

# Public Document Pack



## BEDFORDSHIRE FIRE AND RESCUE AUTHORITY

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Members of Service Delivery Policy and Challenge Group.

Bedford Borough Councillors: C Atkins and J Mingay

Central Bedfordshire Councillors: J Chatterley and D McVicar

Luton Borough Councillors: T Khan and D Franks

A meeting of **Service Delivery Policy and Challenge Group** will be held at **Conference Room, Fire and Rescue Service Headquarters, Kempston, Bedford MK42 7NR** on **Tuesday, 26 June 2018** starting at **10.00 am**.

Nicky Upton  
Democratic and Regulatory and Services Supervisor

### A G E N D A

Item	Subject	Lead	Purpose of Discussion
1.	Apologies		
2.	Election of Vice Chair 2018/19	Chair	
3.	Declarations of Disclosable Pecuniary and Other Interests	Chair	Members are requested to disclose the existence and nature of any disclosable pecuniary interest and any other interests as required by the Fire Authority's Code of Conduct (see note below).
4.	Communications	Chair	
5.	Minutes	Chair	To confirm the minutes of the meeting held on 15 March 2018. (Pages 3 - 14)
6.	Review Terms of Reference	Chair	To consider Terms of Reference (Pages 15 - 18)

<b>Item</b>	<b>Subject</b>	<b>Lead</b>	<b>Purpose of Discussion</b>
7.	Service Delivery Performance Monitoring Report (Annual Review) and Programmes to Date	DCFO	To consider a report (Pages 19 - 42)
8.	Audit and Governance Action Plan Monitoring Report	DCFO	To consider a report (Pages 43 - 54)
9.	Customer Satisfaction Report	HRes	To consider a report (Pages 55 - 64)
10.	Operational Decision Making Procedures - Exception Report	HRes	To receive a verbal update
11.	Corporate Risk Register	OAM	To consider a report (Pages 65 - 68)
12.	Work Programme 2018/19	Chair	To consider a report (Pages 69 - 74)
Next Meeting			10.00 am on 19 September 2018 at Conference Room, Fire and Rescue Service Headquarters, Kempston, Bedford MK42 7NR

### **DECLARATIONS OF INTEREST**

From 1 July 2012 new regulations were introduced on Disclosable Pecuniary Interests (DPIs). The interests are set out in the Schedule to the Code of Conduct adopted by the Fire Authority on 28 June 2012. Members are statutorily required to notify the Monitoring Officer (MO) of any such interest which they, or a spouse or civil partner or a person they live with as such, have where they know of the interest.

A Member must make a verbal declaration of the existence and nature of any Disclosable Pecuniary Interest and any other interest as defined in paragraph 7 of the Fire Authority's Code of Conduct at any meeting of the Fire Authority, a Committee (or Sub-Committee) at which the Member is present and, in the case of a DPI, withdraw from participating in the meeting where an item of business which affects or relates to the subject matter of that interest is under consideration, at or before the consideration of the item of business or as soon as the interest becomes apparent.

**For Publication**

**Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge  
Group  
26 June 2018  
Item No. 5**

**MINUTES OF SERVICE DELIVERY POLICY AND CHALLENGE GROUP  
MEETING HELD ON 15 MARCH 2018 AT 10.00am**

Present: Councillors C Atkins, J Chatterley, P Downing, P Duckett and  
J Mingay (Chair)

ACFO I Evans, SOC G Jeffery, SOC C Ball, SOC A Peckham  
and AC D Cook

17-18/SD/041 Apologies

41.1 Apologies for absence were received from Councillors D Franks and D  
McVicar.

17-18/SD/042 Declarations of Disclosable Pecuniary and Other Interests

42.1 There were no declarations of interest.

17-18/SD/043 Communications

43.1 There were no communications.

17-18/SD/044 Minutes

**RESOLVED:**

That the Minutes of the meeting held on 30 November 2017 be confirmed and  
signed as a true record.

17-18/SD/045 Service Delivery Performance Monitoring Report Quarter 2 and  
Programmes to date

45.1 The Group received the performance report for the third quarter of  
2017/18 and an update on the progress and status of the Service  
Delivery projects.

45.2 ACFO Evans reported that three new projects had been added to the  
programme report: Replacement Mobilising System 2018, Intelligence  
Led Response and Personal Protective Equipment (PPE).

45.3 SOC C Ball advised that the Service was part of a national  
collaborative project with 27 other Fire and Rescue Services, the South  
Eastern PPE Consortium, to procure replacement PPE. The contract to  
supply new PPE had been awarded to Bristol. The new PPE would be

delivered in Spring 2019. “Show and tell” sessions were being arranged with firefighters. The new PPE was lighter, safer and came in a wider variety of shapes and sizes, with PPE specifically tailored to the female shape.

- 45.4 In response to a question, SOC C Ball advised that Bristol would be providing a fully managed service and, as a result of the procurement process, this was significantly less expensive than the Service’s current PPE contract.
- 45.5 ACFO Evans advised that the co-responding project was rated red as the current trials remained on hold as the result of national negotiations on pay and conditions. It was noted that this situation was outside of the control of the Service.
- 45.6 SOC A Peckham reported on the Collaborative Working project which was rated green. The effecting entry for the Ambulance Service pilot would be discussed under a separate agenda item but had proven to be very successful. The Control Room had gained access to STORM and the Service continued to assist with vulnerable person searches, with a project evaluation taking place at the next Collaboration Board which would lead to a revised Memorandum of Understanding. This would identify how Fire and Rescue Service resources could be best directed to make a positive impact on a search.
- 45.7 ACFO Evans advised that, further to the previous update given to Members, the procurement of a drone by BFRS would now progress quicker, due to Police Joint Protective Services decision to immediately procure drones for operational reasons.
- 45.8 It was noted that the internal audit of Collaboration had identified a number of issues relating to the control framework.
- 45.9 Councillor Downing reported that he would be attending a meeting at Central Bedfordshire Council at which the Community Safety Strategy would be discussed and advised that he would be questioning why arson was not identified as one of the priorities.
- 45.10 ACFO Evans advised that the Emergency Services Mobile Communications Programme (ESMCP) was amber as it was subject to national delays and slippages which were outside of the Service’s control.
- 45.11 In response to a comment, ACFO Evans confirmed that he had initiated the intelligence led response project to review the profile of the current response in relation to the resources allocated to incidents and to assess risk to determine if the Service would benefit from a more tailored and risk-oriented approach.

- 45.12 SOC C Ball reported that the 4i mobilising system project was now business as usual, and whilst a small number of glitches awaited resolution, a closure document was being prepared.
- 45.13 In relation to the new Replacement Mobilising System Project, the consultants engaged to assist in the options appraisal had now produced a short list of three options for more detailed analysis, including indicative costs, and the report would be presented to the meeting of the Fire and Rescue Authority on 26 April 2018. Members were assured that the consultants had fully engaged with the Service during this process.
- 45.14 SOC G Jeffery provided an update on the Retained Duty System Improvement Project (RDSIP). Significant progress had been made with the new system providing additional flexibility. The next stage of the process was to fully integrate the pay system with the iTrent HR system and the payroll module had recently gone live.
- 45.15 The Wholetime Duty Management System project had been initiated to better manage whole time crew availability and improve integration with iTrent.
- 45.16 ACFO Evans then reported on the performance indicators for Quarter 3, a number of which were the subject of exception reports.
- 45.17 PI01 (primary fires) had missed its target by 15%, although this was largely as the result of a spike in Quarter 1 when the indicator had been reporting as 32% over target. This had been linked to deliberate fires and, in particular, the national trend of an increase in vehicle fires relating to criminal activity. Fire prevention work continued, with anti-arson campaigns being run across Bedfordshire. Arson would continue to be raised as an issue at Collaboration Board meetings.
- 45.18 PI02 (primary fire fatalities) had also missed target as 4 fire fatalities had occurred in 2017/18 to date. It was noted that one of these was a late call of fire, and two were suicides. Although it was recognised that the Service had limited ability to prevent certain fire deaths, this was a national indicator that was reported on by all Fire and Rescue Services.
- 45.19 PI03 (primary fire injuries) had missed its target as there had been 22 injuries as at the end of Quarter 3, 13 of which had occurred in Quarter 1. All had been minor injuries.
- 45.20 PI04 (deliberate fires) had missed its target by 36%, although there had been a significant improvement in performance in Quarter 3, performance was still being adversely affected by a large spike in Quarter 1 as discussed above.

- 45.21 PI05 (rate of accidental dwelling fires) was rated amber as it had missed its target by 7%. There had been a number of electrical fires in the quarter attributed to human error. Performance against this indicator would continue to be monitored and the avoidance of these fires would remain a focus during Safe and Well visits.
- 45.22 ACFO Evans highlighted strong performance against PI06 (deliberate building fires), which was reporting as 37% better than target, and the indicators measuring crewing levels, all of which had met or exceeded target levels. Good performance had also been achieved in relation to mobilisation to false alarms and hoax calls.
- 45.23 ACFO Evans advised that performance information on the response times was not available as there had been issues arising with the introduction of the mobile data terminals, which had created 'ghost data' affecting the reliability of the performance indicator. The issue had been raised with Essex Fire and Rescue Service and the system supplier. It was considered that performance was likely to be consistent with the 5 year average.
- 45.24 PI26 (the percentage of fire safety audits carried out on high and very high risk premises) had missed its target by 14% as the inspection programme had been re-prioritised following the Grenfell Tower tragedy as the inspection work had been directed towards the inspection and audit of all high-rise residential premises. The Group received assurances that the full audit programme would be completed by year-end.
- 45.25 PI27 (fires in non-domestic buildings) was on track to exceed its target, and performance had improved dramatically against PI28 (automatic fire detector fire alarms in non-domestic properties) following the implementation of the new call handling and mobilising policy. The number of calls to these incidents had decreased by 41% from the previous year and the number of calls not mobilised to had tripled. There had been no adverse impact from the introduction of the new mobilising policy.
- 45.26 The next steps were to more actively manage the small number of properties that continued to generate a high number of calls. There was also an increase in calls received from remote call centres.
- 45.27 ACFO Evans reported that the number of Road Traffic Collisions attended by the Service continued to increase. A large percentage of the incidents attended required the Service to either rescue individuals or make the area safe.

**RESOLVED:**

That the progress made on the Service Delivery Programme and Performance be acknowledged.

17-18/SD/046 Proposed Service Delivery Indicators and Targets 2018/19

- 46.1 ACFO Evans introduced his report on the proposed suite of indicators and associated targets for 2018/19 for approval by Members. Additional information to inform the target setting process was appended to the report and included the scope of performance indicators relating to response times and the graphical representation of performance trends to illustrate the Service's performance against its 'family group'. The majority of the indicators had been set at levels based on the three or five year average.
- 46.2 It was proposed to amend the performance indicators measuring response times so that these were in line with those published by Government. It was recognised that this would facilitate comparison with performance of other Fire and Rescue Services and would assist in the preparation for the inspection by the HMICFRS.
- 46.3 No changes were proposed to the performance indicators related to PI03 (fire fatalities), PI07 (the percentage of occasions global crewing enabled a total of nine riders on two pumps) and PI15 (percentage of Building Regulations consultations completed within the prescribed timescale).
- 46.4 The targets for PI01 (primary fires) and PI05 (accidental dwelling fires), had been set based on the five year average.
- 46.5. A 5% reduction on the five year average was being proposed for PI03 (primary fire injuries).
- 46.6 A target based on the 3 year average was being proposed for PI04 (deliberate building fires), with a 10% reduction on the 3 year average being proposed for PI06 (number of deliberate building fires).
- 46.7 Average response times would be based upon the attendance standard set in the Community Risk Management Plan (CRMP).
- 46.8 In response to a question, the Group was advised that there was no national non-emergency number that members of the public could call to reach the Fire and Rescue Service, although some members of the public called reception at Headquarters. The Service does not receive the high volume of non-emergency calls experienced by other blue light services.
- 46.9 It was proposed that a reduction of 20% on the five year average was set in relation to PI12 (number of 'false alarm malicious' and hoax calls mobilised to) and PI14 (number of 'false alarm good intent' calls mobilised to), with a target of 56% set for PI13 (percentage of 'false alarm malicious' and hoax calls not attended).

- 46.10 The target for PI16 (number of fire safety audits/inspections completed) had been reduced by 100 compared to the current performance year to enable to Service to focus on business safety advocacy.
- 46.11 A 15% reduction on the 2017/18 target was proposed for PI19 (automatic fire detector false alarms in non-domestic properties) based on current levels of performance.
- 46.12 It was recognised that targets had to be set at a level that was challenging but achievable in order to motivate staff. Consultation had taken place at Service Delivery Leadership Team level, which was then fed down through the organisation.

**RESOLVED:**

That the proposed Service Delivery Performance Indicators and Targets and Information Measures for 2018/19 be endorsed as set out in Appendix A to the report.

17-18/SD/047 New Internal Audit Reports

- 47.1 ACFO Evans presented the audit report of Collaboration that had been completed on 9 November 2017.
- 47.2 The internal auditors had made a number of recommendations, largely relating to governance and structure. These were all being progressed, including increasing engagement with operational staff.
- 47.3 In response to a question, ACFO Evans confirmed that the Ambulance Service was more engaged.

**RESOLVED:**

That the internal audit report on collaboration be considered and the associated management comments/actions be endorsed for inclusion in the Audit and Governance Action Plan Monitoring Report.

17-18/SD/048 Audit and Governance Action Plans Monitoring Report

- 48.1 ACFO Evans submitted the report on progress made to date against current action plans arising from internal and external audit reports and confirmed that there were no outstanding actions.

**RESOLVED:**

That progress made against current action plans be acknowledged.



#### 17-18/SD/049 Mobilising System Update

- 49.1 SOC C Ball reported that he had nothing further to add to his update given under the project and performance report.

**RESOLVED:**

That the update on the mobilising system be received.

#### 17-18/SD/050 Community Risk Management Plan Update

- 50.1 SOC G Jeffery provided an update on the Community Risk Management Plan (CRMP). It had been agreed that a new CRMP was required and this was currently in draft. It was proposed that the draft CRMP be presented to the next full Authority meeting for approval.
- 50.2 SOC A Peckham advised that the Service had received formal correspondence confirming a start date of 30 July 2018 for the HMICFRS inspection. As preparatory work for the inspection may commence 12 weeks prior to that date, the process may commence as early as 3 April 2018.

**RESOLVED:**

That the update on the Community Risk Management Plan be received.

#### 17-18/SD/051 Strategic Road Safety Partnership Update

- 51.1 ACFO Evans provided an update on the progress of the Strategic Road Safety Partnership, as requested by Members at the Group's previous meeting.
- 51.2 The former Bedfordshire and Luton Casualty Reduction Partnership had been rebranded under the leadership of Deputy Chief Constable Gary Forsyth to refocus partnership work and to be consistent with Boards established in Cambridgeshire and Hertfordshire. Funding to support the work of the group may be available through the Police and Crime Commissioner's Road Safety Fund.
- 51.3 The second meeting of the Partnership had been held on 14 January 2018. The Joint Protective Services' (JPS) draft Road Safety and Casualty Reduction Strategy 2017-22 was presented at the meeting and set out the Police strategy focused around four strands: education, engagement, enforcement and engineering.
- 51.4 The Police had advised that a full-time data analyst was being employed from 1 April 2018 by the JPS which would improve the quality of data to enable the JPS to focus resources on the greatest areas of risk.
- 51.5 ACFO Evans reported that Highways England had advised that it was reviewing the A421 with a view to developing a route strategy to reduce

causalities and deaths. It had also advised that it was developing a regional suicide prevention strategy.

- 51.6 In response to a question, ACFO Evans confirmed that he was satisfied with the membership of the Partnership and that members had sufficient expertise and seniority within their organisations on road safety to contribute meaningfully to the Partnership's work.
- 51.7 It was recognised that social media provided an ideal platform to promote road safety messages and to engage with younger people.

**RESOLVED:**

That the report be acknowledged.

17-18/SD/052 Review of the Effecting Entry for Medical Emergencies Pilot

- 52.1 SOC Jeffery introduced a report setting out the findings of the review of the pilot for providing assistance to gain entry to premises in the case of medical emergencies. This had previously been provided by the Police. The pilot had commenced on 1 July 2016 to improve service delivery by: reducing attendance time in support of East of England Ambulance Service Trust (EEAST), removing demand on Police resources and providing a more effective service with a reduced level of property damage.
- 52.2 During the pilot period, the Service had been called for assistance 527 times resulting in 375 attendances. On 82 occasions the Service was the first on the scene. Service crews had provided or assisted with the provision of medical care in 79 cases.
- 52.3 Although there had been some issues, including concerns regarding Service resources being detained at premises waiting to be made secure, the value of this work had been recognised and the cost to the Service of providing this support was outweighed by the contribution made to the safety of the general public and the benefits to partner organisations.
- 52.4 ACFO Evans reported that the pilot had been supported by staff as there was recognition that this was saving lives and suggested that this be incorporated into business as usual at an appropriate time. This additional capability was acknowledged as a positive addition and that its continuation should be supported.
- 52.5 The Group discussed pressures to consider transport of medically ill patients in instances where the Ambulance Service was delayed. It was noted that the Service did not currently have suitable vehicles to transport patients and that this could be considered as part of the Intelligence Led Response project.

52.6 In response to a question, ACFO Evans confirmed that the Service had a Mass Casualty Decontamination Unit that could be deployed to incidents of chemical attack, such as had recently occurred in Salisbury. ACFO Evans advised that AC Cook had recently undertaken an assurance review of its capability to respond to chemical attacks which confirmed effective arrangements are in place. The Service is also called to all acid attack incidents to provide emergency decontamination.

**RESOLVED:**

That the report be acknowledged.

17-18/SD/053 Customer Satisfaction Survey Report Quarter 3

53.1 SOC G Jeffery presented the results of customer satisfaction surveys conducted from 1 October -30 December 2017. During this period, 100% of respondents were very or fairly satisfied with the Service.

53.2 The rate of response was 53%. Surveys were conducted at the end of Safe and Well visits wherever possible.

53.3 SOC G Jeffery drew the Group's attention to the table illustrating the variety of safety issues for which advice had been given during the visits. This demonstrated the value of the visits, which were targeted at the most vulnerable residents as identified through Exeter and MOSAIC data. This vulnerability information was also submitted to the Corporate Equalities Group and was reported in the Public Sector Equality Duty report.

53.4 The Service continued to receive a number of compliments from members of the public. 11 had been received during Quarter 3.

53.5 The Service also received 3 complaints during the quarter, all of which had been resolved.

53.6 Members congratulated Officers for the continuing high levels of satisfaction with the Service.

**RESOLVED:**

That the continuing high levels of customer satisfaction be acknowledged.

17-18/SD/054 Annual Review of Partnerships

54.1 SOC G Jeffery reported that a piece of work had been undertaken to review the Service's involvement in partnerships. A report was being submitted to the Corporate Management Team with a number of proposals and would be submitted to the Group in due course.

**RESOLVED:**

That the update be received.

#### 17-18/SD/055 Hazard Alley

- 55.1 SOC G Jeffery provided an overview of the Hazard Alley Safety Centre and an outline comparison of the Service's core delivery and position on advocacy, promotion and use of the Hazard Alley facility.
- 55.2 He expressed the view that, whilst the Hazard Alley facility was an effective resource, the Service provided a number of safety education interventions delivered to school children in Bedfordshire and ran a Safety Centre at Luton Fire Station covering similar topics to Hazard Alley.
- 55.3 ACFO Evans reiterated that Hazard Alley was an excellent facility; however, there were costs for both admission and transport that had to be considered. The Service would continue to support Hazard Alley and promote it wherever possible, including through a link in the Service's new website.

#### **RESOLVED:**

That the report be received.

#### 17-18/SD/056 Operational Decision Making Procedures – Exception Report

- 56.1 There were no exceptions to report.

#### 17-18/SD/057 Corporate Risk Register

- 57.1 AC Cook presented the review of the Corporate Risk Register. There had been no changes to risk ratings in the Service Delivery Risk Register. There had been updates to three risks in the register as follows:
- 57.2 CRR02 (if we cannot fully recruit or retain adequate numbers of part time fire fighters, particularly in relation to day cover, then we will not be able to fully crew our fire appliances and thus have a detrimental impact on our service delivery due to the unavailability of our fire appliances): as reported earlier in the meeting, a number of areas such as contracts and leave were being investigated to implement a more effective and efficient recruitment and retention process for the Retained Duty System, increasing flexibility and availability.
- 57.3 CRR22 (If we have inadequate or incomplete operational pre planning policies, procedures or information available to us then we can potentially risk injury or even death to our fire fighters and staff): the National Operational Guidance Programme had issued training specifications in 9 areas. One of these was Breathing Apparatus and the Service was waiting for gap analysis toolkits to be developed to enable an analysis to be completed.

57.4 CRR44 (if the Service does not have a reliable accurate system for continuously monitoring and updating the availability and skills of Retained Duty System (RDS) operational personnel and RDS appliances, then there could be delays in mobilising the nearest available appliance to emergency incidents. This could significantly impact upon the effectiveness and mobilising of our emergency response, increase risks to fire fighters and the community, reduce our ability to monitor performance, undermine RDS employees confidence in the Service and could result in negative media coverage): the Service was in contact with Essex Fire and Rescue Service to understand the requirements for integration of Gartan with 4i. Information on the Application Process Interface had been requested to enable both systems to be developed to undertake the task of automatic updates on crewing availability.

**RESOLVED:**

That the review by the Service of the Corporate Risk Register in relation to Service Delivery be approved.

17-18/SD/058 Work Programme

- 58.1 The Group received its updated work programme for information.
- 58.2 A request was made to add the results of the HMICFRS Inspection to the work programme when it was available.
- 58.3 Councillor Chatterley thanked SOC G Jeffery for organising a visit to Luton Fire Station for a group of Looked-After Children during the half-term break.

**RESOLVED:**

That the work programme be received.

The meeting finished at 12.25pm.

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**For Publication**

**Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
26 June 2018  
Item No. 6**

**REPORT AUTHOR: SECRETARY/MONITORING OFFICER**

**SUBJECT: TERMS OF REFERENCE**

For further information on this Report contact: Nicky Upton  
Democratic and Regulatory Services Supervisor  
Tel No: 01234 845149

Background Papers: None

Implications (tick ✓):

LEGAL		FINANCIAL	
HUMAN RESOURCES		EQUALITY IMPACT	
ENVIRONMENTAL		POLICY	
CORPORATE RISK	Known	OTHER (please specify)	
	New	CORE BRIEF	

*Any implications affecting this report are noted at the end of the report.*

**PURPOSE:**

To review the Terms of Reference for the Service Delivery Policy and Challenge Group.

**RECOMMENDATIONS:**

That Members consider the Terms of Reference for the Service Delivery Policy and Challenge Group and recommend any changes for 2018/19 to the Fire Authority.

1. Introduction

1.1 The Service Delivery Policy and Challenge Group has been established to ensure that the following areas of the Fire and Rescue Service are functioning efficiently and effectively, challenging areas of under performance as required and approving any associated policy as necessary:

- Emergency Response
- Prevention
- Protection

2. Terms of Reference

2.1 The Terms of Reference for the Policy and Challenge Group were last revised in July 2017 and are appended to this report.

2.2 Members are asked to consider the current Terms of Reference and recommend any changes required for 2018/19 to the Fire and Rescue Authority

2.3 The Terms of Reference may need to be reviewed further following any recommendations from the Governance Audit.

**J ATKINSON**  
**SECRETARY/MONITORING OFFICER**



## **SERVICE DELIVERY POLICY AND CHALLENGE GROUP**

The Service Delivery Policy and Challenge Group has been established to ensure that the following areas of Service are functioning efficiently and effectively, challenging areas of under performance as required and approving any associated policy as necessary:

- Emergency Response
- Prevention
- Protection

### **Membership**

The Group is to consist of those Members appointed by the Fire and Rescue Authority for the ensuing year or as determined by the Fire and Rescue Authority.

One elected Member will be nominated as Chair of the Group by the Fire and Rescue Authority at its annual meeting and another elected Member will be nominated as Vice Chair at the first Group meeting held after the annual meeting. The Group may co-opt onto its membership any person, such as representatives or members of groups, who may provide specialist information or skills in assisting the Group to reach its aims and objectives set out below.

### **Quorum**

Business shall not be transacted at any meeting of the Service Delivery Policy and Challenge Group unless at least three Members are present and at least one Member from two constituent authorities.

### **Support**

The Group will be supported by the individual Principal Officer with responsibility for Service Delivery, the Service Delivery Team and members of the Strategic Support Team.

### **Regularity of Meetings**

The Group is to meet a minimum of four times a year. Other meetings can be called when deemed necessary by any member of the Group and following agreement with the Group Chair.

### **Reporting**

The Group has no delegated power to take decisions but its minutes are submitted to the FRA under a covering report from the Group's Chair with any recommendations.

## **Terms of Reference**

1. To consider and report as necessary on performance in respect of the Service Delivery Directorate functions and be involved in the setting and monitoring of Service targets.
2. To approve the Service Delivery Sections of the Fire and Rescue Authority's Community Risk Management Plan (CRMP) and associated annual action plans.
3. To consider and approve the Service Delivery Strategy and associated annual action plans.
4. To monitor the progress of the Service Delivery projects identified in the Community Risk Management Plan.
5. To commission and oversee reviews into specified areas of work within the Service Delivery Directorate.
6. To oversee the Community Risk Management Plan consultation processes, consider any responses, and make changes where appropriate.
7. To consider any external reports relating to the Service Delivery functions.
8. To Monitor progress of Blue Light Collaboration projects
9. To monitor the effective identification and management of corporate risks relating to Service Delivery functions.

*Revised Terms of Reference agreed by the CFA on 7 September 2011*

*Updated for change of Authority name – December 2012*

*Quorum included – 25 June 2014*

*Reporting Statement included – FRA Meeting 21 July 2016*

*Revised Terms of Reference Item 8 added and item FiReControl project removed – FRA Meeting 19 July 2017*

**For Publication**

**Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge  
Group  
26 June 2018  
Item No. 7**

**REPORT AUTHOR: DEPUTY CHIEF FIRE OFFICER**

**SUBJECT: SERVICE DELIVERY PROGRAMME AND PERFORMANCE 2017/18 - QUARTER FOUR (Year End) 2017-18 (April 2017 to March 2018)**

For further information on this Report contact: Adrian Turner  
Service Performance Analyst  
Tel No: 01234 845015

**Background Papers:**

Previous Service Delivery Quarterly Programme and Performance Summary Reports

Implications (tick ✓):

LEGAL			FINANCIAL	✓
HUMAN RESOURCES		✓	EQUALITY IMPACT	✓
ENVIRONMENTAL		✓	POLICY	✓
CORPORATE RISK	Known	✓	CORE BRIEF	
	New		OTHER (please specify)	

*Any implications affecting this report are noted at the end of the report.*

**PURPOSE:**

To provide the Service Delivery Policy and Challenge Group with a report for 2017/18 Quarter Four, detailing:

1. Progress and status of the Service Delivery Programme and Projects to date.
2. A summary report of performance against Service Delivery indicators and associated targets for Quarter 4 2017/18 (April 2017 - March 2018).

**RECOMMENDATION:**

Members acknowledge the progress made on the Service Delivery Programmes and Performance and consider any issues arising.

1. Programmes and Projects 2017/18
- 1.1 Projects contained in this report have been reviewed and endorsed in February 2017 by the Authority's Policy and Challenge Groups as part of their involvement in the annual process of reviewing the rolling four-year programme of projects for their respective areas in order to update the CRMP in line with the Authority's planning cycle.
- 1.2 The review of the current programme of strategic projects falling within the scope of the Service Delivery Policy and Challenge Group has confirmed that:
  - One new project has been added to the Service Delivery portfolio in the last period:
    - **Fleet Management System** replacement Project
  - The **Asset Tracking System** Project is reported under Business Systems Improvement (Corporate Services) but also included here for information.
  - All existing projects continue to meet the criteria for inclusion within the strategic improvement programme.
  - All existing projects remain broadly on track to deliver their outcomes within target timescales and resourcing, apart from Co-Responding which is still subject to ongoing national negotiations and delays.
  - Are within the medium-term strategic assessment for Service Delivery areas; and
  - The current programme is capable of incorporating, under one or more existing projects, all anticipated additional strategic improvement initiatives relating to Service Delivery over the next three years.
- 1.3 Full account of the financial implications of the Service Delivery Programme for 2017/18 to 2020/21 has been taken within the proposed 2017/18 Budget and Medium-Term Financial Plan, as presented to the Authority for agreement in February 2017.
- 1.4 Other points of note and changes for the year include the following:
  - The Corporate Management Team monitors progress of the Strategic Projects monthly. The Strategic Programme Board will now review the Programme quarterly with the next Programme Board review scheduled on 07 September 2018.

The status of each project is noted using the following key:

Colour Code	Status
GREEN	No issues. On course to meet targets.
AMBER	Some issues. May not meet targets.
RED	Significant issues. Will fall outside agreed targets.

## 2. Summary and Exception Reports Q4 – 2017/18

### **Project Exceptions:**

- 2.1 The **Co-Responding Project** is on status Red. There is no change from the last report as the current trials remain on hold and are subject to the ongoing national negotiations. This is outside local control.
- 2.2 The **Emergency Services Mobile Communications Programme (ESMCP)** remains on Amber due to national changes to the timeline for delivery, which is also outside Service control.
- 2.3 **Collaborative Working** - Previous consideration of Dunstable Fire Station as a possible new co-location is not proceeding. This initiative is now closed.

## 3. Performance

- 3.1 In line with its Terms of Reference, the Service Delivery Policy and Challenge Group is required to monitor performance against key performance indicators and associated targets for areas falling within the scope of the Group. It has been previously agreed by the Group, that in order to facilitate this, it should receive quarterly summary performance reports at each of its meetings.
- 3.2 This report presents Members with the fourth quarter performance summary outturn for 2017/18 and covers the period April 2017 to March 2018. Performance as shown in Appendix B. The indicators and targets included within the report are those established as part of the Authority's 2017/18 planning cycle.
- 3.3 The status of each measure is noted using the following key:

Colour Code	Exception Report	Status
GREEN	n/a	Met or surpassed target
AMBER	Required	Missed but within 10% of target
RED	Required	Missed target by greater than 10%

## 4 Summary and Exception Reports

*All performance indicators are on target, except for:*

### 4.1 **Pi01 the rate and number of primary fires.**

Primary fires include a range of properties such as buildings, vehicles, agricultural crops/woodland and outdoor structures. Although the rate and number of primary fires during Q4 have fallen, the cumulative number for the year remains 7% higher than the current target. The reason for this is as a result of the increase in rate and number of primary fires reported during Q1 2017/18. Analysis of incident data reveals that the majority of primary fires attended by the Service involve dwellings and road vehicles. The increase in vehicle fires is due to an increasing trend of deliberate fires due to criminal activity. The increase in dwelling fires is attributable to a mix of both accidental and deliberate cause. Investigation and data analysis continues as the Service and partners explore the increase in primary fires and plan targeted action to address identified accidental & deliberate causes.

### 4.2 **Pi02 the rate and number of primary fire fatalities.**

Despite the ongoing excellent prevention and protection work delivered throughout our community, we have unfortunately experienced four fire fatalities during 2017/18, two occurring within Q1, one in Q2 and the fourth during Q3. The first incident related to a late call of fire where a gentleman had passed away a number of days prior to our attendance, the two following incidents involved persons that had been doused in flammable liquid and the fourth where a lady passed away some days after the actual fire. We are awaiting the findings of the Coroner's inquests to confirm the causes of these deaths.

### 4.3 **Pi03 the rate and number of primary fire injuries.**

There has been an annual total of twenty seven fire injuries during 2017/18, of which 6 were recorded within Q4. This follows the high number of thirteen during Q1, three during Q2 and five during Q3. It should be noted the majority resulted in outpatient treatment with injuries not designated serious. The Service continues to reduce the numbers of fire injuries through advice given during after incident response calls and Safe & Well prevention campaigns. This work is further supported through the use of social media and community messaging.

### 4.4 **Pi04 the number and rate of deliberate (arson) fires.**

Nationally deliberate fires are up, with Bedfordshire seeing an increase in fires involving dwellings, outdoor fires and road vehicles. Deliberate fires were higher than target (19%) and 10% higher than the previous year. The seasonal peaks are broadly comparable to previous years although Q1 was particularly high. In all three areas the rise has been attributed in part to an increase in criminal activity. This is an area of particular focus for the Service in 2018/19.

### 4.5 **Pi05 the rate and number of accidental dwelling fires.**

The Q3 accidental dwelling fire target for 2017/18 has been missed by 2%. The Service continues to analyse the data to identify emerging trends. Data

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for accidental dwelling fires shows that there has been a small reduction in candle and chimney fires when comparing figures for 2016/17 and 2017/18. Year-end review of 2017/18 increase in accidental dwelling fire numbers demonstrate 'faulty appliances' have reduced. The noted increase is in 'cooking accident' fires. BFRS Prevention, including Safe & Well, continues to focus and prioritise Cooking Safety. This intelligence has been shared internally and with partners to heighten the drive to raise awareness of the risk and increased numbers seen, to ensure continued collaborative focus on reducing occurrences.

**4.6 Pi11 The percentage of occasions when our response times for critical fire incidents were met.**

Unfortunately the introduction of Mobile Data Terminals on appliances has caused creation of 'ghost data' on the mobilising system which is affecting the reliability of performance information in relation to this indicator. Therefore no performance is reported this quarter but performance is unlikely to be inconsistent with the 5 year average. This issue is being addressed by BFRS and Essex FRS with the system supplier Remsdaq and performance will be reported once resolved.

**4.7 Pi16 The percentage of 999 calls answered in 7 seconds and Pi17 The percentage of 999 calls mobilized to in 60 seconds or less.**

The Service continues to experience difficulties in extracting the data from the mobilising system for reporting on these performance indicators and work is ongoing with Essex FRS and the system supplier Frequentis to resolve this.

**4.8 Pi26 The percentage of fire safety audits carried out on high and very high risk premises.**

At the year-end we have inspected 100 of the 112 identified High and Very High risk premises, the 12 that remain uninspected are because of the following reasons:

- Yarlswood is Crown Property and therefore we are not the enforcing authority in this case. This is done by the Crown Inspectorate.
- 6 High risks have been postponed as the premises are currently being redeveloped
- 3 High risks are not audited: one is Luton Town FC as this is covered by other inspections, one is a derelict building in Luton and the other one is the Shell Depot at Luton Airport and is based on its operational risk rather than its fire safety risk.
- 2 High risks have been extended to a 2 yearly interval rather than yearly audit following a desk top review as the premises are well managed, they have good fire safety prevention in place and previous audits have all been satisfactory.

**ANDREW HOPKINSON  
DEPUTY CHIEF FIRE OFFICER**

## SERVICE DELIVERY PROGRAMME REPORT

Project Description	Aim	Performance Status	Comments
<p><b>2018 Replacement Mobilising</b></p>	<p>To deliver a new mobilising system that is ESMCP compliant.</p>	<p><b>Green</b></p>	<p><b>09 May 2018: 2018 Replacement Mobilising Project (RMP)</b></p> <p>The project status is currently Green. The project is now moving into the Procurement stage. The BFRS Options Appraisal for a new mobilising system to replace Frequentis and Remsdaq is now complete, and the FRA has approved a partnership with Cambs and Suffolk Fire and Rescue Services. Work has started on defining the Programme governance structure and how it will be resourced. The new mobilising system Project Breakdown Structure (PBS) has been aligned to the national ESMCP PBS, to facilitate regional reporting, and to help identify the cross-over points between RMP and ESMCP.</p> <p>Procurement for the new system will start shortly and will be led by Cambridgeshire Fire and Rescue Service (CFRS).</p>



Project Description	Aim	Performance Status	Comments
<b>4i Mobilising</b>	Replace mobilising system to provide resilient, dynamic mobilisation of Fire Service assets.	<b>Completed</b>	<p><b>09 May 2018: 2018 4i Mobilising Project</b></p> <p>The project status is “Completed”; the expected benefits and functionality notified to the Home Office have now all been delivered. The auto-failover element of the resilience benefits was removed from the Remsdaq contract with Home Office agreement. During the first year the 4i system was available for 99.9% of the time and recorded and managed 23,350 incidents. Data mobilisation is now functional on all stations, joint ways of working have been in place for 2 years, and training has been completed on all stations. BFRS employees have received Frequentis configuration training and an Essex FRS Senior Network Analyst will be available to provide ongoing support as required. Overall the respective teams have been very committed and hard-working, to ensure successful completion of the project, with appropriate levels of resilience.</p> <p>A Project Closure Report has been drafted for submission to the Project Board. The project exceeded its budget by £370,000 to cover cost over-runs and extended internal resources.</p>
<b>Asset Tracking</b>	To accrue the benefits of transferring from a server based system to a cloud based asset tracking system.	<b>Green</b>	<p><b>10 May 2018: Asset Tracking System</b></p> <p>The project is status Green, and progressing as expected within the agreed timescale. Most of the recent work has been investigating the benefits of transferring from a server based system to a cloud based system. A Paper is being prepared for CMT to be presented in July, laying out the pros and cons of each approach, and seeking agreement for the preferred direction. Following this, detailed planning will then be undertaken for delivery.</p>

Project Description	Aim	Performance Status	Comments
Co-responding	To develop a co-responding capability with support East of England Ambulance to support community health and outcomes.	Red	<p><b>17 May 2018: Co-Responding</b></p> <p>This project remains on Red, and it remains on hold due to the on-going national negotiations. This is outside BFRS control.</p>

Project Description	Aim	Performance Status	Comments
<b>Collaborative Working</b>	Exploring opportunities for collaborative working with other agencies	<b>Green</b>	<p><b>14 May 2018: Collaborative Working</b></p> <p><b>Estates:</b></p> <p><b>Co-Location: Exploring the potential of sharing estates and the opportunity of building of a joint Headquarters site. (CSP&amp;C Group)</b></p> <p>The feasibility study for a shared Headquarters building is with BFRS in draft form and the Project Governance arrangements are drafted and waiting agreement with Bedfordshire Police. East of England Ambulance NHS Services Trust has made a late expression of interest in participating in discussions.</p> <p>Co-locations in Ampthill, Barkers Lane and Leighton Buzzard are fully operational and in Leighton Buzzard work is underway to expand the washroom facilities to achieve Health and Safety compliance and future proofing following increase to the female Police staff numbers</p> <p>Co-locations or “Hotdesking” in other Fire stations are not under consideration at this time with previous interest being put on hold.</p>

Project Description	Aim	Performance Status	Comments
<b>Collaborative Working, cont....</b>	Exploring opportunities for collaborative working with other agencies	<b>Green</b>	<p><b>Estates, cont.....</b></p> <p>The BPS/BFRS shared facility in Bury Park Community Centre Luton is now in use and a formal launch occurred on April 5th An event in Alzheimer’s Action week with a Safe and Well theme is arranged for May 21st.</p> <p>A trial arrangement with EEAST in Stopsley Fire Station is in progress and will be evaluated in July 2018.Previous consideration of Dunstable Fire Station as a possible new co-location is not proceeding.</p> <p><b>Operations:</b></p> <p><b>Unmanned Aircraft Vehicle (UAV):</b> This is not now being procured jointly with Police and a meeting with Norfolk Fire Service on May 10th found agreement for us to collaborate with them on procurement and training.</p> <p><b>Body Worn Camera Technology:</b> A trial will proceed when the Data Management Policy has been assimilated into a single Policy for all data recording equipment.</p> <p><b>Red Routes:</b> Bedfordshire Police are now providing monthly information extracted from their incident mapping to enable a trial in Luton to commence with Control and Station Commander working closely to implement BFRS vehicles returning back to station through hotspot areas.</p> <p><b>STORM access by BFRS Control:</b> Bedfordshire Police are now routinely sending live information by email from STORM reporting system to all Fire Control staff to inform mobilisation and incident management.</p>

Project Description	Aim	Performance Status	Comments
<b>Collaborative Working, cont....</b>	Exploring opportunities for collaborative working with other agencies	<b>Green</b>	<p><b>Response:</b>  <b>Assisting the EEAS in Gaining Entry to Property in a Medical Emergency: To assist EEAS in gaining entry to premises in emergency situations. (SDP&amp;CG):</b> This has been evaluated with positive outcome and is now part of “Business as usual”. The evaluation report has been discussed at FRA and Blue Light Collaboration Programme Board.</p> <p><b>Co-Responding: Pilot scheme between BFRS and EEAST to provide emergency medical cover to preserve life until the arrival of either a Rapid Response Vehicle (RRV) or an ambulance. (SDP&amp;CG):</b> Currently on hold subject to national circumstances.</p> <p><b>Vulnerable Person Search: Explore potential to assist BPS in responding to missing vulnerable persons:</b> An evaluation was completed which identified a number of learning points. This is now “Business as usual” with the benefit of learning and a revised Memorandum of Understanding.</p> <p><b>Motorcycle capability:</b> There is an exploration in progress of how BFRS might deploy motorcycles for purposes other than supporting “Biker Down training” and there is ongoing dialogue with Bedfordshire Police and National Association of Blood Bikes.</p>

Project Description	Aim	Performance Status	Comments
<b>Collaborative Working, cont....</b>	Exploring opportunities for collaborative working with other agencies	<b>Green</b>	<p><b>Support Services:</b></p> <p><b>Joint Chaplaincy:</b> The new Deputy Chief Constable has assumed responsibility for taking this forward and report back on options to Blue Light Collaboration Programme Board.</p> <p><b>Procurement Opportunities:</b> BFRS are Jointly procuring a Drone with Norfolk Fire and Rescue Service.</p> <p><b>Resource Management:</b> BFRS is currently in discussion with Bedfordshire Police regarding potential for a shared Information Governance collaboration to achieve compliance the incoming GDPR legislation in a cost effective way. This will be one of a number of options under consideration.</p> <p><b>Blue Light Collaboration Project Board:</b> This has changed to Bi-monthly meetings and has been redesignated as a Programme Board. It oversees collaboration including agreeing resource allocation for individual work streams. Additionally the Board seeks out opportunities for further projects which provide benefits for service delivery, community safety or provides resource efficiency gains. To this end an operational sub-tier is to be established following a formative conference with Bedfordshire Police in mid-2018 which aims to secure increased ownership of collaboration and collaborative ideas generation across both organisations.</p> <p>An RSM Tenon Audit was undertaken and reported on in latter part of 2017, with five specific actions identified. These actions were all undertaken and completed to the target date of March 31st 2018.</p>

Project Description	Aim	Performance Status	Comments
<b>Community Defibrillator Project</b>	Sponsor and deliver community located defibrillators.	<b>Completed</b>	<p><b>20 May 2018: Community Defibrillator Project</b></p> <p>The Community Defibrillator project is now completed, and the on-going support and maintenance activities transferred to BaU. The Project Closure report was submitted to the last Programme Board, initially sent back for some additional information, and has subsequently been amended, re-approved and sent back to the Programme Board for formal approval to close.</p> <p>The project was to initially purchase and install 43 units and their cabinets for the identified locations. Since 2013 106 defibrillators and cabinets have been distributed across all of Bedfordshire at an approximate cost of £175,000 (not including on-going maintenance/consumables), more than double the original commitment. £93,000 was secured in grant funding and BFRS provided the remainder. The Service commitment to fund replacement consumables ends in 2019.</p> <p>All objectives were met and exceeded the original scope of the project by a large margin. It is recommended that the project is closed, and a Project Closure report has been prepared.</p>

Project Description	Aim	Performance Status	Comments
<b>Emergency Services Mobile Communications Programme (ESMCP)</b>	Established to meet future requirements for mobile voice and data communications for the emergency services, to replace and upgrade the current Airwave System, which is reaching the end of its contracted lifespan. This is a national project led by CFOA and the Home Office.	<b>Amber</b>	<p><b>09 May 2018: Emergency Services Mobile Communications Programme (ESMCP)</b></p> <p>The ESMCP Project remains rated Amber due to the on-going national delays, which are outside local control. The Home Office is now considering a possible change of approach to Incremental delivery (a phased approach that could see parts of ESN adopted sooner); a national Programme update is expected during May. User transition onto ESN for the Eastern region will now slip into 2020 or later. Detailed planning is subject to direction from the Home Office.</p> <p>In the meantime, the Service continues to work with other FRSs in the region; the Critical Operations Locations list has just been updated. a Supplier Contract Dates report and a training Needs analysis has been submitted to the Home Office, and work is underway on a Direct network Service Provider (DNSP) analysis. An operational Data Usage workshop is planned for early June, following an expected visit to Essex FRS from the Home Office NFCC lead for Benefits Realisation and Exploitation.</p> <p>The BFRS Options Appraisal for a new mobilising system to replace Frequentis and Remsdaq is now complete, and the FRA has approved a partnership with Cambs and Suffolk Fire and Rescue Services. Work has started on defining the Programme governance structure, and the new mobilising system Project Breakdown Structure (PBS) has been aligned to the national ESMCP PBS, to facilitate regional reporting. Procurement for the new system will start shortly and will be led by CFRS.</p>



Project Description	Aim	Performance Status	Comments
<b>Fleet Management</b>	To replace the current Fleet Administration system which is at end of life.	<b>Not started</b>	<p><b>15 May 2018: Fleet Management System</b></p> <p>Following a CMT meeting on 14 May 2018 the decision was taken to initiate a formal project for the replacement Fleet Administration application, which will be reported through CMT. The next stage is Discovery and project scoping, which will begin as soon as resources are identified to manage the project.</p> <p>This may be linked to the Asset Management System project, subject to what is discovered during the scoping phase.</p>
<b>Intelligence Led Response (ILR)</b>	To improve our services through local risk profiling, and improvements in data capture, processing and analysis	<b>Not started</b>	<p><b>17 May 2018: Intelligence Led Response</b></p> <p>This project has not yet started. Following Service restructure the role of Project Executive has been re-allocated to Head of Protection and Project Sponsor to DCFO. The Project business case will now be prepared and discussed with the DCFO prior to production of the Project Initiation Document (PID).</p>

Project Description	Aim	Performance Status	Comments
PPE (Bristol)	To replace the current supplier Ballyclare with a consortium supplier Bristol	Green	<p><b>10 May 2018: PPE Project - Bristol</b></p> <p>The Project status is Green. Internally the new equipment is being displayed at each station, for each fire fighter to try on. The 14 week demo cycle is half way through, with positive feedback received to date. The project team internally are now looking at the next set of Bristol paperwork that has come through, planning the sizing of kit for all fire fighters, to ensure we meet our manufacturing window, currently estimated to be February 2019. The detailed sizing work should start in October 2018.</p> <p>Rollout is currently estimated to be February to May 2019. The decommissioning of Ballyclare kit is in its early stages. Budget estimates have been completed and a Paper will be presented to SDLT in June with the three options for uniform ensembles, and a recommendation for the preferred option.</p>

Project Description	Aim	Performance Status	Comments
<b>Retained Duty System Improvement Project (RDSIP)</b>	To deliver improvements to the effectiveness, efficiency and economy of the operation of the Retained Duty System within Bedfordshire Fire and Rescue Service.	<b>Green</b>	<p><b>17 May 2018: Retained Duty System Improvement Project (RDSIP)</b></p> <p>The RAG status for this project is Green (Unchanged from the last report).</p> <p><b>Phased alert</b> – The trial at all stations has been successfully completed with no reported issues of mobilising or alerting of the crews on the various group settings. The Service is now in a position to proceed with full implementation and Service policies are in the process of being reviewed / amended to include the option of phased alert. To support local monitoring of availability and phased alerting, an additional screen / monitor has been installed at Potton fire station and this has proved very successful during these trials. Further screens have now been delivered to the Service and arrangements for fitting in all On call (RDS) Stations is underway. Additional work has been instigated through Gartan, with the aim to improve the availability module, enabling Service Control to determine the availability of appliances, through phased alert, and take action to address any potential appliance deficiencies.</p> <p><b>Payroll</b> – The module went live on the 1st March at all On call (RDS) Stations and a parallel run was conducted with the recordings on the FSE111 and iTrent. This exercise resulted in several issues being discovered with the accuracy of the old Pers 13a claim forms and the contents of the claims that had been submitted previously. In order to resolve these issues, stations have been retrained on the module to ensure accurate data is recorded, and all incorrect entries and claims have been rectified.</p>

Project Description	Aim	Performance Status	Comments
<b>Retained Duty System Improvement Project (RDSIP)</b>	To deliver improvements to the effectiveness, efficiency and economy of the operation of the Retained Duty System within Bedfordshire Fire and Rescue Service.	<b>Green</b>	<p><b>Payroll, cont....</b></p> <p>The On call (RDS) pay claims for April have been processed using the data on Gartan and a further parallel run has been completed to ensure that all claims are valid. Any identified issues have been returned to the stations for clarity and the Service plans to cease the use of Pers 13a forms for May claims and will move solely to the Gartan module. Despite the errors that have been identified during the parallel run, the system has proved to be 100% accurate in processing the data inputted and the pay file that results in the entries. The pay file has been successfully integrated in the iTrent system, and no issues were identified as a result of this.</p> <p><b>Service Policies</b> – The majority of Service policies relating to On call (RDS) have been amended to serve as a formal basis for negotiations / consultation with the representative bodies and On call staff, this will include Pro rata retainer, phased alert and increased flexible working in leave arrangements and cover commitment.</p>

Project Description	Aim	Performance Status	Comments
<b>Wholetime Duty Management System</b>	To procure and implement a replacement wholetime duty management system which enables effective and efficient management of operational crewing and supports flexible ways of working to meet the challenges facing a modern fire and rescue service.	<b>Green</b>	<p><b>15 May 2018: Wholetime Duty Management System (Rota Replacement):</b></p> <p>The project status is Green. The tender has successfully started and potential suppliers have responded within the formal tender process. The Service is planning on hosting three potential suppliers, June 2018, to scenario test their products. Following the scenario testing, the Service will be in position to formally award a contract to the successful supplier.</p>

**APPENDIX B**

**SERVICE DELIVERY PERFORMANCE 2017/18 Quarter Four**

Measure				2017-18 Quarter 4					
No.	Description	Aim	2017-18 Full Year Target	Average over last 5 years	2016-17 Q4	Q4 Actual	Q4 Target	Performance against Target	Comments
Pi 01a	The rate of primary fires (per 100,000 population)	Lower is Better	156.22	164.44	159.55	166.67	156.22	Amber	Missed target by 7%
Pi 01b	The number of primary fires		1006	1057.00	1045	1077	1006		
Pi 02a	The rate of primary fire fatalities (per 100,000 population)	Lower is Better	0.47	0.43	0.61	0.62	0.47	Red	Aim to achieve fewer than 3 annual fatalities
Pi 02b	The number of primary fire fatalities		3	2.80	4	4	3		
Pi 03a	The rate of primary fire Injuries (per 100,000 population)	Lower is Better	3.25	3.80	3.82	4.18	3.25	Red	Aim to achieve fewer than 22 annual injuries
Pi 03b	The number of primary fire injuries		21	24.40	25	27	21		
Pi 04a	The rate of deliberate (arson) fires per (10,000 population)	Lower is Better	11.37	11.67	12.28	13.57	11.37	Red	Missed target by 19%
Pi 04b	The number of deliberate (arson) fires		732	750.40	804	876	732		

Measure				2017-18 Quarter 4					
No.	Description	Aim	2017-18 Full Year Target	Average over last 5 years	2016-17 Q4	Q4 Actual	Q4 Target	Performance against Target	Comments
Pi 05a	The Rate of accidental dwelling fires (per 10,000 dwellings)	Lower is Better	14.76	14.76	14.45	15.02	14.76	Amber	Missed target by 2%
Pi 05b	The number of accidental dwelling fires		386	381.60	378	393	386		
Pi 06	The number of deliberate building fires	Lower is Better	96	69.20	56	58	96	Green	40% better than target
Pi 10	The percentage of occasions global crewing enabled 9 riders on two pump responses(wholetime)	Higher is Better	90%	96%	92%	99%	90%	Green	9% better than target
Pi 11	The percentage of occasions when our response times for critical fire incidents were met	Higher is Better	80%	75%	74%	n/a	80%	n/a	See exception report
Pi 12	The percentage of occasions when our response times for road traffic collision incidents were met	Higher is Better	80%	85%	80%	84%	80%	Green	4% better than target
Pi 13	The percentage of occasions when our response times for secondary incidents were met	Higher is Better	96%	98%	98%	97%	96%	Green	1% better than target

Measure				2017-18 Quarter 4					
No.	Description	Aim	2017-18 Full Year Target	Average over last 5 years	2016-17 Q4	Q4 Actual	Q4 Target	Performance against Target	Comments
Pi 16	The percentage of 999 calls answered in 7 seconds	Higher is Better	90%	96%	96%	n/a	90%	n/a	See exception report
Pi 17	The percentage of 999 calls mobilised to in 60 seconds or less	Higher is Better	60%	58%	45%	n/a	60%	n/a	See exception report
Pi 18	Number of "false alarm malicious" and hoax calls mobilized to	Lower is Better	132	147.2	149	104	132	Green	21% better than target
Pi 19	The percentage of false alarm malicious" and hoax calls calls not attended	Higher is Better	54%	51%	50%	54%	54%	Green	Met target
Pi 20	Number of "false alarm good intent" mobilised to	Lower is Better	657	497	525	586	657	Green	11% better than target



Measure				2017-18 Quarter 4					
No.	Description	Aim	2017-18 Full Year Target	Average over last 5 years	2016-17 Q4	Q4 Actual	Q4 Target	Performance against Target	Comments
Pi 24	The percentage of Building Regulation consultations completed within the prescribed timescale	Higher is Better	95%	98%	96%	95%	95%	Green	Met Target
Pi 25	The number of fire safety audits/ inspections completed	Higher is Better	1900	1624.8	1956	2221	1900	Green	17% better than target
Pi 26	The percentage of fire safety audits carried out on high and very high risk premises	Higher is Better	100%	n/a	n/a	89% (112)	100%	Red	Missed target by 11%
Pi 27a	The rate of non-domestic fires (per 1,000 non-domestic properties)	Lower is Better	8.00	9.04	9.12	6.82	8.00	Green	15% better than target
Pi 27b	The number of fires in non-domestic buildings		143	159.60	163	122	143		
Pi 28a	The rate of automatic fire detector false alarms in non-domestic properties (per 1,000 properties)	Lower is Better	43.74	54.61	56.88	33.61	43.74	Green	23% better than target
Pi 28a	The number of automatic fire detector false alarms in non-domestic properties (per 1,000 properties)	Lower is Better	782	964	1017	601	782		

## Information Measures Only

Measure				2017-18 Quarter 4		
No.	Description	Aim	2017-18 Full Year Target	Average over last 5 years	2016-17 Q4	Q4 Actual
Inf01	The number of RTC's attended	Lower is Better	n/a	391.40	401	473
Inf02	The number of people killed or seriously injured in road traffic collisions (Partnership Indicator)	Lower is Better	n/a	No Data Available		
Inf03	The number of water related deaths	Lower is Better	n/a	2	2	4
Inf04	The number of water related injuries	Lower is Better	n/a	1.20	1	1
Inf05	The number of missing persons (Police request) incidents attended	n/a	n/a	n/a	46	23
Inf06	The number of effecting entry (Ambulance request) incidents attended	n/a	n/a	n/a	262	206
Inf07	The number of Co-responding (Ambulance Request) incidents attended	n/a	n/a	n/a	18	4

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**For Publication**

**Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge  
Group  
26 June 2018  
Item No. 8**

**REPORT AUTHOR: DEPUTY CHIEF FIRE OFFICER  
(SERVICE DELIVERY)**

**SUBJECT: AUDIT AND GOVERNANCE ACTION PLANS  
MONITORING REPORT**

For further information on this report contact: Karen Daniels  
Service Assurance Manager  
Tel No: 01234 845013

Background Papers:

- Action Plans contained in Internal and External Audit Reports
- Action Plan contained in the Annual Governance Statement 2016/17
- Minutes of the Audit Committee dated 5 April 2012

Implications (tick ✓):

LEGAL			FINANCIAL	✓
HUMAN RESOURCES			EQUALITY IMPACT	
ENVIRONMENTAL			POLICY	✓
CORPORATE RISK	Known	✓	OTHER (please specify)	
	New		CORE BRIEF	

*Any implications affecting this report are noted at the end of the report.*

**PURPOSE:**

To report on progress made to date against current action plans arising from internal and external audit reports.

**RECOMMENDATION:**

That Members acknowledge progress made to date against the action plans and consider any issues arising.

## 1. Introduction

1.1 The Members of the Service Delivery Policy and Challenge Group previously endorsed that the Group should receive monitoring reports at each of its meetings advising of progress against current action plans arising from internal and external audit reports, and the Authority's Annual Governance Statement.

1.2 In their meeting on 5 April 2012, Members of the Audit and Standards Committee agreed that progress on the action plans be reported to each meeting of the appropriate Policy and Challenge Group and action point owners report progress by exception to the Audit and Standards Committee. This is the first report to the Service Delivery Policy and Challenge Group for the year 2018/19.

## 2. Monitoring Report of Actions Arising From Internal and External Audit Reports

2.1 The monitoring report of progress made to date against agreed actions arising from internal and external audit reports is attached as Appendix A.

2.2 The monitoring report covers, in order, the following:

- Outstanding actions from internal and external audit reports, including those reports received during 2018/19 and those from previous years, which have a proposal to extend the original completion date. There are no requests to extend the original completion date.
- Outstanding actions from internal and external audit reports, including those reports received during 2018/19 and those from previous years, which are on target to meet the original or agreed revised completion date.
- Completed actions which are subject to a subsequent or follow up audit. These will remain on the report until this audit is complete and the action validated.
- Completed actions that are of a Low risk and do not require a follow-up audit. These will be removed from the report once they have been reported as completed to the Policy and Challenge Group.
- Any actions that have been superseded by new actions. (Actions are removed from the report once they have been reported as superseded to the Policy and Challenge Group.)

2.3 There are no requests to extend the original completion date. All actions are completed subject to follow-up audit.

3. Monitoring Report of Actions Arising from the Authority's Annual Governance Statement
- 3.1 The monitoring report covers the actions within the 2016/17 Annual Governance Statement (if applicable) which was formally adopted by Members of the Audit and Standards Committee, on behalf of the Authority, at their meeting on 14 June 2017, as part of the 2016/17 Statement of Accounts.
4. Organisational Risk Implications
- 4.1 The actions identified within internal and external audit reports and the Annual Governance Statement represent important improvements to the Authority's current systems and arrangements. As such, they constitute important measures whereby the Authority's overall management of organisational risk can be enhanced.
- 4.2 In addition, ensuring effective external and internal audit arrangements and the publication of an Annual Governance Statement are legal requirements for the Authority and the processes of implementation, monitoring and reporting of improvement actions arising therefore constitute an important element of the Authority's governance arrangements.

**ANDREW HOPKINSON**  
**DEPUTY CHIEF FIRE OFFICER**

**Monitoring Report of Actions Arising from Audit Reports  
(incorporating any actions outstanding at 31 March 2018 from earlier reports)**

**APPENDIX A**

URN	Auditing Body & Source	Audit Area and Responsible Manager	Priority	Agreed Action	Progress Report to Date	Timing For Completion	Status ('Not Started', 'In Progress' or 'Completed')
<p>CPCA 1.1.1 (17/18)</p>	<p><b>RSM</b> Nov 17: Final Report (17/18)</p>	<p>Collaboration – Police and Crime Act 2017</p> <p>Partnership Development Manager and Blue Light Collaboration Board</p>	<p>Low</p>	<p>The Blue Light Collaboration Board will develop its terms of reference periodically and include key information in respect to:</p> <ul style="list-style-type: none"> <li>• Membership;</li> <li>• Meeting Frequency;</li> <li>• Reporting Requirements;</li> <li>• its integration into the wider governance structure; and</li> <li>• Resourcing agreement (including cost sharing expectations).</li> </ul> <p>This will then be approved by the Blue Light Collaboration Board at subsequent meetings.</p>	<p>The Terms of Reference has been redrafted within the timescale given and the required information included. Additionally, there is now a formal review date identified as 28 February 2019. The Board will be requested to adopt the revised TOR at their March 27th meeting.</p>	<p>Original Mar 18</p>	<p>Completed – No follow up audit required</p>

**Monitoring Report of Actions Arising from Audit Reports  
(incorporating any actions outstanding at 31 March 2018 from earlier reports)**

**APPENDIX A**

URN	Auditing Body & Source	Audit Area and Responsible Manager	Priority	Agreed Action	Progress Report to Date	Timing For Completion	Status ('Not Started', 'In Progress' or 'Completed')
CPCA 1.1.3a (17/18)	<b>RSM</b> Nov 17: Final Report (17/18)	Collaboration – Police and Crime Act 2017  Partnership Development Manager and Blue Light Collaboration Board	Low	The Blue Light Collaboration Board should consider further opportunities for emergency service staff to engage in identifying potential future collaboration opportunities and that there is an effective route to submit, triage and feedback ideas prior to consideration by the Blue Light Collaboration Board.	To complete this action, a conference is organised for August 1st 2018 which will be jointly chaired by Deputy Chief Fire Officer and Deputy Chief Constable with the National Programme Manager on Emergency Services Collaboration Working Group as Keynote speaker. The product of the conference will be a new cross agency tactical and operational multi-disciplinary Project group which is subordinate to the Blue Light Programme Board and which will generate and manage new collaborative projects borne out of team meetings across the organisations.  Additionally BFRS Partnership Development Manager attends team	Original Dec 17	Completed – no follow up audit required

**Monitoring Report of Actions Arising from Audit Reports  
(incorporating any actions outstanding at 31 March 2018 from earlier reports)**

**APPENDIX A**

URN	Auditing Body & Source	Audit Area and Responsible Manager	Priority	Agreed Action	Progress Report to Date	Timing For Completion	Status ('Not Started', 'In Progress' or 'Completed')
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					meetings to speak to a standing collaboration agenda and again to help generate new collaborative projects or joint working to produce efficiencies.		
CPCA 1.1.3b (17/18)	<b>RSM</b> Nov 17: Final Report (17/18)	Collaboration – Police and Crime Act 2017  Partnership Development Manager and Blue Light Collaboration Board	Low	The Blue Light Collaboration Board will review the Emergency Services Collaboration Working Group National Overview 2016 document and ensure that any potential themes are considered.	The Partnership Development Manager attended an Emergency Services Collaboration Working Group meeting in February to discuss some of the collaborative ideas within the Overview document with those services involved. In addition, the National Overview 2016 document is included for discussion on the Board' March 27 2018 Agenda. Any collaboration ideas from within the document that are deemed to be of interest, where potential benefits are identified, will		Completed – No follow up audit required



**Monitoring Report of Actions Arising from Audit Reports  
(incorporating any actions outstanding at 31 March 2018 from earlier reports)**

**APPENDIX A**

URN	Auditing Body & Source	Audit Area and Responsible Manager	Priority	Agreed Action	Progress Report to Date	Timing For Completion	Status ('Not Started', 'In Progress' or 'Completed')
					be explored.		
CPCA 1.1.4 (17/18)	<b>RSM</b> Nov 17: Final Report (17/18)	Collaboration – Police and Crime Act 2017  Partnership Development Manager and Blue Light Collaboration Board	Medium	The Blue Light Collaboration Board will develop a standard collaboration project planning template to appraise all projects prior to their implementation.  This will include ensuring consideration of: <ul style="list-style-type: none"> <li>• Executive and Operation leads;</li> <li>• Financial and resourcing matters;</li> <li>• Delivery timescales;</li> </ul>	The Blue Light Board made a transition in November 2017 from being a "Project Board" to a "Programme Board" This transition allows an overarching role to be established which in turn enables multiple projects to be individually managed. The new Terms of Reference for the Board specifies that every project will be managed through formal project management process and structures. This is now being done by Bedfordshire Police Project office and addresses all the required actions.	Original Dec 17	Completed – To be confirmed by follow up audit

**Monitoring Report of Actions Arising from Audit Reports  
(incorporating any actions outstanding at 31 March 2018 from earlier reports)**

URN	Auditing Body & Source	Audit Area and Responsible Manager	Priority	Agreed Action	Progress Report to Date	Timing For Completion	Status ('Not Started', 'In Progress' or 'Completed')
				<ul style="list-style-type: none"> <li>• Legal implications;</li> <li>• Training impacts; and</li> <li>• Expected operational and community benefits.</li> </ul> <p>The templates will be reviewed and approved by the Blue Light Collaboration Board prior resources being used to initiate and deliver the project. The approval will be clearly documented within the Blue Light Collaboration Board meeting minutes.</p> <p>In addition to this, the performance reporting mechanisms will need to be reviewed to ensure that milestones and benefits are monitored appropriately.</p>			

**Monitoring Report of Actions Arising from Audit Reports  
(incorporating any actions outstanding at 31 March 2018 from earlier reports)**

**APPENDIX A**

URN	Auditing Body & Source	Audit Area and Responsible Manager	Priority	Agreed Action	Progress Report to Date	Timing For Completion	Status ('Not Started', 'In Progress' or 'Completed')
CPCA 1.1.5 (17/18)	<b>RSM</b> Nov 17: Final Report (17/18)	Collaboration – Police and Crime Act 2017  Partnership Development Manager and Blue Light Collaboration Board	Low	The projects on the activity and milestone tracker would be appropriately updated to reflect the five themes agreed within the terms of reference.	All meetings and reporting under the auspices of the Blue Light Collaboration Board are now structured under the 5 themes of Estates, Operations, Response, Resource Management and Support Services. This includes the central project management documentation housed within Bedfordshire Police Project Office. Additionally a shared central repository for Blue Light Collaboration documentation provides for all existing and new projects to be grouped under these headings.	Original Mar 18	Completed – No follow up audit required

**Monitoring Report of Actions Arising from Audit Reports  
(incorporating any actions outstanding at 31 March 2018 from earlier reports)**

**APPENDIX A**

URN	Auditing Body & Source	Audit Area and Responsible Manager	Priority	Agreed Action	Progress Report to Date	Timing For Completion	Status ('Not Started', 'In Progress' or 'Completed')
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DQIRS 1.3a 16/17	<b>RSM</b> Feb 17: Final Report (16/17)  RSM Follow up Jun 18: Final Report (17/18)	Data Quality – Incident Reporting System  Head of Operations	Medium	The Head of Operations will undertake periodic lessons learnt exercise to ensure that frequent issues can be identified with regards to the input of data.  Action plans to address these issues will then be developed and monitored.	An IRS management log exists on sharepoint which allows control personnel to input status issues and allocate back to original IRS owner or IT department for system issues.  Common issues relating to owner completion are communicated via email to all PUC owners.  IT issues are logged through IRS sharepoint management site.	<b>Original</b> May 17	Completed – Confirmed by follow up audit
DQIRS 1.3b 16/17	<b>RSM</b> Feb 17: Final Report (16/17)  RSM Follow up Jun 18:	Data Quality – Incident Reporting System  Head of Operations	Medium	The Control Team will ensure that data on the number of outstanding IRS to be checked is produced and provided to ODT meetings on a monthly basis as prescribed.  The Head of Operations	Outstanding IRS reports are discussed at both Operational Command Team (OCT) meetings and Operational Delivery Team (ODT).	<b>Original</b> May 17	Completed – Confirmed by follow up audit

**Monitoring Report of Actions Arising from Audit Reports  
(incorporating any actions outstanding at 31 March 2018 from earlier reports)**

**APPENDIX A**

URN	Auditing Body & Source	Audit Area and Responsible Manager	Priority	Agreed Action	Progress Report to Date	Timing For Completion	Status ('Not Started', 'In Progress' or 'Completed')
	Final Report (17/18)			will ensure that findings are actively discussed in meetings.			
DQIRS 1.4 16/17	<b>RSM</b> Feb 17: Final Report (16/17)  RSM Follow up Jun 18: Final Report (17/18)	Data Quality – Incident Reporting System  Head of Operations	Medium	The Head of Operations will consider whether full programme refresher training will be beneficial for all staff involved in the input of IRS data.  The Head of Operations will progress development of a training package to support induction of new control staff and new fire officers.	A training package is being produced and will be available to all Primary User Code (PUC) owners as refresher training and given to all newly promoted supervisory officers as part of their development program.	<b>Original</b> May 17	Completed – Confirmed by follow up audit

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For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge  
Group  
26 June 2018  
Item No. 9

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**REPORT AUTHOR:** HEAD OF RESPONSE

**SUBJECT:** CUSTOMER SATISFACTION SURVEY REPORT  
END OF YEAR REPORT (1 APRIL 2017 – 30 MARCH  
2018)

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For further information on this Report contact: Mark Hustwitt  
Communication and Engagement Manager  
Tel No: 01234 845161

Background Papers: None

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**PURPOSE:**

To report year end results of Customer Satisfaction surveys conducted from 1 April 2017 – 31 March 2018.

**RECOMMENDATION:**

To acknowledge the high levels of customer satisfaction achieved throughout the year and note that the changes in the method of gathering data trialled during 2016/17 have now been implemented for 2017/18 following the change from Home Fire Safety Checks to Safe and Well visits.

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**1. Executive Summary**

The Service received 99% satisfaction rating from local people during 2017/18 for the services that we provided to them.

This demonstrates an overall level of satisfaction across all services surveyed and this remains consistent with previous years.

During 2017/18 Quarterly Customer Satisfaction Surveys were undertaken to establish the levels of customer satisfaction in the following service areas:

- attending an incident at a domestic property;
- attending an incident at a non-domestic property;
- conducting a Safe and Well visit (formerly Home Fire Safety Checks);
- conducting a Fire Safety Audit.

Throughout the year survey results have been reported to the Service Delivery Leadership Team, Corporate Management Team and Fire and Rescue Authority and the findings have provided opportunities for the Service, to build upon areas of sound performance and where necessary identify potential improvements.

During 2017/18 the Service has established a consistent approach for gathering data and information against our performance.

The results reflect the change from Home Fire Safety Checks to Safe and Well Visits made in April 2017. Also as most appointments for a Fire Safety Audit are made by the Service, we have changed the question in the Fire Safety Audit survey from “*How long did you have to wait for the Audit to take place?*” to “*Was the initial appointment time and date kept by the Fire Safety Officer?*”. As this change took place halfway through the year the results on this issue in Q 1 & 2 and Q 3 & 4 are not comparable.

As in previous years we have achieved high rates of customer satisfaction across those areas surveyed.

## 2. **Overall Results**

During 2017/18 we received a total of 1,506 completed surveys, compared to 1,186 in 2016/17. Of the 1,337 people who responded to the question “*How satisfied were you with our overall service?*” 1,238 (94%) agreed they were very satisfied with the service they had received with the remainder saying they were fairly satisfied.

Area Surveyed	Surveys Issued	Surveys Returned	Rate of Return 2017/18
After the Incident (Domestic)	665	351	53%
After the Incident (Non-Domestic)	80	47	59%
HFSCs / Safe and Well visits	1139	634	56%
Fire Safety Audits	845	474	56%



Area Surveyed	Return rate 2017/18	Return rate 2016/17	Return rate 2015/16	Return rate 2014/15	Return rate 2013/14
After the Incident (Domestic)	53%	40%	50%	66%	56%
After the Incident (Non-Domestic)	59%	50%	57%	60%	58%
HFSCs / Safe and Well visits	56%	49%	30%	79%	54%
Fire Safety Audits	56%	42%	75%	64%	30%

### 3 **Individual Survey Results**

#### 3.1 **After the Incident (Domestic):**

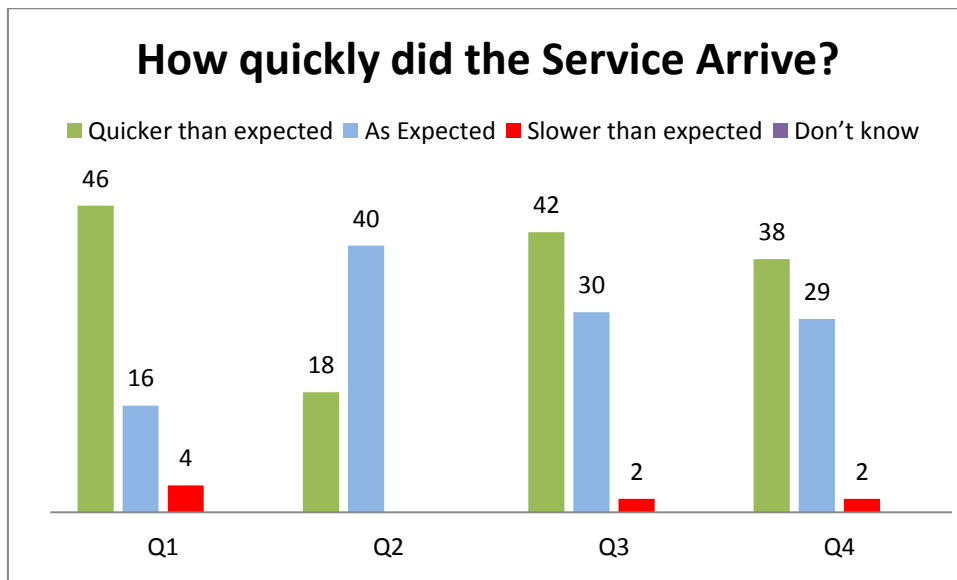
No complaints were received through the customer satisfaction surveys.

A total of 351 completed surveys were received back during the year (up from 214 in 2016/17).

Of the 351 respondents who said they contacted our Service Control, all said they were either very or fairly satisfied with the initial contact.

##### 3.1.1 *Q1 – Q4 Incident response times*

144 responders out of 267 who replied to this question (56%) stated the fire service arrived quicker than expected, whilst eight felt that we were slower than expected.



#### 3.1.2 Q1 - Q4 Overall satisfaction with Service received

All 207 respondents who replied to the question “How satisfied were you with our overall service?” were either very or fairly satisfied with the service they received.

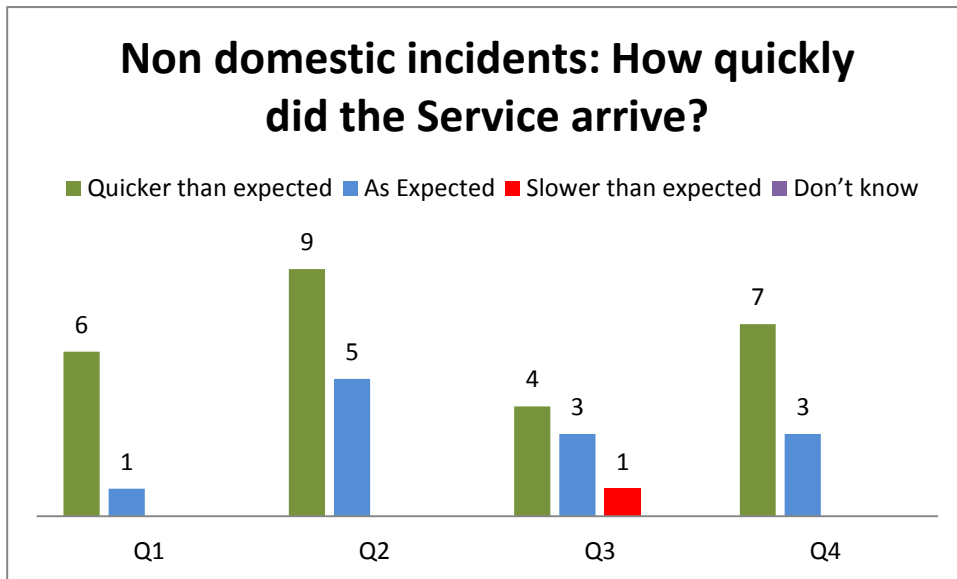


### 3.2 After the Incident (Non Domestic):

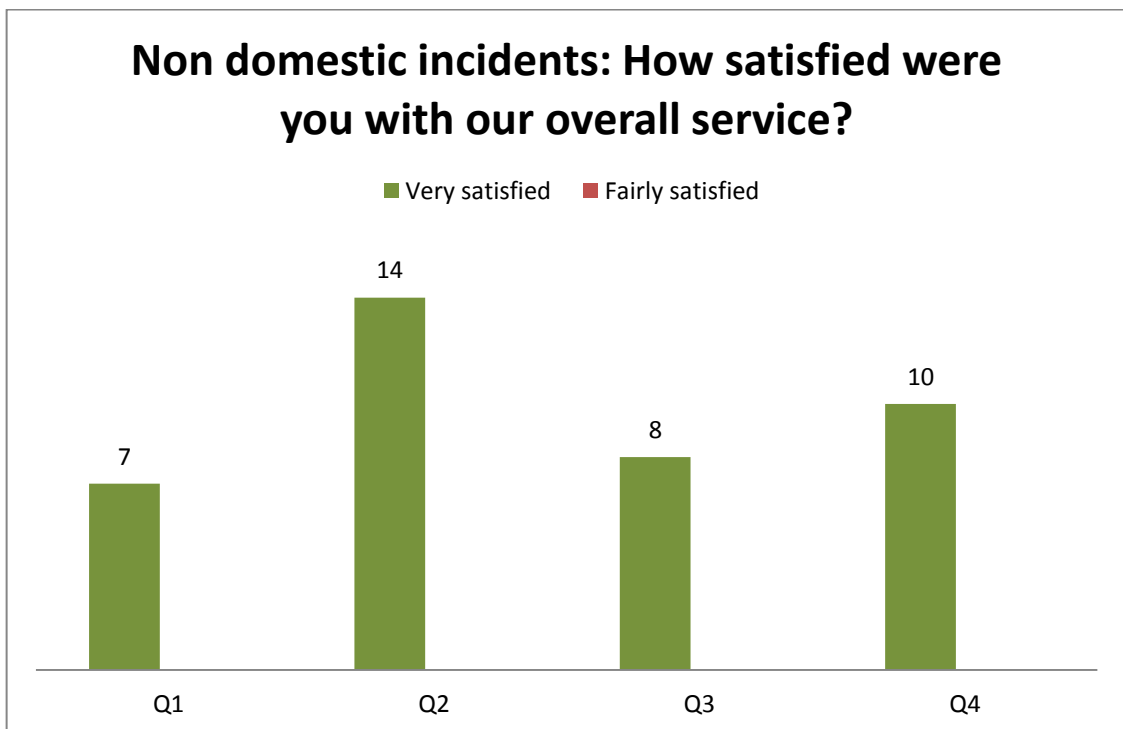
80 surveys were issued by post and 47 completed surveys were received back for reporting purposes. No complaints were received through the customer satisfaction surveys.

#### 3.2.1 Q1 – Q4 Incident response times

26 of the 39 responders (67%) to this question said the Fire Service arrived quicker than expected. Only one thought the response was slower than expected.



All of the 39 people who responded to the question said they were very or fairly satisfied with the service they received.



### 3.3 Safe and Well Visits

From April 2017 the Service has been undertaking Safe and Well visits in place of the Home Fire Safety Checks carried out previously. As these are now scheduled by the Service and based upon the needs of the most vulnerable people in our communities, some previous questions, such as “How long did you wait for your Home Fire Safety Check?” and “How easy was it to make an appointment?” are no longer applicable and have been removed from the survey. Surveys are now either completed at the end of the

visit or left with the person, or persons, receiving the visit and returned via a reply paid envelope.

Through the year 632 people responded to our survey and almost all stated they were either very or fairly satisfied with the service they received.

### 3.3.1 Q1 – Q4 Overall satisfaction with Safe and Well visits

612 of 632 respondents (97%) said they were either very or fairly satisfied with the S&WV service.

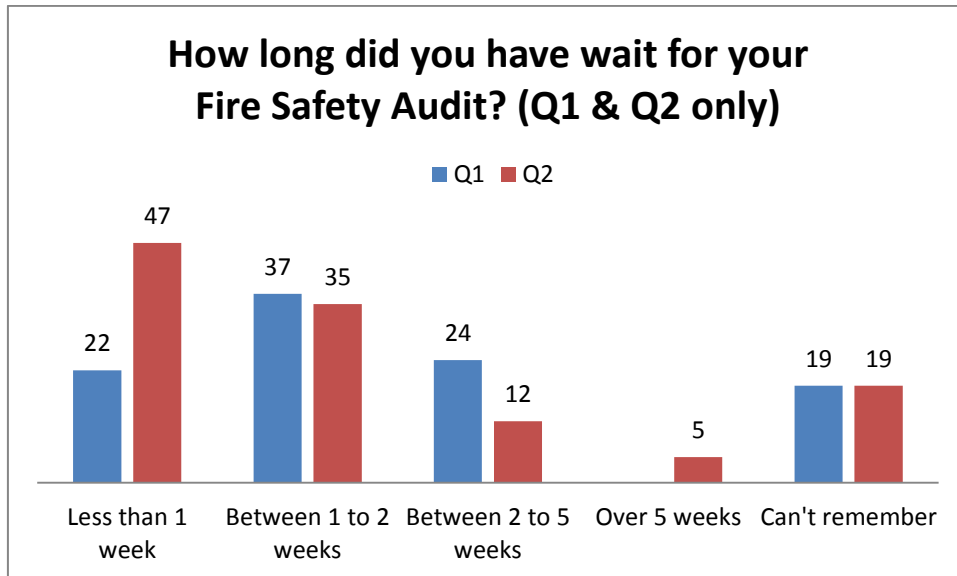


### 3.4. Fire Safety Audit Surveys:

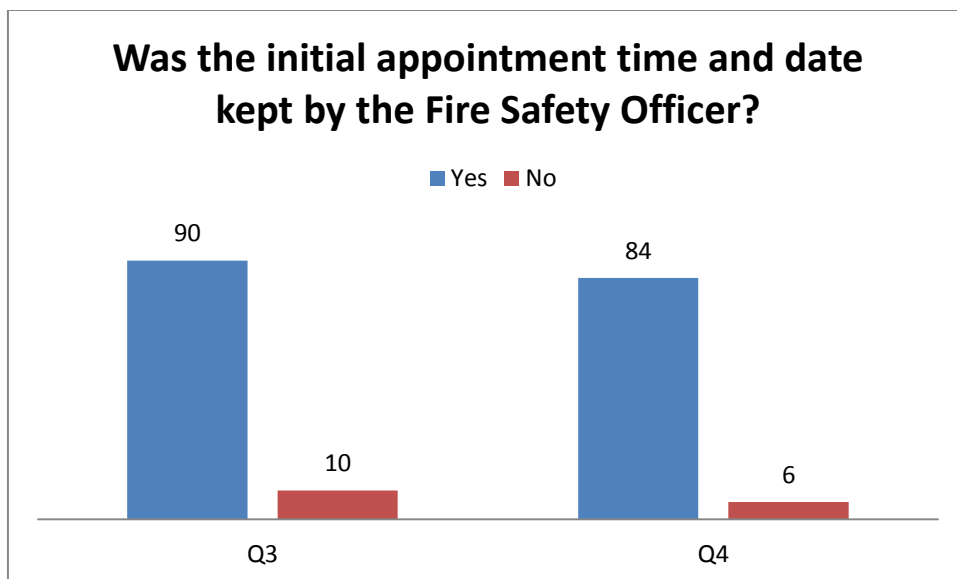
No complaints were received through the customer satisfaction survey.

A total of 845 Fire Safety Audit surveys were issued throughout the year with a return of 474 completed surveys (56%).

### 3.4.1 Q1 – Q2 How long did you wait for your Fire Safety Audit?



As mentioned in the introduction due to changes in the way appointments are made by the Protection Team the question “How long did you have to wait for your Fire Safety Audit?” was changed to “Was the initial appointment time and date kept by the Fire Safety Officer?”

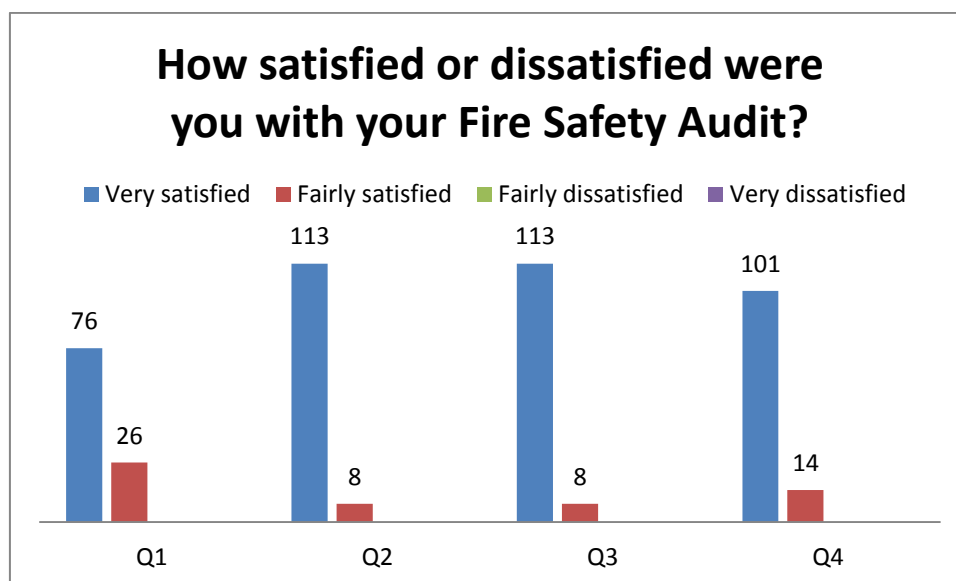


As we can see from above in 9 out of 10 cases appointments are being met.

### 3.4.2 Q1 – Q4 Did you receive a written report?

360 responders confirmed they had received a written report and stated they were either very or fairly satisfied with the contents.

### 3.4.3 How satisfied were you with your Fire Safety Audit?



459 respondents said they were either very or fairly satisfied with their Fire Safety Audit.

## 4. Compliments

The Service received 49 compliments from members of the public by letter and email during the past year, compared to 61 in 2016/17.

### From Luton Foodbank to WC John Field and Fire Cadets

Thank you so much for supporting Luton Foodbank's first Colour Run event. We really appreciate the help your volunteers gave us on the day, without their support we would not have been able to run it. Please pass on our thanks to all involved. The Colour Run has raised £4,700 for the foodbank so far, with more sponsor money due in. In the last year, Luton Foodbank gave out over 8,000 food parcels. We rely on food and money being donated from the local community, through the generosity of ordinary people. Without your support at our events and fundraisers we would not be able to give out food to those who need it in Luton. Thank you for supporting Luton Foodbank to alleviate food poverty in Luton, and we hope to work with you again soon.

### From Lord-Lieutenant of Bedfordshire, Helen Nellis to CFO Fuller regarding visit by HM Queen to Whipsnade

I was so pleased to see you at Whipsnade today and that you were able to participate in such a happy and memorable day. I know that the Fire and Rescue Service played a key role in ensuring the safety and security of HM The Queen, the Duke of Edinburgh and the guests, for which I am grateful. Please pass on my thanks to all involved. We showed that we do things professionally, but warmly in Bedfordshire!

### **From a resident from Biggleswade to Biggleswade Station**

I would like to bring to your attention the helpfulness of the Biggleswade Community Fire personnel who kindly helped me today with an unusual task. It was to remove a ring from my 'enlarged' finger and 'expert' Eddie carried this task with care and a perseverance as it was a struggle due to the type of 'metal', and with his colleagues observing. Apparently the 'instrument' has rarely been used but it was good to learn of this 'additional' skill of a Fire Officer/Firefighter. I appreciated their courtesy and help and to say a 'Thank You' to them all.

### **From Wilstead Primary School to Kempston Red Watch following a visit to the school**

Dear Fire Station thank you for coming to Wilstead Primary School, it was really funny when I beat you in the dressing race. I really enjoyed spraying the hose and taking the photo. From Layla.

Dear Kempston Fire Station Thank you for coming to Wilstead Primary School to tell us about fire. I enjoyed firing the hose. From Lisa

Dear Kempston Fire Station Thank you for coming to Wilstead Primary School to tell us about fire. We learnt all about never playing with matches. I enjoyed the poem. From Francesca.

Dear Kempston Fire Station Thank you for coming to Wilstead Primary School to tell us about fire, we learnt a lot about matches. We had loads of fun with the hose. What I enjoyed the most was when the water went in the classroom. From Dillon.

### **From a resident in Toddington to CFO Fuller following a flooding incident**

I am writing this note to express my appreciation to the Toddington Fire Crew who were so helpful to me last night. My next door neighbour is overseas for 5 weeks and I have a key to their house. At 11.00pm I noticed water coming from the roof area. I went inside to discover water pouring through the upstairs ceiling and then through to the downstairs!! I could not find the stopcock, or the mains electricity switch, got no response from Anglian Water so in desperation I called the Fire Service - what a relief when they arrived. Their response was so helpful, professional, calm and considerate and I am writing to let you know how much I valued their help and support and ask you to pass on my thanks to a fine group of men who are a great credit to your organisation.

## **5. Complaints**

Complaints against the Service are processed in accordance with the Service's three stage complaints procedure:

- Stage 1      Complaint is investigated and responded to within 10 days.
- Stage 2      The complainant is not satisfied with the outcome of Stage 1. CMT Member (or Deputy) undertakes further action as necessary to resolve the issue within 10 working days.

Stage 3      The complainant remains dissatisfied with the outcome of their complaint and the matter is referred to ACO HR and Organisational Development for further investigation and response.

Should the complainant remain dissatisfied at the end of Stage 3 the complainant may refer the matter to the Ombudsman. Any actions arising from the Ombudsman are received and monitored by ACO HR and Organisational Development.

During the year the Service received eight complaints. This compares to 14 in 2016/17 and 21 in 2015/16.

Seven complaints were satisfied at Stage 1; five were upheld and two were not upheld. One complaint is still pending.

**GARY JEFFERY**  
**HEAD OF RESPONSE**



**For Publication**

**Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and  
Challenge Group  
26 June 2018  
Item No. 11**

**REPORT AUTHOR: HEAD OF SERVICE DEVELOPMENT AND ASSURANCE**

**SUBJECT: CORPORATE RISK REGISTER**

For further information on this Report contact: Service Operational Commander Andy Peckham  
Head of Service Development and Assurance  
Tel No: 01234 845129

Background Papers: None

Implications (tick ✓):

LEGAL			FINANCIAL	
HUMAN RESOURCES			EQUALITY IMPACT	
ENVIRONMENTAL			POLICY	
CORPORATE RISK	Known	✓	OTHER (please specify)	
	New			

*Any implications affecting this report are noted at the end of the report.*

**PURPOSE:**

To consider the Service's Corporate Risk Register in relation to Service Delivery.

**RECOMMENDATION:**

That Members note and approve the review by the Service of the Corporate Risk Register in relation to Service Delivery.

1. Introduction

- 1.1 Members have requested a standing item to be placed on the Agenda of the Policy and Challenge Groups for the consideration of risks relating to the remit of each Group. In addition, the Fire and Rescue Authority's (FRA) Audit and Standards Committee receives regular reports on the full Corporate Risk Register.

1.2 An extract of the Corporate Risk Register showing the risks appropriate to the Service Delivery Policy and Challenge Group together with explanatory notes regarding the risk ratings applied is appended to this report.

## 2. Current Revisions

2.1 The register is reviewed on a monthly basis during the Service's Corporate Management Team (CMT) meetings and by CMT members between these meetings if required. A copy of the risks relevant to the Service Delivery Policy and Challenge Group are attached for your information and approval.

2.2 Changes to individual risk ratings in the Corporate Risk Register:

- **CRR00046: Due to the range of factors which deplete the number of staff available to crew fire appliances there is a risk of incurring excessive cost if pre-arranged overtime is relied upon to maintain crewing and crewing arrangements will lack resilience.** Therefore following a review of the risk, the Risk Controls and Action Plan the Inherent Likelihood has reduced from 3 to 2 and the Inherent Impact has reduced from 4 to 2 resulting in the overall Inherent rating from 12 to 4.

2.3 Updates to individual risks in the Corporate Risk Register:

- **CRR00046: Due to the range of factors which deplete the number of staff available to crew fire appliances there is a risk of incurring excessive cost if pre-arranged overtime is relied upon to maintain crewing and crewing arrangements will lack resilience:** The Service is satisfied that the policy and procedure changes have enabled greater control and monitoring of crewing levels to reduce the burden of over time expenditure. The risk matrix score has been altered to reflect the changes. The inherent score is now lowered from 12 to 4 with the residual remaining at 4. HRes continues to monitor this risk as BAU and the risk is now classed as tolerated, previously treated.

Explanatory tables in regard to the risk impact scores, the risk rating and the risk strategy.

#### Risk Rating

Risk Rating/Colour	Risk Rating Considerations / Action
<b>Very High</b>	<p>High risks which require urgent management attention and action. Where appropriate, practical and proportionate to do so, new risk controls must be implemented as soon as possible, to reduce the risk rating. New controls aim to:</p> <ul style="list-style-type: none"> <li>• reduce the likelihood of a disruption</li> <li>• shorten the period of a disruption if it occurs</li> <li>• limit the impact of a disruption if it occurs</li> </ul> <p>These risks are monitored by CMT risk owner on a regular basis and reviewed quarterly and annually by CMT.</p>
<b>High</b>	<p>These are high risks which require management attention and action. Where practical and proportionate to do so, new risk controls <i>should</i> be implemented to reduce the risk rating as the aim above. These risks are monitored by CMT risk owner on a regular basis and reviewed quarterly and annually by CMT.</p>
<b>Moderate</b>	<p>These are moderate risks. New risk controls should be considered and scoped. Where practical and proportionate, selected controls should be prioritised for implementation. These risks are monitored and reviewed by CMT.</p>
<b>Low</b>	<p>These risks are unlikely to occur and are not significant in their impact. They are managed within CMT management framework and reviewed by CMT.</p>

#### Risk Strategy

Risk Strategy	Description
Treat	<p>Implement and monitor the effectiveness of new controls to reduce the risk rating. This may involve significant resource to achieve (IT infrastructure for data replication/storage, cross-training of specialist staff, providing standby-premises etc) or may comprise a number of low cost, or cost neutral, mitigating measures which cumulatively reduce the risk rating (a validated Business Continuity plan, documented and regularly rehearsed building evacuation procedures etc)</p>
Tolerate	<p>A risk may be acceptable without any further action being taken depending on the risk appetite of the organisation. Also, while there may clearly be additional new controls which could be implemented to 'treat' a risk, if the cost of treating the risk is greater than the anticipated impact and loss should the risk occur, then it may be decided to tolerate the risk maintaining existing risk controls only</p>
Transfer	<p>It may be possible to transfer the risk to a third party (conventional insurance or service provision (outsourcing)), however it is not possible to transfer the responsibility for the risk which remains with BFRS</p>
Terminate	<p>In some circumstances it may be appropriate or possible to terminate or remove the risk altogether by changing policy, process, procedure or function</p>

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**For Publication**

**Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
26 June 2018  
Item No. 12**

**REPORT AUTHOR: DEPUTY CHIEF FIRE OFFICER**

**SUBJECT: WORK PROGRAMME 2018/19**

For further information on this report contact: Nicky Upton  
Democratic and Regulatory Services Supervisor  
Tel No: 01234 845149

Background Papers: None

Implications (tick ✓):

LEGAL			FINANCIAL	
HUMAN RESOURCES			EQUALITY IMPACT	
ENVIRONMENTAL			POLICY	
CORPORATE RISK	Known	✓	OTHER (please specify)	
	New		CORE BRIEF	

*Any implications affecting this report are noted at the end of the report.*

**PURPOSE:**

To report on the work programme for 2018/19 and to provide Members with an opportunity to request additional reports for the Service Delivery Policy and Challenge Group meetings.

**RECOMMENDATION:**

That Members consider the work programme for 2018/19 and note the 'cyclical' Agenda Items for each meeting in 2018/19.

**ANDREW HOPKINSON  
DEPUTY CHIEF FIRE OFFICER**

**SERVICE DELIVERY POLICY AND CHALLENGE GROUP (SDPCG) PROGRAMME OF WORK 2018/19**

Meeting Date	'Cyclical' Agenda Items		Additional / Commissioned Agenda Items	
	Item	Notes	Item	Notes
26 June 2018	<ul style="list-style-type: none"> <li>• Appointment of Vice Chair</li> <li>• Review Terms of Reference</li> <li>• SD Performance Monitoring Report (Annual Review) and Programmes to date</li> <li>• Audit and Governance Action Plan Monitoring Report</li> <li>• New Internal Audits Completed to date</li> <li>• Customer Satisfaction Report</li> <li>• Operational Decisions Made</li> <li>• Corporate Risk Register</li> <li>• Work Programme 2018/19</li> </ul>	Verbal Update		

Meeting Date	'Cyclical' Agenda Items		Additional / Commissioned Agenda Items	
	Item	Notes	Item	Notes
19 September 2018	<ul style="list-style-type: none"> <li>• SD Performance Monitoring Report Q1 and Programmes to date</li> <li>• Audit and Governance Action Plan Monitoring Report</li> <li>• New Internal Audits Completed to date</li> <li>• Corporate Risk Register</li> <li>• Customer Satisfaction report (Q1)</li> <li>• Annual Review of Partnerships</li> <li>• Operational Decisions Made</li> <li>• Work Programme 2018/19</li> </ul>	Verbal Update	Results from HMICFRS inspection	Added by SDPCG 15 March 2018

Meeting Date	'Cyclical' Agenda Items		Additional/Commissioned Agenda Items	
	Item	Notes	Item	Notes
29 November 2018	<ul style="list-style-type: none"> <li>• SD Performance Monitoring Report Q2 and Programmes to date</li> <li>• Audit and Governance Action Plan Monitoring Report</li> <li>• New Internal Audits Completed to date</li> <li>• Corporate Risk Register</li> <li>• Customer Satisfaction Report (Q2)</li> <li>• Operational Decisions Made</li> <li>• Work Programme 2018/19</li> <li>• Review of the Fire Authority's Effectiveness</li> </ul>	Verbal update		



Meeting Date	'Cyclical' Agenda Items		Additional / Commissioned Agenda Items	
	Item	Notes	Item	Notes
7 March 2019	<ul style="list-style-type: none"> <li>• SD Performance Monitoring Report Q3 and Programmes to date</li> <li>• Proposed Service Delivery Indicators and Targets 2018/19</li> <li>• Audit and Governance Action Plan Monitoring Report</li> <li>• New Internal Audits Completed to date</li> <li>• Corporate Risk Register</li> <li>• Customer Satisfaction Report (Q3)</li> <li>• Operational Decisions Made</li> <li>• Review of the Work Programme 2018/19</li> </ul>	Verbal Update		

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