshire Fire and Rescue Service have a duty to: eliminate discrimination; advance equality of opportunity; and foster good relations between different groups (“public sector equality duty”).
3. In order to fulfill the public sector equality duty, the Service currently has in place an Equality, Diversity and Inclusion Strategy (‘the Strategy’) for the period 2017-2020. The Strategy includes an associated Equality Action Plan, which is updated annually in April and approved by the Service’s Equality Steering Group.
4. The purpose of the Strategy is to provide strategic direction and a set of clear and challenging aims for the Service to ensure progress is made. The Strategy incorporates the wider notion of inclusion to welcome and celebrate diversity within the community. It also aims for the Service to be an employer of choice. The Action Plan sets out the actions, targets and timescales required to meet the objectives in the Strategy.
5. Progress against the Action Plan is monitored on a quarterly basis at the Equality Steering Group, which is chaired by the Chief Fire Officer and Chief Executive who holds overall responsibility for overseeing equality, diversity and inclusion in the Service. At the January 2019 meeting of the Equality Steering Group, significant time was taken to review the Action Plan and ensure actions were being appropriately managed and progressed.

6. The purpose of this report is not to go through each action in the Action Plan in turn, but instead to provide an overview of key projects in 2018 and 2019 to date, and highlight important future work.

Update and Information

Stonewall Workplace Equality Index

7. In January 2019, it was announced that the Service had achieved 3rd position in the Stonewall Workplace Equality Index 2019. This Index is used by employers to assess their achievements and progress on LGBT inclusion in the workplace and in service delivery. Over 400 employers entered the Index this year from a range of public and private industries.
8. This the highest ranking the Service has achieved since it has participated in the Index. This achievement represents an improvement from 4th place in 2018, and makes the Service not only the top performing emergency service but also the top performing public sector employer. The aim is to build on this success throughout the year.
9. February marks LGBT History Month and for the second consecutive year, rainbow flags will be flown not just from Sadler Road, but also from the majority of fire stations. This signals an overt commitment to LGBT inclusion to the Service's local communities.

Addressing disproportionality in the workforce

10. In 2018, the Service completed its third consecutive round of wholetime recruitment, with new recruits starting with the Service in January 2019. A significant amount of work had taken place in advance of this recruitment process to encourage applications from under-represented groups, with the aim of increasing the diversity of the new recruits. This work was progressed and monitored through the Positive Action Working Group, which was chaired by the Equality and Inclusion Officer and was responsible to the Equality Steering Group. Members were drawn from across the Service and the Joint Corporate Services, including: Transformation; Service Delivery; Human Resources; and Corporate Communications. As such, the Service was able to provide a joined up approach to positive action work.
11. Resulting campaigns and activities included: working with local community groups and attending community events to raise awareness of wholetime opportunities amongst under-represented groups; arranging taster days and fitness session on stations, which were promoted specifically to under-represented groups; and promoting the Service's buddying scheme to encourage diverse applicants to talk to current firefighters about the application process and working for the Service.
12. As a result of this work, the Service has seen an increase in the diversity of its new recruits, with a particular increase in women. A full breakdown

of equality monitoring for the wholetime recruitment campaign will be reported as normal to the August meeting of this committee.

13. The Service aims to build on the success of this work in future recruitment campaigns.
14. As reported last year, the Service continues to carry out effective onboarding and support for under-represented groups as they join the Service. Staff network groups continue to be an important part of this process. In particular, work is underway to strengthen Limitless, the Service's women's network. WM Hannah Caulfield has recently taken over as the Service's women's champion and chair of Limitless and is working hard to strengthen the Service's support for women, including: arranging a training and development day for female staff on International Women's Day; developing mentoring and buddying opportunities; and arranging regular networking events.
15. Finally, the Service recognises the importance of ensuring that under-represented groups are able to progress. As such, the Service takes care to ensure that training and development programmes are deliberately inclusive of under-represented groups and that promotion processes are fair and objective.

White Ribbon Accreditation

16. In January 2019, the Service became a White Ribbon accredited organisation. This accreditation scheme aims to tackle domestic abuse and recognises that public sector organisations can achieve more than individuals can alone when it comes to tackling domestic violence. Becoming accredited means that the Service can effectively marshal resources and build on existing projects and initiatives to challenge domestic abuse and make a genuine difference. To do so, the Service has developed an action plan, which is overseen by the Equality Steering Group.
17. The Service will use this accreditation to tackle domestic abuse in all its forms, not just against women. As such, the Service is also supporting Open the Door Cheshire, a campaign designed to signpost all victims of domestic abuse to the appropriate support.
18. On 24th November 2018, otherwise known as White Ribbon day, the Service emphatically showed its intention to supporting the White Ribbon campaign by displaying a 60-foot white ribbon from an aerial ladder platform. This was in conjunction with a local community group, Chester Women's Aid, and helped raise awareness of the issue of domestic abuse.

Who Do I Turn To?

19. In November 2018, the Service launched its '*Who Do I Turn To?*' campaign to reinforce and remind staff of the support available to them

in the event that they experience concerns or worries at work. The launch coincided with national anti-bullying week, which ran from 12-16 November 2018. There is currently a dedicated section on the Service's intranet signposting employees to support around three areas: promoting health and wellbeing; taking care of personal safety; and reporting inappropriate conduct. This has been supplemented by campaign posters on all sites and messages on employee communication channels.

20. The campaign was launched first and foremost because it is the right thing to do, but it also helps address an action arising out of the 2017 staff engagement corporate action plan. In support of the campaign, the Service is currently providing Dignity at Work training to non-operational support staff managers and to operational managers to ensure that they are equipped to recognise and take the appropriate action regarding dignity at work issues.

Next Steps

21. The following provides an update on key pieces of upcoming work relating to equality, diversity and inclusion.

HMICFRS

22. Members will be aware of the Service's inspection report from HMICFRS. Section 3 of the report, which considered how well the service looks after its people, included analysis of how the Service ensured fairness and promoted diversity. The Service received an area for improvement in this section, specifically in relation to: how well leaders act on and make changes as a result of feedback from staff; and how communications between staff and senior managers can be improved. The Service is currently developing plans to address this area for improvement.

Recruitment communications campaign

23. As detailed above, one of the priorities for the Service is to increase the diversity of its workforce. The Service has a long term aspiration that 50% of new recruits will be women. In order to achieve this aspiration, the Service is developing an innovative communications campaign to encourage under-represented groups, particularly women and members of BAME and LGBT communities, to join the Service.
24. In order to best address delivery of this campaign, the Service has engaged an external communications company. Initial designs have been developed and the Service is committed to working with staff networks specifically and employees more widely to ensure the campaign is forward-thinking and will attract members of under-represented groups.

25. In addition, members will be aware that the Service has taken the decision to expand the current partnership arrangements with Warrington Wolves Foundation to include sponsorship of Warrington Wolves' rugby league open Age Women's, Girls under 16's, Girls under 14's and Girls under 12's Teams. This unique initiative compliments the Service's long term aspiration of encouraging women to join the organisation.
26. The Service's cap badge logo will also appear on the playing jerseys of the Physical Disability RL Team, the Learning Difficulties RL team and the Wheelchair RL Team. Again, this demonstrates the Service's commitment to promoting diversity and inclusion across Cheshire.

Financial Implications

27. There will be costs associated with the recruitment communications campaign, which will be suitably addressed and incorporated into appropriate budgets. It is not envisaged that any of the other above activities currently underway will have significant financial impacts. Any costs associated with delivery, such as holding events and planning campaigns, should be covered by departmental budgets.

Legal Implications

28. As referred to in the 'Background' section, the above activities will help evidence the Service's commitment to and compliance with the provisions of the Equality Act 2010, and in particular to the public sector equality duty.

Equality and Diversity Implications

29. Equality and diversity implications have been discussed throughout the main body of the report.

Environmental Implications

30. None envisaged.

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MEETING OF: PERFORMANCE & OVERVIEW COMMITTEE
DATE: 27 FEBRUARY 2019
REPORT OF: HEAD OF PREVENTION
AUTHOR: ANDREW GRAY

SUBJECT: BONFIRE REPORT 2018

Purpose of Report

1. The annual Bonfire Report 2018 summarises the preventative and operational activities of Cheshire Fire and Rescue Service (the Service) and partners during the bonfire period, 24th October 2018 to 7th November 2018 inclusive (the Bonfire Period).
2. This report analyses and evaluates the effectiveness of the joint efforts of the Service and partners so that resources and staff can be deployed more effectively in future years.

Recommended that:

- [1] the report attached as Appendix 1 is noted; and
- [2] the recommendations are supported.

Background

3. The Service, local authorities, Cheshire Police and other partners are committed to reducing incidents of anti-social behaviour (ASB) which affect the communities they serve. The deliberate fire-setting which constitutes a large part of the ASB during the Bonfire Period has a significant effect on our Service target (BV206iii) Small Deliberate Fires.

Information

4. The Prevention team will ensure that the recommendations within the report are communicated to Unitary Performance Managers and good practice is shared when planning initiatives for the 2019 bonfire period.

Financial Implications

5. The recommendations of the report identify areas with financial implications for future years, such as the use of additional appliances, and capture cost-effective, efficient deployment of staff and resources that will be considered for 2019.

Legal Implications

6. The bonfire initiatives are seen as a core function of the Service. They should not give rise to legal liabilities.

Equality & Diversity Implications

7. There are no known equality and diversity implications arising from this report.

Environmental Implications

8. It should be recognised that the activities conducted during the Bonfire Period provide a positive contribution to reducing pollution and reducing carbon emissions from deliberate fires.

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BACKGROUND PAPERS: NONE

Appendix 1 – Bonfire Report 2018



Making Cheshire Safer

Bonfire Period Report 2018

Produced by: SM Andy Gray and Dan Taylor



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1. Introduction

The annual bonfire season represents a period of increased activity for Police and Fire and Rescue Services (FRS) in the UK. As such, plans for limiting deliberate fire activity and Anti-Social Behaviour (ASB) are put in place during this time.

ASB includes the setting of deliberate fires, in addition to nuisance and celebratory bonfires. This places pressure on the resources of Cheshire Fire and Rescue Service due to an increase in call levels to incidents classed as small deliberate fires (SDF).

The Service and its partners recognise the damage inflicted on communities by ASB during the bonfire season. Significant amounts of time, effort, resources and money are expended in an attempt to ensure the safety and well-being of communities, whilst allowing and encouraging people to celebrate the season safely.

We have also considered that Bonfire Period dates coincide with Halloween, and it is recognised that these dates are opportunities for ASB of all types, not just fire related ASB. There is also an event called 'Mischief night' on the 30th November which also presents both Fire and Police staff with increased levels of ASB.

The Service's Bonfire Period recording dates align with dates also used by Cheshire Constabulary to record ASB so it is a more accurate method of comparing all types of ASB together. The data section in this report will explain this more fully.

Police and Fire Bonfire Period recording dates were aligned in 2017. This made it easier to compare overall ASB. Data from previous years has been reviewed in order to establish trends. For CFRS the overall trend for SDF continues downward year on year. However, some station areas have seen year on year increases.

2. Recording of Incidents

The bonfire reporting period 2018 captured data from 0800hrs 24th October to 0800hrs 7th November. Data from these dates has also been examined for the preceding 4 years for all types of ASB.

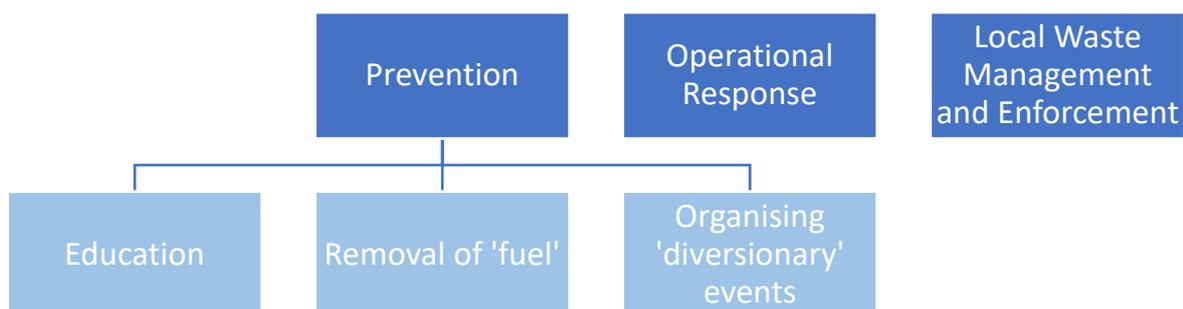
As there is no specific bonfire reporting category on the Incident Recording System (IRS) (this is the national method used to complete a fire report) this report relates to all small deliberate fires (SDF). The reasoning for this is that the difference between a bonfire and a pile of rubbish set on fire is a very subjective one for crews attending, so the inclusion of all SDF in this report will continue.

The following guidance was promulgated to operational crews, as in previous years, to outline reporting parameters during the bonfire period for use on the IRS system.

- If a Bonfire is lit prior to a planned celebration, i.e. as an act of Anti Social Behaviour, and needs to be extinguished because it is a nuisance or dangerous, then this must be recorded as a **small deliberate fire**.
- If a Bonfire is lit for celebratory purposes and needs to be extinguished because it is dangerous, out of control or deemed a nuisance, then this will be recorded as an **accidental small fire**.
- If a Bonfire is lit for celebratory purposes and is allowed to burn, and we do not need to take any action other than give advice then this should be recorded as a **false alarm good intent**. Add to the stop message that a Dynamic Risk Assessment has been completed and advice has been given. When completing the IRS please note that there is a specific category for a Good Intent false alarm >> Fire >> Bonfire.
- Other small deliberate or accidental fires e.g. wheelie bins, refuse, hedgerows, must be recorded as normal, and the investigation recorded fully on the Police Notification Report.

3. Pre Planning and Partnership Activity

Station Managers and Lead Advocates engaged with local partners to plan a variety of interventions and strategies based on local needs and historical data. The objectives of these interventions and strategies were as follows:



Local strategies were again produced for Ellesmere Port, and Winsford, Warrington, and Halton. Each of these four local 'Bonfire Groups' is attended by the local Station Manager and/or the Station Manager responsible for arson reduction. Bonfire activity levels in any of the individual Cheshire East station areas do not warrant the formation of a specific strategy. SDF activities are however addressed at regular local meetings and appropriate interventions are planned if necessary.

4. Bonfire Removal Schemes and Waste Management

All Areas –The Street-scene type format of the reporting and removal of waste continues to occur in all council areas. There are some subtle differences across areas but essentially the public receive a service where by using a free phone number to report the location of the waste, it is then removed.

All Areas – Operational crews increased their pre-planned arson route activities in 2018 enabling them to provide valuable real time information to Street-scene and other fuel removal services operating in their local areas.

5. Educational Events and Activities

A more targeted approach to education has been adopted by the Service in recent years, and this continued across all areas in 2018. Using local intelligence, educational events were planned and delivered in specific locations based on fire related ASB and school catchment areas. Educational events were delivered by the Service's Prevention team and operational staff in partnership with Cheshire Police at a number of schools, community centres and other locations. A consistent message promoting organised displays, ASB, and firework safety was delivered by our own staff using a presentation developed by Prevention staff.

Separate presentations have been utilised for delivery at primary and secondary schools. Operational staff organised and delivered the primary school educational visits, in conjunction with key stage 2 visits scheduled for the weeks preceding bonfire night.

6. Diversionary Events, Activities and Enforcement.

The term Diversionary Events and Activities refers to any activity intended to reduce opportunities for fire related ASB and which encourages residents to enjoy the celebrations in a safe manner. These include organised bonfire and firework displays, youth work and other events.

Diversionary events vary across the 4 local authority areas and the relevant local strategy groups in Warrington, Halton, Ellesmere Port, and Winsford. There are dozens of organised displays held by local pubs, community groups, parish councils, PTAs etc. Encouraging people to attend organised displays continues to be Service policy, and these events are publicised on the Service website when we are notified of them.

Cheshire East - fire related ASB and deliberate fire activity in Cheshire East is still at a relatively low level in comparison to other unitary areas.

Youth and community groups organise a number of events during the bonfire weekend and the preceding half-term school holiday and there were a number of organised bonfire and firework events. Due to relatively low levels of fire related ASB, there is little need for partnership activity and the formation of a specific strategy in Cheshire East.

Cheshire West and Chester (CWAC) – The key firework events in CWAC are displays in Chester and Ellesmere Port. Held at the Roodee and Whitby Park respectively. The Ellesmere Port event was supported financially by CFRS to occur, The Chester event although funding was approved it was not used due to a change in the way the event occurred, the Lions were not the organiser for 2018. Funding was obtained to provide 45 tickets to members of the public for the annual Winsford Town Firework Display and Bonfire organised by the Rotary Club of Winsford and Middlewich held at Barton Stadium.

The Winsford Bonfire Strategy Group worked in partnership with Cheshire Police, CWAC Council, Weaver Vale Housing, the local ASB team and Youth Engagement team to minimise SDF activity during the Bonfire period. The Service and partners held for young people within the known areas of fire related ASB sessions throughout the lead up to Bonfire Night, an assault course event, and virtual reality sessions were used to engage with the young people and encourage them to keep fit as well as receiving guidance from Police and Firefighters. The Police increased patrols and presence in the Winsford area for the period, and multi agency ‘ward walks’ enabled Fire, Police and Weaver Vale housing staff to effectively engage with residents. The Service also utilised the ‘On the Streets’ team in the area to directly engage with the public.

In the Chester and Ellesmere Port area five Youth Anti-Social Behaviour (YADE) events were held from the 26th Oct – 3rd November to act as diversionary events and to improve engagement with the local young people.

Cheshire Police again engaged with known previous fire related ASB offenders in Winsford and Ellesmere Port during half-term to demonstrate to them that their behaviour was not acceptable, and was being monitored. ‘Operation Proportion’ was also utilised by Cheshire Police, this involved dispersal orders in hot spot areas in Ellesmere Port.

Halton – Halton Borough Council organises one large firework display, which is always very well attended. This takes place on the bank of the Mersey and Ship Canal to ensure a good view from several locations. The council do not encourage other smaller bonfire events to be organised by local groups at this time.

Crews continued to be proactive in the run-up and during the period to reporting any waste removal that was required.

Warrington – Torus housing had shared Intelligence with CFRS that local youths would dress in clown’s outfits and put fireworks through the letterboxes of elderly and vulnerable residents, the intelligence was shared with the Police. Following the request from Torus housing, CFRS visited and installed 15 fire retardant letterboxes demonstrating how partnership working can reduce risks to our most vulnerable Warrington residents.

Operation Scattered was held on the 17/10/2018 around Leicester Street and Whitecross Road this was a Multi Agency Impact event prior to the Bonfire Period.

Operational Crews and the Prevention teams completed 89 safe and well visits in the area and provided detailed information on cooking safety along with arson prevention, mainly around fly tipping and wheelie bins.

In addition a chip pan was exchanged for a deep fat fryer, a House of multiple occupation and a property that was owned by a private landlord without working smoke alarms were reported to Warrington Borough Council.

The Protection teams visited and gave Arson prevention advice to 31 businesses around Lovely lane, Folly lane, Kerfoot Street and Bewsey road as part of this initiative.

Police and Housing reported there were a drastic reduction in activity, the residents have reported to housing and community engagement officers that they felt reassured and safe due to the activities of all the partners.

7. Operational Response

Small Incident Units (SIU) have been deployed in the busier areas during the bonfire period for several years now. The appliances used for these additional resources in 2018 were the On-call appliances from Penketh, Runcorn and Winsford. This deployment allows on call staff in development and our apprentices to gain experience of spate conditions, whilst leaving the whole-time appliances available for life risk incidents.

These SIU were deployed flexibly during five evenings from the 1st November – 5th November between 1600-2200 hrs. The services Deliberate Fire Reduction Manager attended North West Fire Control (NWFC) on the busiest evenings, Saturday, Sunday and Monday to enable risk based mobilisation to take place, often overriding the 'proposed resources' offered by the NWFC mobilising system in order to support and maintain cover levels across the County.

Availability of SIU at times of peak activity allows other appliances to be available for incidents that may pose a threat to life or property and, it will be recommended that this practice continues in future. SIU provision and deployment continues to be a cost effective means of maintaining structural appliance availability.

8. North West Fire Control

Extensive planning again took place for the 2018 bonfire period in North West Fire Control (NWFC). Prior to 2014, each FRS control had their own methods of dealing with expected spate call conditions. This was in addition to separate procedures for unlit bonfires, firework incidents, filtering or challenging calls, and mobilising procedures. NWFC planning meetings examined and retained best practice already in place in previous FRS Controls and evaluated and reviewed the systems adopted by NWFC in 2015 with an intention to adopt them as a common practice where possible.

Many of the practices adopted across all 4 Services by NWFC are based on procedures previously used only in Cheshire. Of particular note is the call challenging

procedure adopted by NWFC in 2014; this originated in Cheshire and has resulted in risk based non attendance to incidents in all NWFC FRS areas. This call challenge has also been adopted by Cheshire Police Control so that bonfire incidents are assessed before referral to NWFC. The call challenge and 'tolerance' procedure was also communicated to all operational police staff in order to reduce the number of calls from patrols.

A call handling and mobilising procedure was operated on 3th, 4th and 5th of November. NWFC staff were permitted to over-ride resources offered by the mobilising system and to leave certain calls unattended for a short period if appropriate. The mobilising decisions in each pod were the responsibility of an attending Station Manager (or higher) from each FRS.

9. Media and Corporate Communications

The Corporate Communications team actively promoted a number of key messages for the Service over the Halloween and Bonfire period which ran from 8am on October 24 to 8am on November 7.

Communications were promoted for the campaign internally and via the local press and social media for both events, although the main focus was Bonfire Night.

This year the school holidays fell within a two week period so parents were asked: "Make sure your children are safe" as opposed to: "Do you know where your children are" which was felt to be more appropriate. This followed meetings with the youth engagement staff who helped with the approach and we feel it worked well.

A briefing was sent from Corporate Communications to all stations asking them to promote key messages. These included:

- Highlight to members of the public how you are keeping everyone safe during this period and what you are doing.
- Don't use the words "Mischief Night". We don't want to make the date of October 30th to be an event, although we will be giving out anti-social behaviour advice and information out on this day.
- Promote that everyone should go to organised bonfire and firework displays and direct them to the website for the list.
- Don't promote the use of fireworks or sparklers or give advice about people having their own bonfire. We don't want to encourage them to think its ok.
- Don't use "do you know where your children are" but use "make sure your children stay safe" instead.

We also promoted the hashtag **#treacle2018** so that we could collate social media activity for the period and analyse how effective the posts were. This hashtag was used on the main account and across the Service.

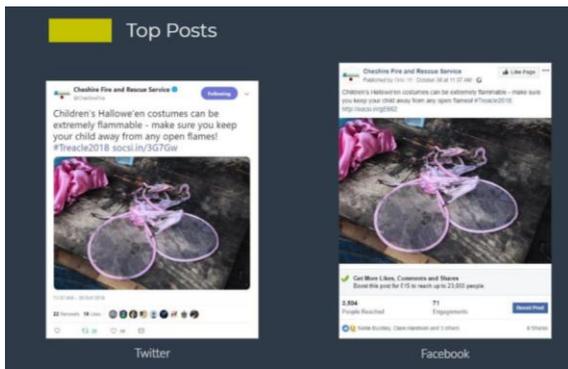
Between October 26 and November 5 we issued 17 social media posts on Twitter.



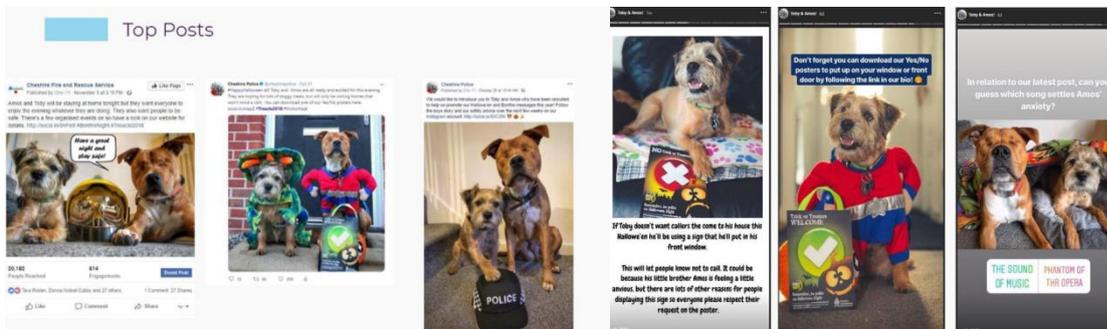
Facebook was also used to relay messages and the URL clicks totalled 278 for both:



The top post on both Facebook and Twitter was the Halloween costume warning:



The Service linked in with Cheshire Police and together used two canine celebrities to help get its messages out. Toby and Amos are dogs who are local social media stars and they introduced the campaign on Facebook and Twitter. We used the brothers on Instagram for the first time to follow their story and received some lovely comments. Along the way we incorporated messages within the boys' story and we



received some great support from social media users thanks to them.

The responses to the messages using these dogs were all positive and included:

Some comments from the public

“ I love this campaign! Hats off to whoever thought of it
Richard Sumner

“ This is a fabulous campaign, well done to whoever thought of it ...very creative 🥰 My dog is absolutely terrified of fireworks (noise in particular).
Catherine Sullivan

“ We need Toby and Amos in our lives. They have a unique way of getting a message across. I love them. Keep regular pupdates coming please.
Dawn Bowley

“ You are fantastic Cheshire Police. You look at the bigger picture. Thank You.
Kathleen Baker

“ Toby and Amos are amazing I love reading about their adventures, good photo guys xx ❤️
Nikki Wilson-Barnes

“ More from Toby and Amos please 🐾🐾🐾
Amanda Leigh Worthington

Through this initiative the posts we used, which mentioned the boys, reached the following on the three social media platforms we use:



From this social media activity a number of news channels picked up the messages including BBC North West Tonight, who featured the brothers on their evening news bulletin, Signal Radio and the Warrington Guardian Series.



A pet safety code was also introduced, with advice for pet owners, which went down well with our followers:



On Bonfire Night itself (November 5th), a Communications Officer went to North West Fire Control and updated incidents on the service website as they happened. Communications Officers accompanied a reporter from the Warrington Guardian Series and rode the Winsford fire engine on Saturday, November 3. He also highlighted the work of on-call firefighters as part of the evening. This work produced the article below which went in the Winsford Guardian.



A Communications Officer, went to Warrington Fire Station on the evening of Saturday November 3 and accompanied a film crew from Granada who filmed footage of the crews as they dealt with incidents. This footage was shown on the programme on the Monday along with messages from the press release.

The services Deliberate Fire Reduction Manager gave a radio interview to Wire FM about bonfire activity on November 5 and ITV Granada also phoned the department to ask if any of our firefighters had been attacked over the weekend.

Following the events the department collated information for the media around how many calls we had received and attended, and what issues the Service had to deal with, in the different areas of the county. This information was issued in the form of a press release to the county’s media.

10. Incident Data and Performance Summary

Incidents recorded during the bonfire period

The following graph (Fig. 1) illustrates the overall trend of deliberate small fires in Cheshire over the last 5 years – although there were more fires recorded than 5 years ago during this years Bonfire Period, the 2018 period has seen a positive year on year reduction of 14%:

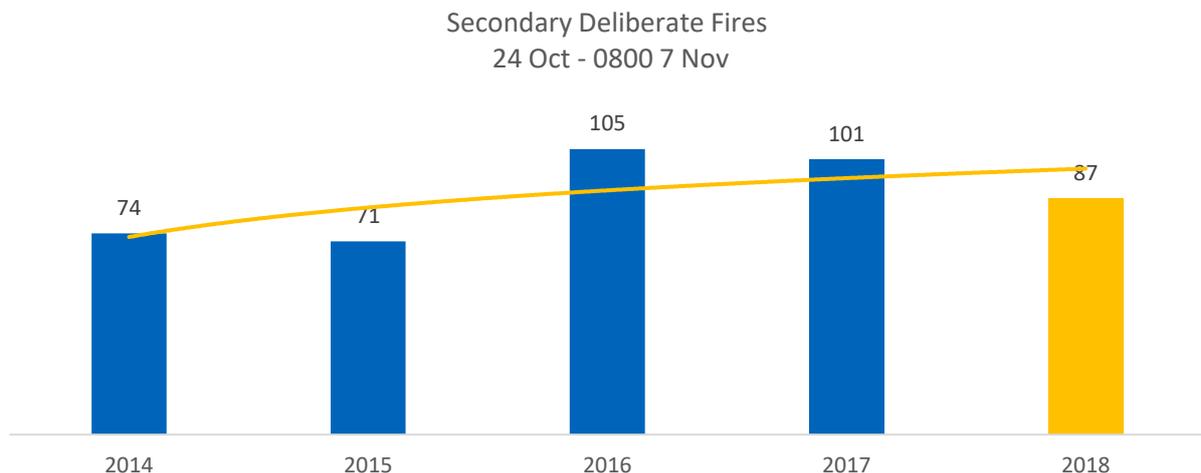
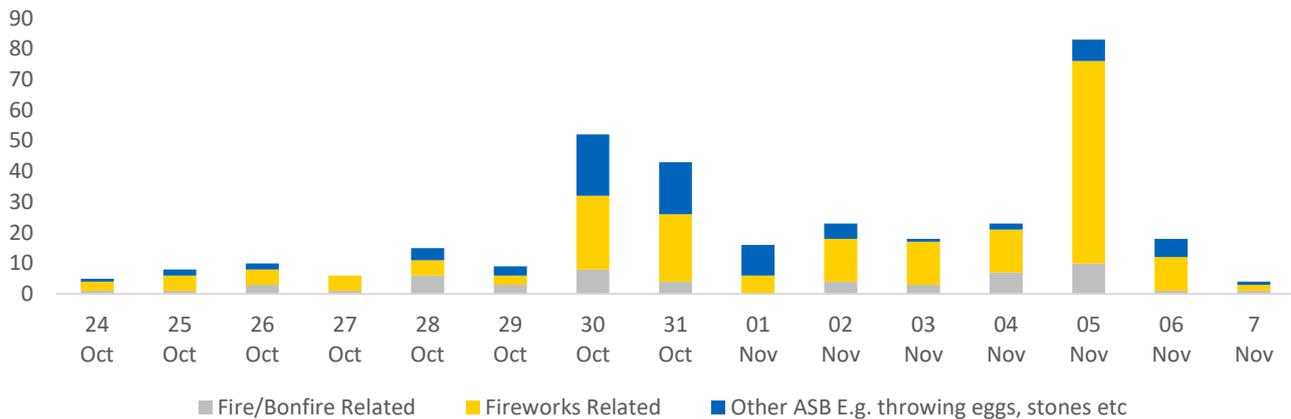


Fig. 1

A total of 17 secondary deliberate fires were recorded on bonfire night, however a total of 67 bonfire related incidents were attended – 25 (37%) of these incidents were ‘False Alarms Good Intent’ and 21 incidents (31%) were ‘Secondary Accidental’.

The graph below shows activity levels by day and recording type. Showing comparisons between small deliberate fire activity and ASB/Criminal Damage reported to the Police during this same time period. All inputs have similar trajectories throughout the period, with the same expected peaks noticeable on 30/10 “Mischief Night”, 31/10 Halloween and 05/11 Bonfire Night. Firework Related ASB is the most common type throughout the period, peaking on 5th Nov.

ASB and Criminal Damage incidents by day and type
24 October - 7 November



The following two charts also shows a comparison of the time and day of when high or low activity is occurring for both deliberate fires and ASB/Criminal Damage – again apart from differences in incident volumes they show very similar peak times and days.

Deliberate Fire Activity

Hour	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
00	0.0%	0.6%	0.0%	0.3%	0.3%	0.0%	0.6%	1.7%
01	0.0%	0.3%	0.3%	0.0%	0.3%	0.3%	0.3%	1.4%
02	0.0%	0.0%	0.3%	0.3%	0.0%	0.0%	0.0%	0.6%
03	0.3%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	0.6%
04	0.3%	0.0%	0.6%	0.0%	0.0%	0.0%	0.0%	0.9%
05	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%	0.6%	0.9%
06	0.0%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	0.3%
07	0.0%	0.6%	0.0%	0.0%	0.0%	0.0%	0.6%	1.1%
08	0.3%	0.6%	0.0%	0.9%	0.0%	0.0%	0.6%	2.3%
09	0.6%	0.0%	0.6%	0.0%	0.0%	0.3%	0.3%	1.7%
10	0.3%	0.6%	0.0%	0.0%	0.0%	0.0%	0.3%	1.1%
11	0.6%	0.3%	0.3%	0.0%	0.6%	0.3%	0.0%	2.0%
12	0.3%	0.6%	0.0%	0.6%	0.6%	0.0%	0.6%	2.6%
13	0.3%	0.0%	0.3%	0.3%	0.0%	0.0%	0.6%	1.4%
14	0.6%	0.6%	0.0%	0.0%	0.0%	0.0%	0.3%	1.4%
15	0.6%	0.3%	0.6%	0.0%	0.3%	0.0%	0.0%	1.7%
16	0.3%	1.7%	1.4%	0.3%	1.4%	0.6%	1.4%	7.2%
17	3.7%	4.0%	2.3%	0.3%	1.1%	1.1%	1.4%	14.1%
18	4.6%	3.2%	2.6%	1.4%	1.4%	0.9%	2.6%	16.7%
19	5.5%	3.2%	2.6%	1.1%	1.7%	0.9%	0.3%	15.2%
20	3.4%	1.7%	1.7%	0.0%	0.3%	0.6%	0.3%	8.0%
21	4.0%	1.7%	0.9%	1.4%	0.9%	1.1%	0.3%	10.3%
22	0.9%	0.3%	0.0%	0.0%	0.6%	0.6%	0.0%	2.3%
23	0.6%	0.6%	0.3%	0.9%	0.9%	0.9%	0.3%	4.3%
Total	27.0%	20.7%	15.2%	7.8%	10.3%	7.8%	11.2%	100.0%

ASB/Criminal damage

Hour	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
00	0.0%	4.6%	0.0%	0.0%	0.0%	0.0%	0.0%	4.6%
01	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
02	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.1%	1.1%
03	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
04	0.0%	0.0%	1.1%	0.0%	0.0%	0.0%	0.0%	1.1%
05	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
06	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
07	0.0%	0.0%	0.0%	0.0%	0.0%	1.1%	0.0%	1.1%
08	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
09	0.0%	2.3%	0.0%	0.0%	0.0%	0.0%	0.0%	2.3%
10	0.0%	0.0%	0.0%	0.0%	0.0%	1.1%	0.0%	1.1%
11	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
12	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.1%	1.1%
13	0.0%	1.1%	0.0%	0.0%	0.0%	0.0%	1.1%	2.3%
14	0.0%	0.0%	1.1%	0.0%	0.0%	0.0%	1.1%	2.3%
15	1.1%	2.3%	0.0%	0.0%	0.0%	0.0%	0.0%	3.4%
16	4.6%	0.0%	0.0%	0.0%	0.0%	2.3%	2.3%	9.2%
17	2.3%	2.3%	1.1%	2.3%	0.0%	0.0%	2.3%	10.3%
18	5.7%	3.4%	0.0%	2.3%	1.1%	1.1%	1.1%	14.9%
19	5.7%	2.3%	1.1%	0.0%	1.1%	3.4%	1.1%	14.9%
20	2.3%	2.3%	3.4%	0.0%	1.1%	0.0%	1.1%	10.3%
21	2.3%	4.6%	2.3%	0.0%	1.1%	1.1%	0.0%	11.5%
22	1.1%	1.1%	1.1%	2.3%	0.0%	1.1%	0.0%	6.9%
23	1.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.1%
Total	26.4%	26.4%	11.5%	6.9%	4.6%	11.5%	12.6%	100.0%

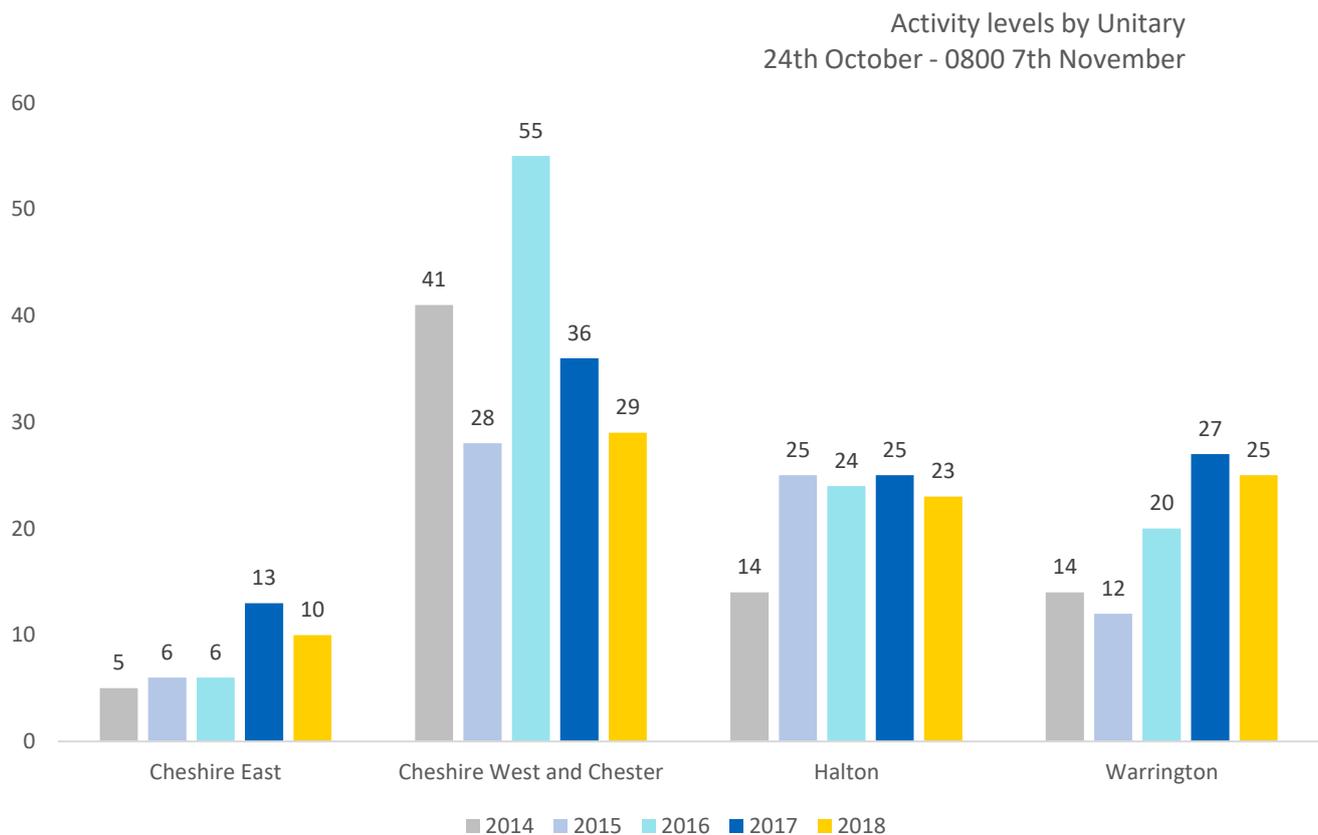
Unitary Performance

Each of the four unitary areas recorded a year on year decrease in SDF during this year's bonfire period. Cheshire West and Chester is the only Unitary Area to have seen decreases compared to 5 years ago. This can be seen as follows (Figs. 2 and 3):

Fig.2

	2018	2017	Year on year	2014	5 Year change
Cheshire East	10	13	-3	5	+5
Cheshire West and Chester	29	36	-7	41	-12
Halton	23	25	-2	14	+9
Warrington	25	27	-2	14	+11

Fig. 3



Station Performance

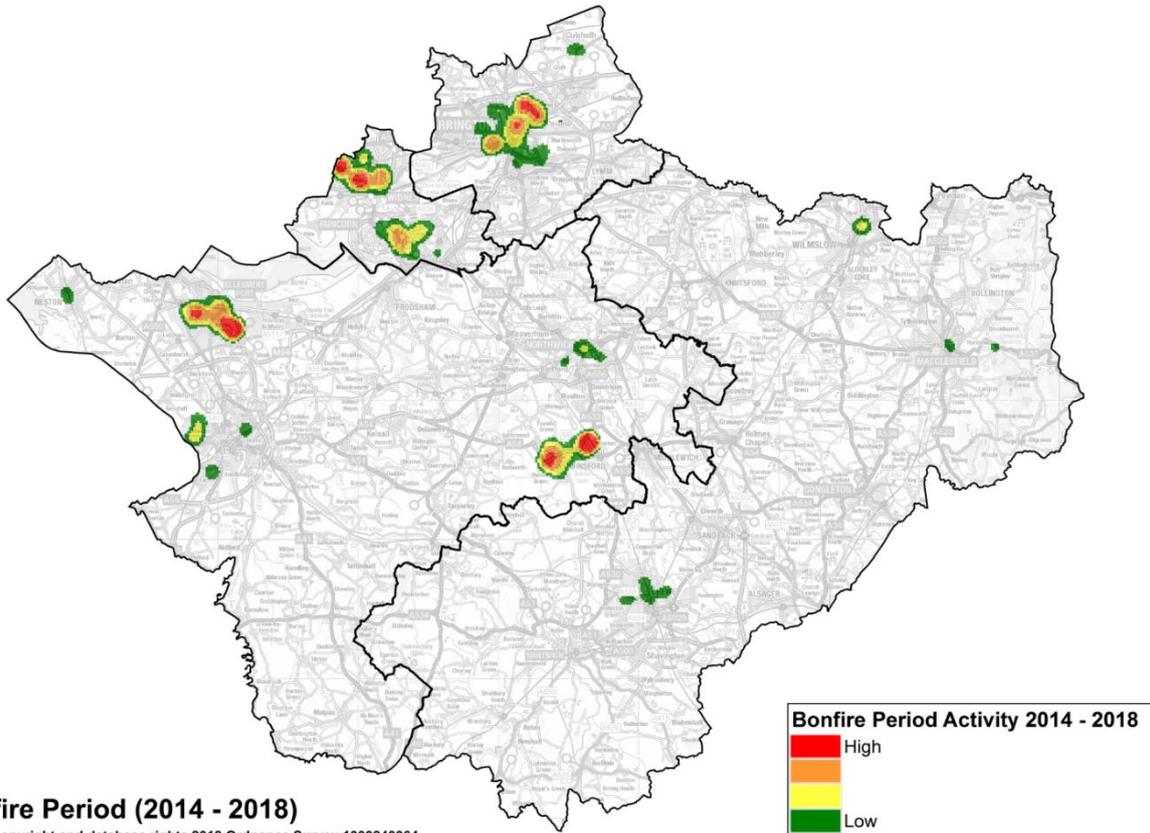
In total, there were 14 station areas which recorded Small Deliberate Fire activity during the Bonfire Period, with 5 of these only reporting 1 incident each.

The following table summarises activity by the station areas with the highest volume of activity during the 2018 reporting period.

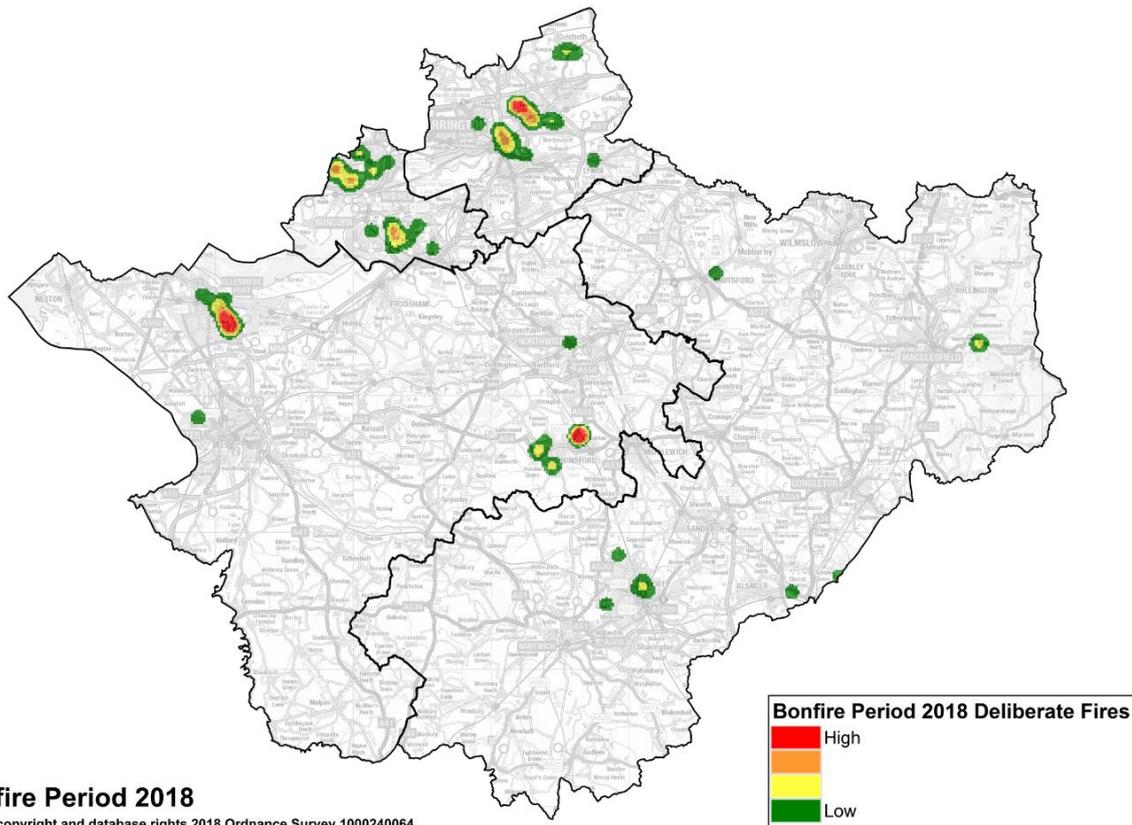
These 5 station areas accounted for 77% of all Small Deliberate Fire activity recorded during the period.

	2018	2017	1 Year Change	2014	5 Year Change
Warrington	18	24	-6	13	5
Ellesmere Port	15	16	-1	23	-8
Widnes	12	19	-7	5	7
Winsford	12	15	-3	10	2
Runcorn	10	6	4	9	1

Below shows activity of deliberate small fires from 2014 – 2018.



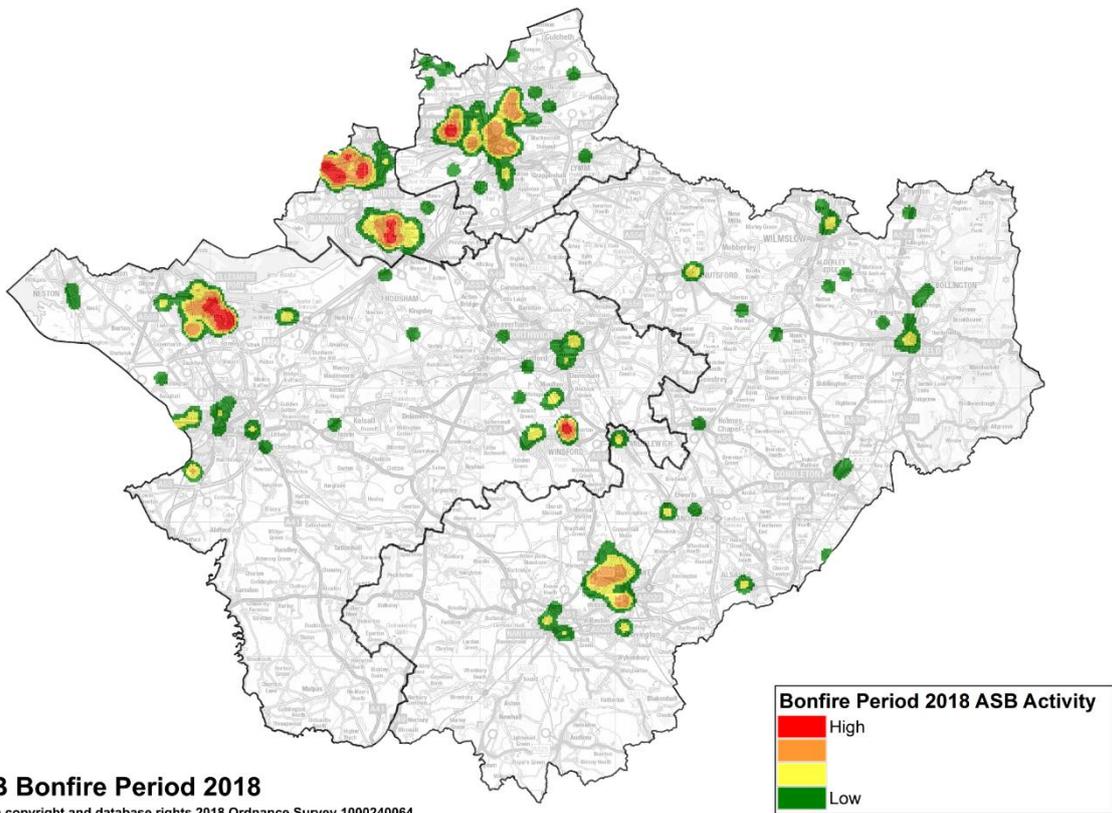
2018 activity areas.



Bonfire Period 2018

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Below shows ASB hotspot areas.



ASB Bonfire Period 2018

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11. Accidents and Near Misses

There have been no accidents or near misses during the bonfire period for 2018.

12. Recommendations

It is recommended that:

- a) The delivery of targeted and timely education to schools in all Service Delivery areas should continue to be led by the Service, ahead of other organisations. A working group of Lead Advocates and the Station Manager responsible for arson reduction will review the education currently offered and implement improvements.
- b) Bonfire Strategy Groups should continue to encourage safe organised displays to allow people to safely celebrate bonfire night. Where possible or appropriate, these should be supported by the Service and partners.
- c) Planning meetings for the relevant Strategy Groups should start well in advance of the bonfire period.
- d) Use of SIUs should be targeted over an appropriate number of evenings and the number of vehicles to remain as a minimum at 3 to cover the known risk areas.
- e) Service and partner agency resources and efforts should continue to be focused in areas where intelligence suggests that high incident volumes may occur.
- f) Where possible, partner agencies should be persuaded to continue the free removal schemes for the removal of large items, (normally a chargeable service), during the preceding month. This should be discussed with partners at Bonfire Strategy Group planning meetings.
- g) The tolerance policy adopted by the Service again this year has proven successful and should be continued. The desire to celebrate bonfire night is present in most areas, and residents should be encouraged to do so in a safe manner.
- h) Targeted youth activity should be repeated using the On the Streets Team and volunteers, based on data provided by the Business Intelligence Unit.
- i) The use of our Communications staff to provide live social media updates should continue.
- j) Consideration should again be given to having a local newspaper reporter riding appliances accompanied by a communications team member in the areas of higher activity.

- k) Continually review the practice of making cash contributions to organised displays, particularly in Chester and Ellesmere Port, and as an alternative fund the provision of diversionary activities in known areas of increased call activity.
- l) Continue to provide an ongoing programme of Primary Respect courses in targeted schools.

13. Summary and conclusions

The total number of SDF attended during the period was slightly lower than in previous years. It should be noted that there are considerable improvements to the totals of almost 300 SDF that we experienced less than 10 years ago.

Engagement: Some areas received increased engagement by our staff and other agencies. Consistent, timely and targeted delivery of bonfire and firework education was delivered. The timeliness of this delivery is important to its effectiveness.

Fuel removal: Bonfire removal schemes continue to be an effective means of reducing the numbers of SDF. A visual presence of teams actively removing material also discouraged the rebuilding of bonfires.

Incident recording: The tolerant, risk based approach to dealing with incidents and recording will have impacted on the number of incidents recorded as SDF.

Weather: It has been found that weather conditions experienced over the bonfire period will have an impact on incident volumes. For example, we know from previous years that rainfall will suppress activity. Yet Weather conditions during the 2018 period were predominately dry without extremely low temperatures yet we still managed an overall reduction in SDF.

Cross Departmental Work: Departments throughout the Service were proactive during the run up to and including the bonfire period. Without the efforts of staff and partners it is likely that the number of SDF would have been much greater.

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CHESHIRE FIRE AUTHORITY

MEETING OF: PERFORMANCE AND OVERVIEW COMMITTEE
DATE: 27 FEBRUARY 2019
REPORT OF: HEAD OF PROTECTION AND ORGANISATIONAL
PERFORMANCE
AUTHOR: ANTHONY JONES

SUBJECT: HMICFRS INSPECTION 2018 – ACTION PLAN

Purpose of Report

1. To present the Service's initial draft action plan prepared in response to the inspection report produced by Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS).

Recommended: That Members

- [1] Provide feedback on the initial draft Action Plan prior to further engagement with staff and other Fire Authority Members
- [2] Confirm the monitoring arrangements

Background

2. At the Cheshire Fire Authority on the 13th February 2019 a report was presented concerning the inspection process, graded judgements and outcome of the first inspection of the Service by HMICFRS.
3. The report highlighted that the inspection report contained 9 'Areas for Improvement' (AFI). The table attached to this report as Appendix 1 contains the AFI. The report stated that an Action Plan was being developed to address the AFI which would be presented to and thereafter monitored by this Committee.
4. HMICFRS does not require sight of the Action Plan. However, it will be shared with our HMICFRS Service Liaison Lead.

Information

Developing the Action Plan

5. The initial draft Action Plan is attached to this report as Appendix 2.
6. The initial draft Action Plan has been developed by the team that successfully managed the inspection process, with the support of the Service Management Team and with the benefit of feedback from a session at a recent management conference. The intention is to use the initial draft to engage in a wider dialogue

with staff over the next couple of months. The initial draft will also be circulated to all Members of the Fire Authority (together with a copy of this report).

7. The intention is to finalise the Action Plan during April. However, it will be a living document which is regularly updated as progress is made.
8. Members will see that the initial draft Action Plan provides not only some measures of success, but also a column which will encourage the capture of evidence. Whilst the HMICFRS does not wish to see the Action Plan, the document will undoubtedly be useful when the next inspection takes place.
9. Officers are approaching the AFI with a genuine keenness to achieve the improvements: this is not being treated as an auditing exercise.

Engagement with Members and Monitoring of Action Plan

10. Members of the Fire Authority will be encouraged to provide feedback. At this point officers do not intend to present the Action Plan to the Fire Authority as Members will have an opportunity to comment on the Action Plan at the April Fire Authority meeting (as a matter arising from the minutes of this Committee). However, if Members indicate that they wish to debate the Action Plan a report will be presented to the Fire Authority in April.
11. It is proposed to include the Action Plan on the agenda of this Committee at the next meeting and then at alternate meetings.

Financial Implications

12. None are evident at this stage. However, delivery against the action plan could involve financial implications. These will need to be addressed at the time.

Legal Implications

13. None are evident at this stage.

Equality and Diversity Implications

14. None are evident at this stage. However, there may be equality and diversity implications. These will be addressed as they become apparent.

Environmental Implications

15. None are evident at this stage.

CONTACT: DONNA LINTON, CLEMONDS HEY, WINSFORD

TEL [01606] 868804

BACKGROUND PAPERS: NONE

Appendix 1 – Areas for Improvement Table

Appendix 2 – Initial Draft Action Plan

Areas for Improvement

<p>How effective is CFRS at keeping people safe and secure from fire and other risks?</p> <p>Good Overall</p>	
<p>1.3 – Protecting the public through fire regulation</p>	<p>Good</p> <p>Area for Improvement</p> <p>The service should ensure it allocates enough resources to a prioritised and risk-based inspection programme.</p>
<p>How efficient in CFRS at keeping people safe and secure from fire and other risks?</p> <p>Good Overall</p>	
<p>2.1 – Making best use of resources</p>	<p>Good</p> <p>Areas for improvement</p> <p>The service should ensure there is effective monitoring, review and evaluation of the benefits and outcomes of any collaboration.</p> <p>The service should ensure it has sufficiently robust plans in place to secure the right level of savings in the medium term by widening its scenario planning and testing for future financial forecasting.</p>
<p>2.2 – Making the fire and rescue service affordable now and in the future</p>	<p>Good</p> <p>Area for improvement</p> <p>The service needs to demonstrate sound financial management of principal non-pay costs. It should use benchmarking data more widely and effectively.</p>
<p>How well does CFRS look after its people?</p> <p>Requires Improvement Overall</p>	
<p>3.1 – Promoting the right values and culture</p>	<p>Requires Improvement</p> <p>Areas for improvement</p>

	<p>The service should assure itself that staff understand and have confidence in the purpose and integrity of wellbeing policies, especially sickness.</p> <p>The service should take early action, such as monitoring overtime, to improve the wellbeing of staff.</p> <p>The service should assure itself that senior managers are visible to act as role models by demonstrating their commitment to service values through their behaviours.</p>
<p>3.3 – Ensuring fairness and promoting diversity</p>	<p>Requires Improvement</p> <p>Areas for improvement</p> <p>The service should ensure that leaders can demonstrate that they act on and have made changes as a direct result of feedback from staff.</p> <p>The service should improve communications between staff and senior managers, so queries and suggestions are responded to in a timely and appropriate way.</p>

HMICFRS INSPECTION 2018 – INITIAL DRAFT ACTION PLAN

EFFECTIVENESS Area For Improvement	Page # Report	Action to be taken	Lead	Measure of Success	Timetable	Commentary/Evidence (with dates)
<p>RESPONDING TO FIRES AND OTHER EMERGENCIES: The service should ensure it allocates enough resources to a prioritised and risk-based inspection programme.</p>	<p>P13</p>	<ul style="list-style-type: none"> • Ensure staffing deficiencies are addressed as early as possible to prevent cumulative experiential degradation • Provide development courses for staff at earliest opportunity and where necessary host courses in house • Monitor development progress of all development inspectors against a structured plan • Skills, recruitment, retention and succession planning to be considered specifically in departmental review • Targets to be reviewed to ensure they are achievable taking in to account a vacancy factor • Risk Based Inspection Programme to be reviewed • Review promotion and marketing of the department to encourage individuals to consider a role in protection • Review other Services’ HMICFRS reports as published to identify notable practice 	<p>LS</p>	<ul style="list-style-type: none"> • Vacancies filled within 3 months • New Inspectors trained to Level 4 Diploma within 18 months • Recommendations produced in the departmental review to address issues of recruitment, retention and succession • Achievement of targets • Reviewed and revised Risk Based Inspection Plan • Individuals identified with Protection aspirations 		

HMICFRS INSPECTION 2018 – INITIAL DRAFT ACTION PLAN

EFFICIENCY Area For Improvement	Page # Report	Action to be taken	Lead	Measure of Success	Timetable	Commentary/Evidence (with dates)
<p>MAKING BEST USE OF RESOURCES The service should ensure there is effective monitoring, review and evaluation of the benefits and outcomes of any collaboration.</p>	P22	<ul style="list-style-type: none"> Find out who does it well and ask for information/support Agree the list of collaborations that is included Develop process and methodology including key measurements Create honest position statement Identify appropriate monitoring regime (officers/Members) Timetable ongoing monitoring Finalise process for future collaborations Appropriate independent audits to be carried out on specific collaboration Review other Services' HMICFRS reports as published to identify notable practice 	AW/AL/AH	<ul style="list-style-type: none"> Appropriate arrangements exist for current collaborations Suitable and rigorous process exists for proposed collaborations Audits confirm process and arrangements are embedded 		
<p>MAKING BEST USE OF RESOURCES The service should ensure it has sufficiently robust plans in place to secure the right level of savings in the medium term by widening its scenario planning and testing for future financial forecasting</p>	P22	<ul style="list-style-type: none"> Revise the budget setting process and methodology incorporating broader scenario planning. Develop plans to achieve the saving forecasts in the Medium Term Financial Plan Complete Whole Service Review Review other Services' HMICFRS reports as published to identify notable practice 	WB & All HODs	<ul style="list-style-type: none"> Identified savings achieved as expected Outcome of Whole Service Review implemented aligned to the available budget 		
<p>MAKING THE FIRE AND RESCUE SERVICE AFFORDABLE NOW AND INTO THE FUTURE: The service needs to demonstrate sound financial management of principal non-pay costs. It should use benchmarking data more widely and effectively.</p>	P25	<ul style="list-style-type: none"> Document our expectations about VFM/benchmarking Engage in appropriate benchmarking groups/processes Assess major areas of spend using best data available Annual report outlining efforts/impact of benchmarking activity Review other Services' HMICFRS reports as published to identify notable practice 	AL & All HODs	<ul style="list-style-type: none"> Systematic approach to benchmarking Evidence that value for money being achieved Confidence about procurement activity when next inspection takes place 		

HMICFRS INSPECTION 2018 – INITIAL DRAFT ACTION PLAN

PEOPLE Area For Improvement	Page # Report	Action to be taken	Lead	Measure of Success	Timetable	Commentary/Evidence (with dates)
PROMOTING THE RIGHT VALUES AND CULTURE: The service should assure itself that staff understand and have confidence in the purpose and integrity of wellbeing policies, especially sickness.	P29	<ul style="list-style-type: none"> Re-visit Attendance Management (AM) Policy review (engaging with staff groups) Review all terminology and communication methods linked to attendance management procedure Look at a communications plan to publicise the positive/ supportive aspects of the AM Policy including face to face team visits and workshops Review training and guidance available for managers and its accessibility Appoint mental health and wellbeing advisor Develop a communication’s plan to promote mental health and wellbeing Review the amended duties programme of activities Review other Services’ HMICFRS reports as published to identify notable practice 	AH/LM	<ul style="list-style-type: none"> A reviewed and understood policy Clear understanding and communication of any changes made Record of visits and workshops planned and undertaken Sense check of improved understanding by staff The position is filled A live communications plan in place and happening A programme is in place 		
PROMOTING THE RIGHT VALUES AND CULTURE: The service should take early action, such as monitoring overtime, to improve the wellbeing of staff.	P29	<ul style="list-style-type: none"> Review the monitoring arrangements for overtime for all staff and implement any revised arrangements Provide training on the monitoring and risks of fatigue Report regularly on overtime in a meaningful way Review other Services’ HMICFRS reports as published to identify notable practice 	SB	<ul style="list-style-type: none"> Monitoring arrangements in place and understood Training delivered Overtime of staff accurately recorded Regular reports produced 		
PROMOTING THE RIGHT VALUES AND CULTURE: The service should assure itself that senior managers are visible to act as role models by demonstrating their commitment to service values through their behaviours.	P29	<ul style="list-style-type: none"> CFO to undertake visits to all operational watches on an individual watch basis and visits to all non operational teams Programme of Principal Officers visits to all watches and teams for 2019/2020. All watches and teams to be visited at least once a year by a principal officer with a target of twice. Similarly, all department heads and Middle managers to have a formal visit programme to watches and teams with feedback mechanisms that are acted upon and reported against. Efforts to be made to create informal interaction opportunities too. For example, broader attendance at retirement functions/ last day presentations, open days, station events etc. Introduce a staff conference for all staff in the service Review the core values to ensure fit for purpose Increase agile working by all officers to increase contact time on stations and in departments Ensure the infrastructure supports agile working Review other Services’ HMICFRS reports as published to identify notable practice 	CFO	<ul style="list-style-type: none"> All 65 watch visits to have taken place by end Feb 2019 and visits to non operational teams by Jun 2019 Programmes of visits in place Staff recognition of increased number of attendances Conference having taken place and feedback received and acted upon Reviewed core values determined and demonstrated at all times Officers seen by station personnel more frequently All staff are able to access all they need to at all sites 		
ENSURING FAIRNESS AND PROMOTING DIVERSITY: The service should ensure	P32	(See previous actions which also cover this AFI) <ul style="list-style-type: none"> Utilisation of technology. All stations and departments to be issued with technology to allow Skype type conversations and to be used as 	CFO	<ul style="list-style-type: none"> The technology is used in a meaningful, effective and 		

HMICFRS INSPECTION 2018 – INITIAL DRAFT ACTION PLAN

<p>that leaders can demonstrate that they act on and have made changes as a direct result of feedback from staff.</p>		<p>formal communications from the top down. For example:</p> <ul style="list-style-type: none"> ○ Ask the Chief Sessions ○ SMT Briefing sessions ○ Broader interactions/debate with SMT on themes, i.e. diversity, Estates, Prevention etc. ○ Operational Updates and debates with crews ○ UPG Managers Monday briefing discussing key issues across the UPG in one hour meeting every week. <ul style="list-style-type: none"> ● Improve ‘you said – we did’ communications to ensure they are sustainable, remembered e.g. quarterly poster ● Programmed “back to the floor” activity ● Review other Services’ HMICFRS reports as published to identify notable practice 		<p>efficient manner</p> <ul style="list-style-type: none"> ● Communications taken place using technology ● Production of ‘you said we did’ communications ● Completion of ‘Back to the Floor’ activities ● Formal feedback from staff is positive 		
<p>ENSURING FAIRNESS AND PROMOTING DIVERSITY: The service should improve communications between staff and senior managers, so queries and suggestions are responded to in a timely and appropriate way.</p>	<p>P32</p>	<ul style="list-style-type: none"> ● Involving staff at all levels to contribute to strategic issues e.g. a Core Values day with all staff invited to a conference ● To develop a feedback process so that staff understand/appreciate what has/has not been done in relation to suggestions that have been made. To establish this as a key part of regular communications with timescales for progress/resolution. This should ensure matters are pursued in a timely manner ● Provide a platform to recognise and thank people for their contribution – “pat on the back” – the back page of the Green having thanks/congratulations on a weekly basis ● Using the Green more productively and ensure everyone knows when an individual is retiring or leaving and invite and encourage colleagues to attend final day/retirement speech ● Wider use of 360 appraisals and consider any shared themes from these. ● Specific and targeted group newsletters, e.g. Land and Stations. This can be managed by a communications representative from each of the groups to produce a newsletter for all staff. ● Set up communications processes to: <ul style="list-style-type: none"> ○ Enable feedback from staff / ask questions with relevant HOD/specialist to respond ○ Handle staff suggestions and ideas ○ Publish responses etc. for transparency ● Review other Services’ HMICFRS reports as published to identify notable practice 	<p>CFO</p>	<ul style="list-style-type: none"> ● Conference having taken place and feedback received and acted upon ● Take a random sample of feedback to ensure the methods are effective ● Evidence of information in the Green ● Summary of 360 themes at the different levels ● Production of relevant newsletters ● Communication developed and in use 		

Performance and Overview Committee
Forward Work Programme – 10th July 2019

Performance and Overview Committee		
10th July 2019		
1.	Performance Report – Quarter 3, 2018-19	LS
2.	Programme Report – Quarter 3, 2018-19	CFO
3.	Internal Audit Plan 2018-19 - Quarter 3 Progress Report	Anne Marie Harrop - MIAA
4.	UPG Annual Report 2018-19	SB
5.	NW Fire Control Performance Annual Report (Call Handling)	SB/HC/AL
6.	Annual Equality Monitoring Report 2018-19	MH
7.	Operational Policy and Assurance: Training Year Review 2018-19	SF
8.	HMICFRS Inspection 2018 – Action Plan Monitoring	LS
9.	Annual Prosecutions Report	LS
	Standing Items:	
	Work Programme Update	

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