



## BEDFORDSHIRE FIRE AND RESCUE AUTHORITY

---

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: D Franks and T Khan

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 **Wednesday, 19 September 2018** starting at **10.00 am**.

Nicky Upton  
Democratic and Regulatory and Services Supervisor

### AGENDA

Item	Subject	Lead	Purpose of Discussion
1.	Apologies		

<b>Item</b>	<b>Subject</b>	<b>Lead</b>	<b>Purpose of Discussion</b>
2.	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).
3.	Communications	Chair	
4.	Minutes	Chair	To confirm the minutes of the meeting held on 26 June 2018 (Pages 5 - 12)
5.	Service Delivery Programmes and Performance Monitoring Report Q1	DCFO	To consider a report (Pages 13 - 30)
6.	Audit and Governance Action Plan Monitoring Report	DCFO	To consider a report (Pages 31 - 36)
7.	Customer Satisfaction Report (Q1)	HP	To consider a report (Pages 37 - 52)
8.	Operational Decision Making Procedures - Exception Report	HRes	To receive a verbal update
9.	Replacement Mobilising System	HSS	To consider a report (Pages 53 - 56)
10.	Arson Case Study	HP	To consider a report (Pages 57 - 60)
11.	Corporate Risk Register	OAM	To consider a report (Pages 61 - 64)
12.	Work Programme 2018/19	Chair	To consider a report (Pages 65 - 70)

Next Meeting

10.00 am on 29 November 2018 at Conference Room, Fire and Rescue Service Headquarters, Kempston, Bedford MK42 7NR

**Item**

**Subject**

**Lead**

**Purpose of Discussion**

### **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.

This page is intentionally left blank

For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
19 September 2018  
Item No. 4

**MINUTES OF SERVICE DELIVERY POLICY AND CHALLENGE GROUP MEETING HELD ON 26 JUNE 2018 AT 10.00am**

Present: Councillors C Atkins, J Chatterley, D Franks, T Khan, D McVicar and J Mingay (Chair)  
DCFO A Hopkinson, SOC I Evans and SOC G Jeffery

18-19/SD/001 Apologies

1.1 There were no apologies.

18-19/SD/002 Election of Vice-Chair 2018-19

**RESOLVED:**

That Councillor Franks be elected as Vice-Chair of the Policy and Challenge Group for 2018-19.

18-19/SD/003 Declarations of Disclosable Pecuniary and Other Interests

3.1 There were no declarations of interest.

18-19/SD/004 Communications

4.1 There were no communications.

18-19/SD/005 Minutes

**RESOLVED:**

That the Minutes of the meeting held on 15 March 2018 be confirmed and signed as a true record.

18-19/SD/006 Terms of Reference

6.1 The Group received its current Terms of Reference for review. No changes were recommended.

**RESOLVED:**

That no changes are required to the Group's current Terms of Reference.

18-19/SD/007 Service Delivery Performance Monitoring Report (Annual Review) and Programmes to date

- 7.1 DCFO Hopkinson submitted the Quarter 4 and year-end project and performance report. He advised that a new project to replace the fleet management system had been added to the Service Delivery Programme Report. There may be opportunities to merge this with the asset tracking report and this was currently being considered.
- 7.2 The majority of projects were on track to deliver their outcomes within the targeted timescale with the exception of two projects.
- 7.3 The co-responding project which was reporting as red as the national trials had been suspended as part on the ongoing national pay and conditions negotiations.
- 7.4 The Emergency Services Mobile Communications Programme was reporting as amber due to changes in the national programme, which was currently being reviewed.
- 7.5 In relation to the co-location of the Ambulance Service at Dunstable Community Fire Station, SOC I Evans advised that the Ambulance Service had decided to locate their vehicles elsewhere and this opportunity for collaborative working was no longer being pursued.

- 7.6 In response to a question, SOC I Evans provided the background relating to the replacement mobilising system and the reasons why a procurement process had commenced for a new system. The primary reason was that Essex Fire and Rescue Service had decided to procure a new system that would be compliant with the new Emergency Services Network (ESN) with Essex Police, Kent Fire and Rescue Service and Kent Police. Therefore there was no option to extend the partnership agreement beyond the contractual end date of late 2019/early 2020. There was also a significant cost associated with upgrading the current system to ensure that it was ESN compliant and minor glitches relating to the data capture functionality with the system creating “ghost data”.
- 7.7 Members were assured that the data reporting glitches did not affect the mobilisation of appliances and resources and that the current system was more robust, effective and resilient than the Service’s previous mobilising system.
- 7.8 Members requested an update on the RMS project, including some background information, focusing on the option that had been selected as the way forward and the scope of the work to be undertaken in partnership with Cambridgeshire and Suffolk Fire and Rescue Services.
- 7.9 DCFO Hopkinson presented the performance information for Quarter 4 and year-end. The target for Pi01 (the rate and number of primary fires) had been exceeded by 7%. This was largely attributable to increases in dwelling and road vehicle fires and reflected a national increase in these types of fires. The Service was actively working with partners to identify targeted action that could be introduced to combat this increase.
- 7.10 Pi02 (the rate and number of primary fire fatalities) had missed its target as there had been four fire fatalities during the year. One incident related to a late call of fire, two had been non-accidental and the final incident the individual had passed away days after the actual fire. The findings of the Coroner’s inquests were awaited.
- 7.11 Pi03 (the rate and number of primary fire injuries) had exceeded its target by 6. There had also been 27 fire injuries during 2017/18. The majority of injuries resulted in outpatient treatment with injuries that were not designated as serious.
- 7.12 Pi04 (the number and rate of deliberate (arson) fires) had exceeded its target by 19%. This was attributable to an increase in criminal activity.

- 7.13 DCFO advised that he had discussed with the Deputy Chief Constable the undertaking of an arson case study, which would examine every step of the process, from the incident itself through to investigation and prosecution.
- 7.14 DCFO Hopkinson reported that publication of the national fire statistics for 2017/18 was anticipated shortly and the results of this would be submitted to a future meeting of the Group to benchmark performance of the Service against other services in the national league tables.
- 7.15 Pi05 (the rate and number of accidental dwelling fires) had missed its target by 2%. There had been a noticeable increase in “cooking accident” fires and Cooking Safety continued to be a focus of the Safe and Well visits.
- 7.16 In relation to the increase in deliberate fires, SOC I Evans confirmed that the Service worked closely with the Police. This included data sharing, the Arson Reduction Officers working closely with the Police Neighbourhood Policing Teams and joint fire investigations. Two prolific arsonists from the Leighton Buzzard area had been successfully prosecuted as a result of collaborative working between the Police and Fire Service.
- 7.17 Vehicle fires accounted for approximately 200 of the 874 fires which was an increase of 7% from the previous year. 569 of the fires were classified as outdoor fires.
- 7.18 DCFO Hopkinson reported that, due to data capture glitches mentioned earlier in the discussion, performance data for Pi11 (percentage of occasions when our response times for critical fire incidents were met), Pi16 (the percentage of 999 calls answered in 7 seconds) and Pi17 (the percentage of 999 calls mobilised to in 60 seconds or less) was not yet available.
- 7.19 In relation to Pi26 (the percentage of fire safety audits carried out on high and very high risk premises), DCFO Hopkinson advised that 100 of the 112 identified high and very high risk premises had been audited at year end. The remaining premises had not been inspected for a number of reasons including that some properties were being redeveloped, for some the Service was not the enforcing authority and the audits for two premises had been extended to a two-yearly interval following a desktop exercise on risk.



- 7.20 In response to a question, SOC I Evans advised that the Service was not the primary authority with responsibility for inspections of Luton Football Club. This was undertaken by Luton Borough Council as part of the licensing arrangements for sports stadia. He assured Members that the Service was fully involved in supporting fire safety measures at the premises.
- 7.21 DCFO Hopkinson reassured Members that, even when the Service was not the enforcing authority, such as for Crown properties, the Service still gathered intelligence on the premises as part of familiarisation visits to identify risks so that the Service could respond effectively in the event of an emergency.
- 7.22 Reports from national incidents, such as the fire at Grenfell Tower, were considered to ensure that the Service was adopting any learning arising from those incidents.
- 7.23 DCFO Hopkinson reported on the feasibility study that had been undertaken relating to a shared Police and Fire Headquarters. It was anticipated that an options paper would be submitted to a future meeting of the Authority.
- 7.24 The Group was also advised that a drone had been ordered in collaboration with Bedfordshire Police and that delivery of the drone was now awaited.

**RESOLVED:**

1. That the progress made on the Service Delivery Programmes and Performance be acknowledged.
2. That the Group receive a report on the Replacement Mobilising System at its next meeting.
3. That the Group receive a report on the arson case study at its next meeting.

18-19/SD/008 Audit and Governance Action Plans Monitoring Report

- 8.1 DCFO Hopkinson reported that all actions had been completed.

**RESOLVED:**

That progress made against current action plans be acknowledged.

#### 18-19/SD/009 Customer Satisfaction Survey Report End of Year Report – 1 April 2017-31 March 2018

- 9.1 SOC G Jeffery presented the year-end results of customer satisfaction surveys conducted from 1 April 2017-31 March 2018. During this period, the Service had achieved a 99% customer satisfaction rate. 94% of the respondents had been very satisfied.
- 9.2 1,506 surveys had been completed during 2017/18, an increase from the 1,186 surveys completed in 2016/17. This was over a 50% rate of return.
- 9.3 49 compliments and 8 complaints had been received in 2017/18. Complaints had reduced from 14 during 2016/17. The majority of complaints had been resolved at Stage 1 of the complaints process. Only one remained outstanding.
- 9.4 DCFO Hopkinson confirmed that the Service sought continuous improvement. The incidents relating to the responses stating that the Service arrived slower than expected would be investigated to determine if the response was over the Service's agreed response times.

#### **RESOLVED:**

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

#### 18-19/SD/010 Operational Decision Making Procedures – Exception Report

- 10.1 There were no exceptions to report.

#### 18-19/SD/011 Corporate Risk Register

- 11.1 SOC G Jeffrey presented the review of the Corporate Risk Register.

- 11.2 The risk rating of CRR046 (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) had been reduced following a review of the risk, risk control and action plan. Both the inherent risk and the inherent likelihood had reduced. The overall risk rating had been reduced from 12 to 4.
- 11.3 CRR046 had also been updated as the Service was satisfied that the policy and procedure changes had enabled greater control and monitoring of crewing levels to reduce the burden of over-time expenditure.

**RESOLVED:**

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

18-19/SD/012 Work Programme

- 12.1 The Group received its work programme and noted that two additional items had been added to the agenda for its next meeting on 19 September 2018 earlier in the meeting.
- 12.2 DCFO Hopkinson provided an update on the HMICFRS Inspection Process. The “discovery” week had recently taken place and initial feedback that staff had positively engaged with the inspectors. The Key Lines of Enquiry were being developed and the strategic briefing to the HMICFRS by the CFO and Senior Management Team had been arranged for 18 July 2018.
- 12.3 The onsite inspection was planned to take place during the week commencing 30 July 2018. DCFO suggested that the report would take 3-4 months to prepare but that a hot debrief would be presented back to the CFO and FRA Chair at the end of the onsite week.
- 12.4 The Chair reminded the Group of forthcoming Station Open Days that were taking place during the summer.

**RESOLVED:**

That the Work Programme be received.

The meeting finished at 11.05am.

This page is intentionally left blank

For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
19 September 2018  
Item No. 5

**REPORT AUTHOR: DEPUTY CHIEF FIRE OFFICER**

**SUBJECT: SERVICE DELIVERY PROGRAMME AND PERFORMANCE REPORT  
QUARTER ONE 2018/19 (F/Y April 2018 to March 2019)**

For further information on this Report contact: Adrian Turner  
Service Performance Analyst  
Tel No: 01234 845022

Prue Wullems  
Service Improvement Manager  
Tel No: 01234 845018

**Background Papers:**

Previous Service Delivery Programme and Quarterly 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 2018/19 Quarter one, 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 one 2018/19 (April 2018 - June 2018)

## RECOMMENDATION:

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

---

### 1. Programmes and Projects 2018/19

- 1.1 Projects contained in this report have been reviewed and endorsed in February 2018 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:
  - The **Asset Management & Fleet Management 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 2018/19 to 2021/22 has been taken within the proposed 2018/19 Budget and Medium-Term Financial Plan, as presented to the Authority for agreement in February 2018.

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, and the following on 27 November 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. Programme and Projects Summary and Exception Reports Q1 – 2018/19**

### **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 are also outside Service control.

## SERVICE DELIVERY PROGRAMME REPORT

Project Description	Aim	Performance Status	Comments
<b>2018 Replacement Mobilising</b>	To deliver a new mobilising system that is ESMCP compliant.	<b>Green</b>	<p><b>21 August 2018: 2018 Replacement Mobilising Project (RMP)</b></p> <p>The RMP project is rated Green and is currently on track to deliver as expected. Due to the continuing uncertainty over the Home Office direction in respect of the Emergency Services Network (ESN) Programme, the replacement of the BFRS mobilising system has been de-coupled from the ESMCP project for the time being.</p> <p>The Control Room Procurement workstream is being led by Cambridgeshire Fire and Rescue Service (CFRS), and is now underway. It is expected that the tender process will commence in September/October 2108, following which detailed planning for implementation will commence. A dedicated project resource from CFRS has been assigned to the project.</p>
<b>Asset Management &amp; Fleet Management System</b>	To accrue the benefits of transferring from a server based system to a cloud based asset tracking system.	<b>Green</b>	<p><b>20 August 2018: Asset Management &amp; Fleet Management System</b></p> <p>The project status has now reverted to Green. It was on Amber due to a new requirement to prepare “as is” business process maps for the principle business processes currently used for asset management. This work is now complete and was presented on 17 August to the Project Executive, SOC C Ball. Following acceptance, the project is back on track, and a mini-tender through the G Cloud Framework can commence following FRA agreement to proceed. It is expected this will be well underway in September.</p>



Project Description	Aim	Performance Status	Comments
<p><b>Collaborative Working</b></p>	<p>Exploring opportunities for collaborative working with other agencies</p>	<p><b>Green</b></p>	<p><b>16 August 2018</b></p> <p><b>Estates: <u>Joint Headquarters feasibility</u></b>                      Governance arrangements for OPE 6 loan expenditure have been agreed between BFRS Treasurer and Police Assistant Chief Officer.                      Energy efficiency reviews of FRS and Police Headquarters are being commissioned paid for through the One Public Estate (OPE) 5 grant. The outputs from this joint energy efficiency review will inform joint HQ project options.</p> <p><b>Operations:</b>  <b><u>Unmanned Aircraft Vehicle (UAV):</u></b>                      The UAV has been procured and joint training with Police has been arranged commencing in September 2018.</p> <p><b><u>Red Routes</u></b>                      Bedfordshire Police are now providing monthly information extracted from their incident mapping to enable a trial in Luton to commence with Control and StnC working closely to implement BFRS vehicles returning back to station through hotspot areas.</p> <p><b><u>Blue Light Collaboration event:</u></b>                      On 1 August 2018 front line operational staff from both BFRS and Bedfordshire Police took part in a structured event aimed building a more collaborative culture between the two services and to involve staff in generating and progressing collaboration initiatives, particularly around operational aspects.</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.	<b>Red</b>	<p><b>20 August 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. No further updates are available at this time.</p>

Project Description	Aim	Performance Status	Comments
<p><b>Emergency Services Mobile Communications Programme (ESMCP)</b></p>	<p>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.</p>	<p><b>Amber</b></p>	<p><b>13 August 2018:</b> The ESMCP Project remains rated Amber due to the on-going national delays, which are outside local control. The most recent communication regarding Home Office intentions are that they have taken a major step forwards with the creation of a new product launch timeline for the Emergency Services Network (ESN). Among the options being considered are an incremental roll-out of ESMCP, or the effective shutdown of the programme. The Home Office has been conducting an internal review, and until the outcomes of this are known, no Service decisions can be made re ESN. It is understood that a decision on the future of the programme will be made shortly.</p> <p>The new timeline moves away from the idea of a force-driven timeline and reflects the user needs of all three emergency services; particularly for data rather than voice for Fire Services. The EE network is considered to be in a good state, and if the programme continues, the focus will be on an “ESN Product and Service Evolution”, which will be introduced in the last quarter of this year, and will run into 2021. An assurance module will be introduced first, followed by a connectivity module that will ensure users have access to data at the right time. From the second quarter of 2018/19 delivery would be rolled out in incremental stages:</p> <ul style="list-style-type: none"> <li>• ESN Direct 1.0 will start the journey towards dedicated 4G ESN;</li> <li>• ESN Direct 2.0 covers Control room communications on Airwave or ESN;</li> <li>• ESN Direct 3.0 will introduce use of public safety video over ESN;</li> <li>• ESN Prime, (anticipated middle/end of 2020), will offer fully featured public safety communications on the dedicated 4G Emergency Services Network.</li> </ul>

Project Description	Aim	Performance Status	Comments
<p><b>Emergency Services Mobile Communications Programme (ESMCP), Cont....</b></p>		<p><b>Amber</b></p>	<p>In the meantime, work continues on coverage assurance, and analysing the outcomes of the operational Data Usage workshop attended in June. The Service continues to send representatives to regional meetings to ensure that we are up to date with the latest news from the Home Office. Due to the continuing uncertainty over the Home Office direction, the replacement of the BFRS mobilising system has been de-coupled from the ESMCP project for the time being – this is reported separately under the RMP 2018 Project.</p>
<p><b>PPE (Bristol)</b></p>	<p>To replace the current supplier Ballyclare with a consortium supplier Bristol</p>	<p><b>Green</b></p>	<p><b>20 August 2018:</b></p> <p>The project status is Green. A call-off contract has now been signed on 12 July 2018. BFRS has a contracts set-up meeting with Bristol, the Procurement Manager and GC Draper on 22 August. The 14 week tour of the demo kit to all stations has now been completed, allowing all operational personnel to see the new equipment. In addition the personal protective equipment (PPE) has been shown to Service Delivery Leadership team (SDLT), Operational Delivery Team (ODT) and the Fire Brigades Union (FBU).</p> <p>During the next period it is planned for Bristol to attend Service premises on a number of occasions to measure up all operational personnel for the new equipment. This is a complex time planning operation to ensure all operational personnel are covered without affecting mobilisation.</p>

Project Description	Aim	Performance Status	Comments
<p><b>Retained Duty System Improvement Project (RDSIP)</b></p>	<p>To deliver improvements to the effectiveness, efficiency and economy of the operation of the Retained Duty System within Bedfordshire Fire and Rescue Service.</p>	<p><b>Green</b></p>	<p><b>19 August 2018: Retained Duty System Improvement Project (RDSIP)</b> The RAG status for this project is Green (Unchanged from the last report).</p> <p><b>Availability module</b> – A major software update has been applied to the system (July 2108) providing the Service with the latest improvements to the system and increased administration functions, this will assist in configuring the system to tailor for Service needs. Work continues to progress on the module to ensure the system provides the most effective rota for all On Call personnel, this includes exploring the possibility of crews being able to indicate whether they are responding to calls from the mobile application.</p> <p><b>Phased Alert</b> – A Service Policy implementation group has now been established and the inaugural meeting was held on the 26 July 2018. A suite of revised policies has been presented to the group for feedback and approval to enable to the Service to enter negotiations with the relevant rep bodies and individuals. This includes the introduction of phased alert at all stations, following completion of the successful trials. All Stations have had screens fitted to assist local monitoring of the crewing levels and to support self-rostering on appliances; the provision of real time crewing data and availability of personnel has provided crews responding to an incident the ability to determine who is available, attending the call and who may need to remain on station to provide cover for any subsequent calls in advance of individuals arriving at the station. This is likely to assist in mobilising response times at On Call Stations. Work has been undertaken on the Gartan availability module to assist in the rostering of personnel, this includes the ability to colour code booking statuses, resulting in the information displayed to individuals being easier to read and dissect.</p>

Project Description	Aim	Performance Status	Comments
<p><b>Retained Duty System Improvement Project (RDSIP)</b></p>	<p>To deliver improvements to the effectiveness, efficiency and economy of the operation of the Retained Duty System within Bedfordshire Fire and Rescue Service.</p>	<p><b>Green</b></p>	<p><b>Payroll</b> – Since the introduction of the module in March there have been no reports of issues with the software or the operating platform. Paper claims ceased in May and subsequent pay runs have been completed utilising data contained in the electronic payroll module, providing accurate consistent data and pay amounts. Integration into the iTrent system has proved successful and continues to provide the required data to ensure individuals are being paid the correct amount. Phase 2 of the pay module is now in the process of being implemented, providing the ability for the average earning payments to be calculated in the system, resulting in the cessation of paper based annual leave and sickness payments. Configuration of the system is being led by the payroll manager in conjunction with Gartan to ensure that all average earning calculation ratios are in line with current requirements. Configuration requirements will include the required changes to accommodate proposed changes in Pro rata retainer and hourly annual leave, in preparation for introduction of the new Service policies.</p> <p><b>Service Policies</b> – The Policy implementation group has now been established and met on the 26 July 2018 during which all proposed changes were presented along with all back ground work associated with the Project. The group will now be assisting in negotiation/ consultation and delivery of the improved changes.</p>

Project Description	Aim	Performance Status	Comments
<p><b>Wholetime Duty Management System</b></p>	<p>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.</p>	<p><b>Green</b></p>	<p><b>20 August 2018: Wholetime Duty Management System (Rota Replacement):</b></p> <p>The project status is Green. The Service hosted three suppliers during June, to scenario test their products. A supplier has been selected, a contract awarded, and the procurement process is almost complete. In the meantime the business case has been revisited to ensure it reflects the current Service requirements, and detailed project management documentation including Project Initiation Document (PID), project timeline, communications plan and equality assessment, is in near final draft.</p> <p>A SharePoint Teamsite has been set up for project governance. The next steps will be to establish the Project Board and Project team to enable implementation to start in the next period.</p>

### 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 first quarter performance summary outturn for 2018/19 and covers the period April 2018 to June 2018. Performance as shown in Appendix B. The indicators and targets included within the report are those established as part of the Authority's 2018/19 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 **Performance Summary and Exception Reports**

All performance indicators are on target, except for:

#### 4.1 **Pi08 The average response time to primary fire incidents**

Response times are measured from the time of call to the time the first appliance arrives at the scene. Primary fires are generally more serious fires that harm people or cause damage to property, including buildings, vehicles or outdoor structures. The target for Pi08, the average response time to primary fires incidents, has been missed by 13%, however when considering Pi09, the average response times to dwelling fires (which falls within the primary fire category), the response times are 9% better than target. The primary fire incidents where response times have not been met relate to vehicle fires and outdoor structures which are more remote or difficult to locate. Through further analysis a number of small

Item 5.12



anomalies have also been highlighted; there have been occasions where additional resources arriving at the scene have overwritten the initial appliance attendance time, this has had a detrimental impact on the recorded response times for primary fires. The Service continues to monitor and update recorded response times to ensure anomalies are corrected manually.

4.2 **Pi11 The average call-handling time to mobilise to primary fires**

During Q1 the 60 seconds average call handling time for mobilising to primary fires has been missed by 40%. The average call time increase, to 83.95 seconds, is as a result of 9 incidents where call-handling time range from 61 seconds through to 440 seconds. Further analysis of the top five (highest in seconds) occurrences and the reasoning behind the extended times conclude that these are as a result of circumstances such as: the caller not knowing their actual location, over the border incidents where further information is required from other fire control rooms, late calls of fire - where the fire is out but the occupants need an attendance for fire reports, difficulties with communicating with the caller. The Service will continue to monitor call times and ensure the small number of exceptions are fully investigated to identify why they are outside 60 seconds.

4.3 **Pi12 Number of "false alarm malicious" / "hoax calls" mobilised to**

The total number of false alarm malicious / hoax calls received is 58 which bears reasonable comparison with previous quarters. The numbers mobilised to have gone up to 33 this quarter although it has to be noted that it does fluctuate. To identify if call challenging had been undertaken a full audit of each individual call will need to be undertaken. Further monitoring will take place over the next quarter to identify trends.

4.4 **Pi13 The percentage of false alarm malicious" / "hoax calls" not attended**

The total percentage of false alarm malicious / hoax calls not attended is 43% this is significantly below the target of 56%. Service Control undertakes call challenge to identify false or hoax calls based on information received by the caller. Further monitoring and auditing will need to be carried out to see if there are changes in styles of operation between control operators and callers.

4.5 **Pi14 Number of "false alarm good intent" mobilised to**

Over 50% of the total 168 mobilisations to false alarm good intent over Q1 were to controlled burning or fires on open ground. During the recent hot weather there has been greater public awareness, through national and local incidents and media campaigns, of the hazards of fires outside which may have led to the rise in false alarm good intent mobilisations. Further monitoring will take place over the next quarter to identify any further trends.

4.6 **Pi17 The percentage of fire safety audits carried out on high and very high risk premises**

This is an annual target and it should be noted that the audit scheduling throughout the year does not have an even distribution. All the audits scheduled for Quarter 1 have been completed and it is anticipated that the annual target will be met.

4.7 **Pi18 The rate and number of fires in non-domestic buildings**

Whilst it is disappointing that the target has not been met, it should be noted that in statistical terms the number of such incidents is very small and there will be natural fluctuations in the number of incidents occurring. An analysis of the fires in non-domestic buildings during Quarter 1 has been undertaken. Of the 37 fires 9 were classified as deliberate, including 3 separate incidents at HM Prison Bedford. Of the 37 fires 20 were minor fires confined to the first item ignited and 7 fires were confined to the room of origin. The most significant incident was the fire at Bedfordshire Growers caused by spread from an accidental fire in a lorry trailer unit which resulted in the loss of the whole building. Out of the 37 premises 29 had previously received a fire safety audit in accordance with the services audit and inspection program. 28 premises received an after fire inspection by a Fire Safety Inspection Officer. No specific additional prevention or protection initiatives have been identified at this time.

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

**APPENDIX B**

**SERVICE DELIVERY PERFORMANCE 2018/19 Quarter One**

Measure				2018-19 Quarter 1					
No.	Description	Aim	2018-19 Full Year Target	Average over last 5 years	2017-18 Q1	Q1 Actual	Q1 Target	Performance against Target	Comments
Pi 01a	The rate of primary fires (per 100,000 population)	Lower is Better	157.57	43.08	50.80	37.34	39.39	Green	6% better than target
Pi 01b	The number of primary fires		1047	280.00	336	247	261.75		
Pi 02a	The rate of primary fire fatalities (per 100,000 population)	Lower is Better	0.45	0.18	0.30	0.30	0.11	Green	Aim to achieve fewer than 4 annual fatalities
Pi 02b	The number of primary fire fatalities		<4	1.20	1.00	1	1		
Pi 03a	The rate of primary fire injuries (per 100,000 population)	Lower is Better	3.31	1.38	1.97	0.76	0.83	Green	Aim to achieve fewer than 23 annual injuries
Pi 03b	The number of primary fire injuries		<23	9.00	13.00	5	5.75		
Pi 04a	The rate of deliberate (arson) fires per (10,000 population)	Lower is Better	11.72	3.68	5.65	2.87	2.93	Green	2% better than target
Pi 04b	The number of deliberate (arson) fires		779	239.80	374	190	194.75		
Pi 05a	The rate of accidental dwelling fires (per 10,000 dwellings)	Lower is Better	15.52	3.61	3.98	2.98	3.88	Green	23% better than target
Pi 05b	The number of accidental dwelling fires		411	94.00	104	79	102.75		

Measure				2018-19 Quarter 1					
No.	Description	Aim	2018-19 Full Year Target	Average over last 5 years	2017-18 Q1	Q1 Actual	Q1 Target	Performance against Target	Comments
Pi 06	The number of deliberate building fires	Lower is Better	68	19.80	21	17	17	Green	Met target
Pi 07	The percentage of occasions global crewing enabled 9 riders on two pump responses (whole-time)	Higher is Better	90%	95.00%	99%	99%	90%	Green	10% better than target
Pi 08	The average response time to primary fire incidents (mm:ss)	Lower is Better	10	8.85	10.26	11.33	10	Red	Missed target by 13%
Pi 09	The average response time to dwelling fires (mm:ss)	Lower is Better	10	7.89	9.02	9.11	10	Green	9% better than target
Pi 10	The average response time to road traffic collisions (mm:ss)	Lower is Better	13	9.47	10.27	12.83	13	Green	1% better than target
Pi 11	The average call-handling time to primary fires (ss:ss)	Lower is Better	60	68.94	95.43	83.95	60	Red	Missed target by 40%
Pi 12	Number of "false alarm malicious" / "hoax calls" mobilized to	Lower is Better	122	31	21	33	30.5	Amber	Missed target by 8%
Pi 13	The percentage of false alarm malicious" / "hoax calls" not attended	Higher is Better	56%	59%	61%	43%	56%	Red	Missed target by 23%

Measure				2018-19 Quarter 1					
No.	Description	Aim	2018-19 Full Year Target	Average over last 5 years	2017-18 Q1	Q1 Actual	Q1 Target	Performance against Target	Comments
Pi 14	Number of "false alarm good intent" mobilised to	Lower is Better	623	141	158	168	155.75	Amber	Missed target by 8%
Pi 15	The percentage of Building Regulation consultations completed within the prescribed timescale	Higher is Better	95%	96%	94%	97%	95%	Green	2% better than target
Pi 16	The number of fire safety audits/ inspections completed	Higher is Better	1800	489.80	558	868	450	Green	93% better than target
Pi 17	The percentage of fire safety audits carried out on high and very high risk premises	Higher is Better	100% (100)	17%	23% (26)	14% (14)	26% (25)	Red	Missed target by 44%
Pi 18a	The rate of non-domestic fires (per 1,000 non-domestic properties)	Lower is Better	6.99	2.16	1.90	2.07	1.75	Red	Missed target by 18%
Pi 18b	The number of fires in non-domestic buildings		125	38.40	34	37	31.25		
Pi 19a	The rate of automatic fire detector false alarms in non-domestic properties (per 1,000 properties)	Lower is Better	37.19	11.63	8.05	7.83	9.3	Green	16% better than target
Pi 19b	The number of automatic fire detector false alarms in non-domestic properties		665	206.60	144	140	166.25		

### Information Measures Only

Measure		2018-19 Quarter 1		
No.	Description	Average over last 5 years	2017-18 Q1	Q1 Actual
Inf01	The number of RTC's attended	94.60	115	116
Inf02	The number of people killed or seriously injured in road traffic collisions (Partnership Indicator)	No Data Available		
Inf03	The number of water related deaths	0.20	0	2
Inf04	The number of water related injuries	0.00	0	0

IRS Status - At the time the data was downloaded there were 30 IRS incomplete Document Last Saved 06/09/2018 12:57:00

For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
19 September 2018  
Item No. 6

---

**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 2017/18
  - 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 second 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 2017/18 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 6 July 2018, as part of the 2017/18 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')
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> <li>• Legal implications;</li> <li>• Training impacts; and</li> <li>• Expected operational and community benefits.</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')
				<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>			

This page is intentionally left blank

For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
19 September 2018  
Item No. 7

---

**REPORT AUTHOR:** HEAD OF PROTECTION  
**SUBJECT:** CUSTOMER SATISFACTION REPORT      **QUARTER 1: (01 APRIL – 30 JUNE 2018)**

---

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

---

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 the levels of Customer Satisfaction during Quarter 1 2018/19 (01 April – 30 June 2018).

**RECOMMENDATION**

That Members consider the report and the continuing good levels of customer satisfaction.

## 1. Executive Summary

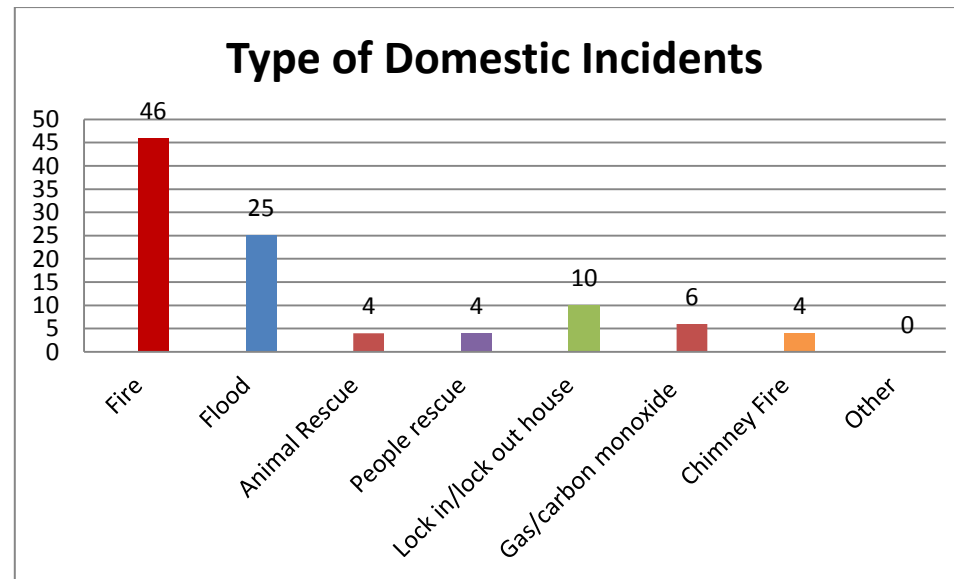
- 1.1. Customer satisfaction is measured through surveys (undertaken after an incident, following a Safe and Well visit (S&WV) or Fire Safety Audit), and letters of compliments and complaints.
- 1.2. Surveys undertaken in Q1 2018/19 indicate that 100% of respondents across all survey areas were either very or fairly satisfied with the overall service provided. The rate of responses for surveys issued in Quarter 1 is shown below, with comparisons against the same period in 2017/18.
- 1.3. There has been a drop in the return rate for Safe and Well visit surveys and this may be due to the change from posting these to having them completed following the visits or being left with those receiving the visit. This will be explored with a view to increasing the return rate.
- 1.4. Figures in the report have been rounded to whole numbers.

Area surveyed	Total number of surveys returned	Total number of surveys sent	Return rate	Comparison to Q1 2017/18 (return rate)
After the Incident (Domestic)	116	203	57%	54%
After the Incident (Non Domestic)	14	21	67%	64%
Safe and Well visit	108	775*	14%	54%
Fire Safety Audit	102	165	62%	56%
<b>Totals / Average Return rate</b>	340	1,164	29%	55%

\* This is a figure for the number of visits undertaken.

## 2. After the Incident (Domestic)

### 2.1. Type of Incident

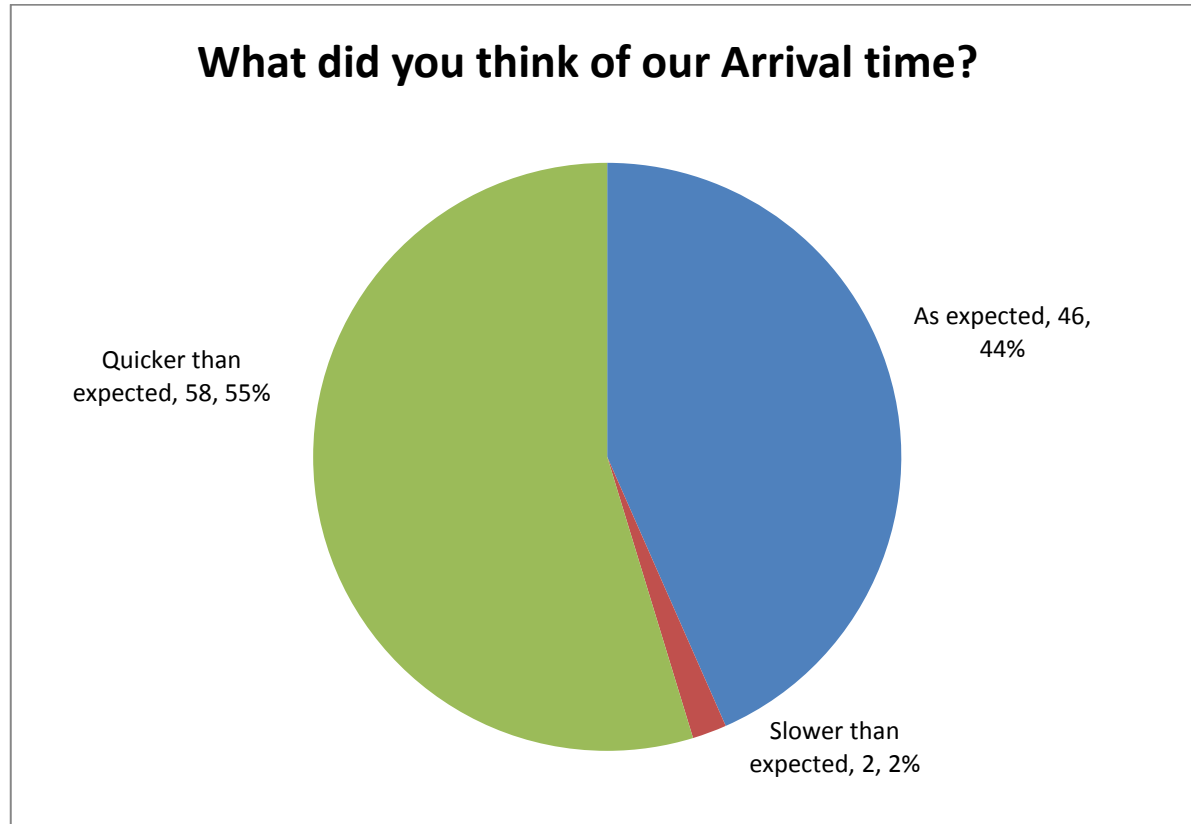


203 surveys were sent out and 116 replies have been received, a response rate of 57%. The main incidents in which respondents were involved were fires, floods (in domestic properties) and lock ins or lock outs.

### 2.2. Overall satisfaction

Almost everyone that replied to this question said they were very satisfied with the service they received (106 were very satisfied and 4 fairly satisfied). No one was dissatisfied with the service.

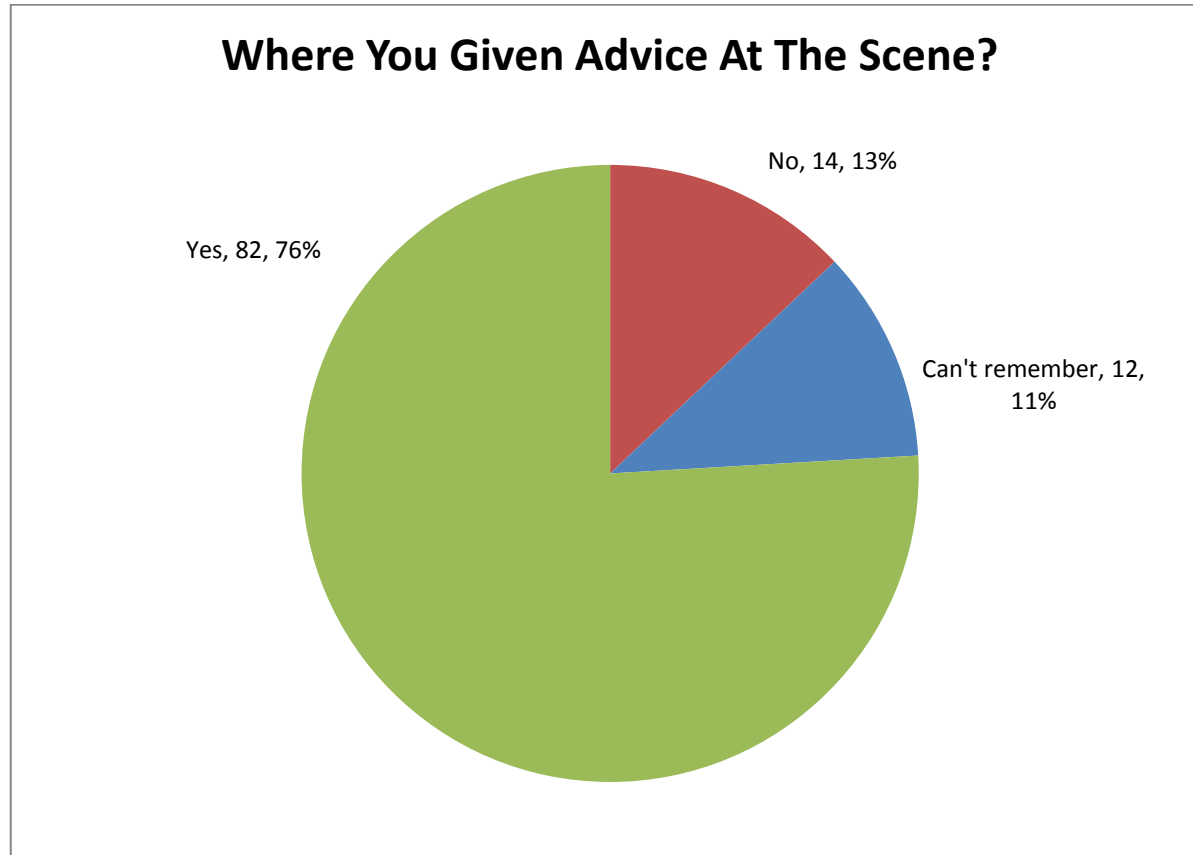
### 2.3. Arrival times



Of the 106 respondents who replied to this question, 2 people thought the Service arrived slower than expected. 70 (60%) respondents had called the Service themselves and they were all positive about the assistance they received.

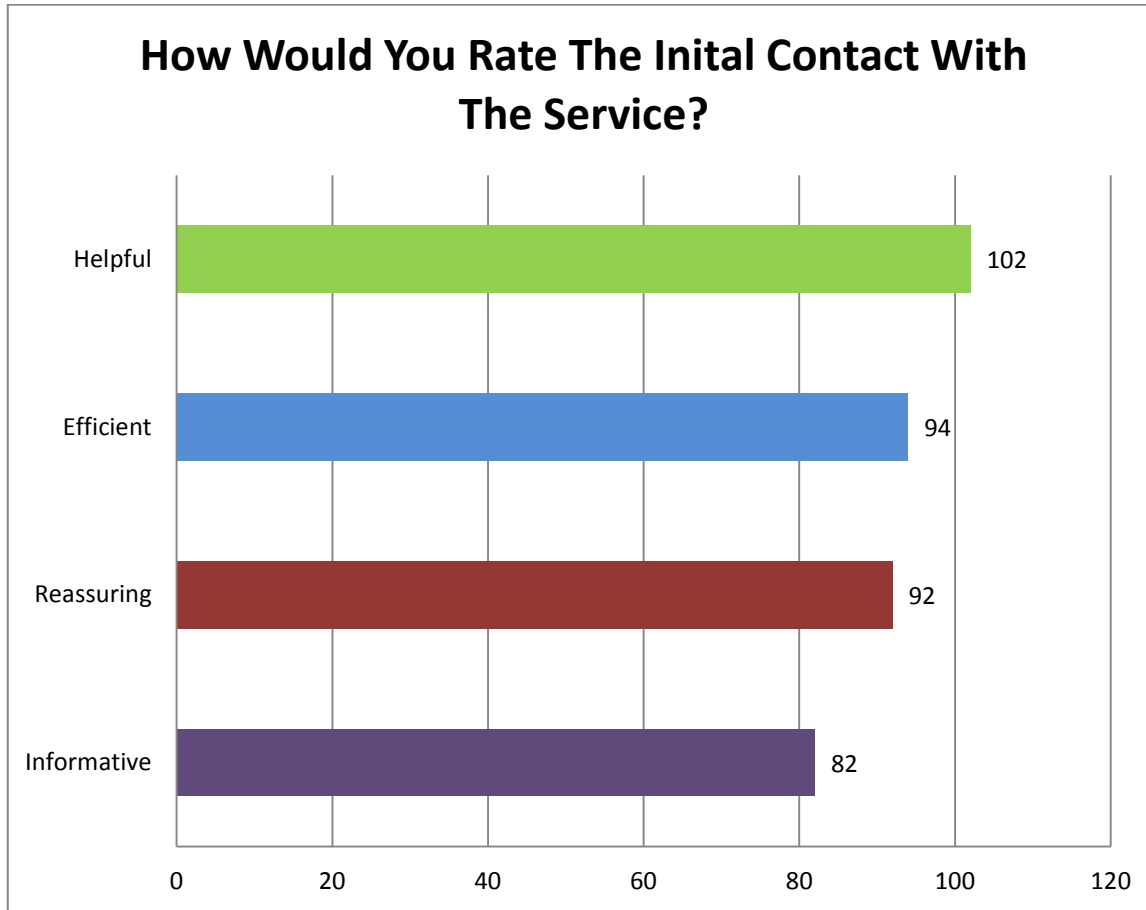


## 2.4. Advice given



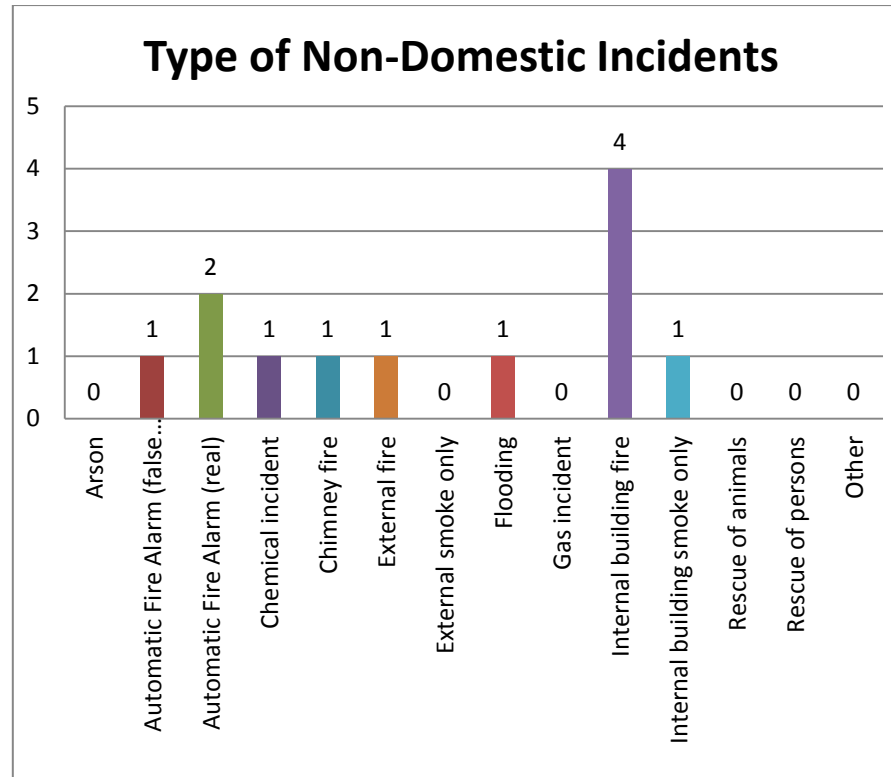
108 respondents replied to this question on the survey. Over three quarters of those involved in incidents were given advice at the scene.

Many people found contact with the Service to be helpful, efficient, reassuring and informative.



### 3. After the Incident (Non Domestic)

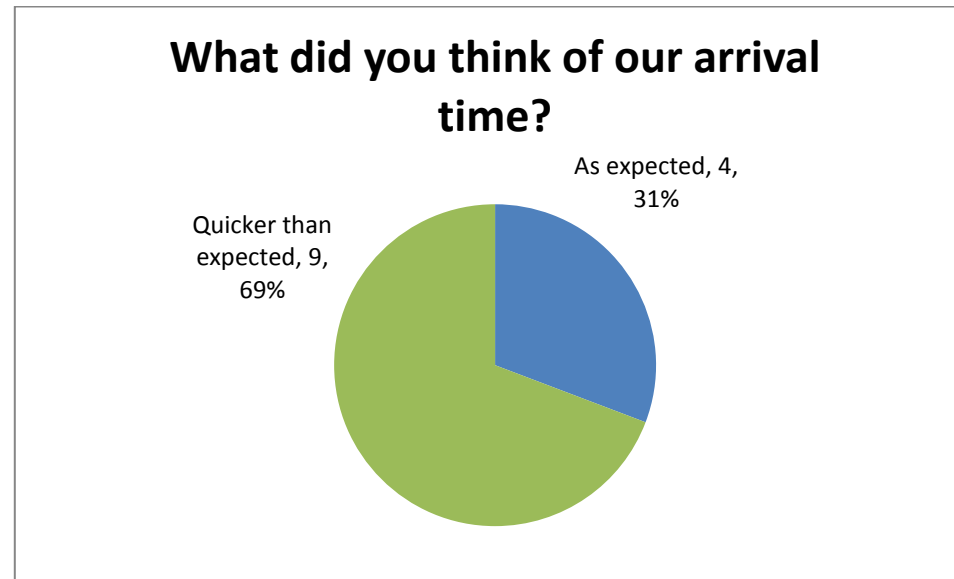
#### 3.1. Type of Incident



There were only 21 incidents involving commercial properties during Quarter 1, and 14 survey responses have been received (a response rate of 67%, however there were only 12 response to this question).

In all 14 instances the respondent was very satisfied with the service they received from the Service.

### 3.2. Arrival Times



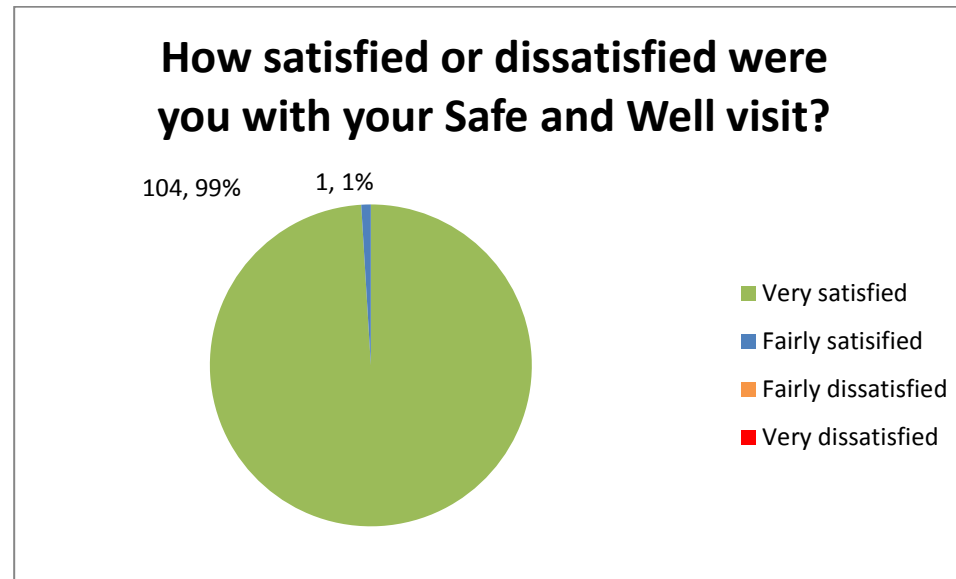
13 respondents answered this question and in the majority of cases the Service arrived quicker than expected.

#### 4. Safe and Well Visits (S&WV)

The Safe and Well questionnaires are now completed at the end of the visit so that people are not inconvenienced by receiving a questionnaire in the post some weeks after the actual visit. This new process had increased the "return rate" as they were being completed at the end of the visit. However not everyone visited wished to complete a survey which resulted in a response rate below 100%.

However in Q1 775 S&WVs took place and only 108 questionnaires were completed and returned which gives a response rate of 14%. This drop in the return rate may be due to questionnaires being left for people to complete and then not being returned. This will be investigated to improve the figures in the future.

#### 4.1. Overall Satisfaction



Of the 105 people who answered this question all respondents but one were very satisfied with their S&WV, one person being fairly satisfied.

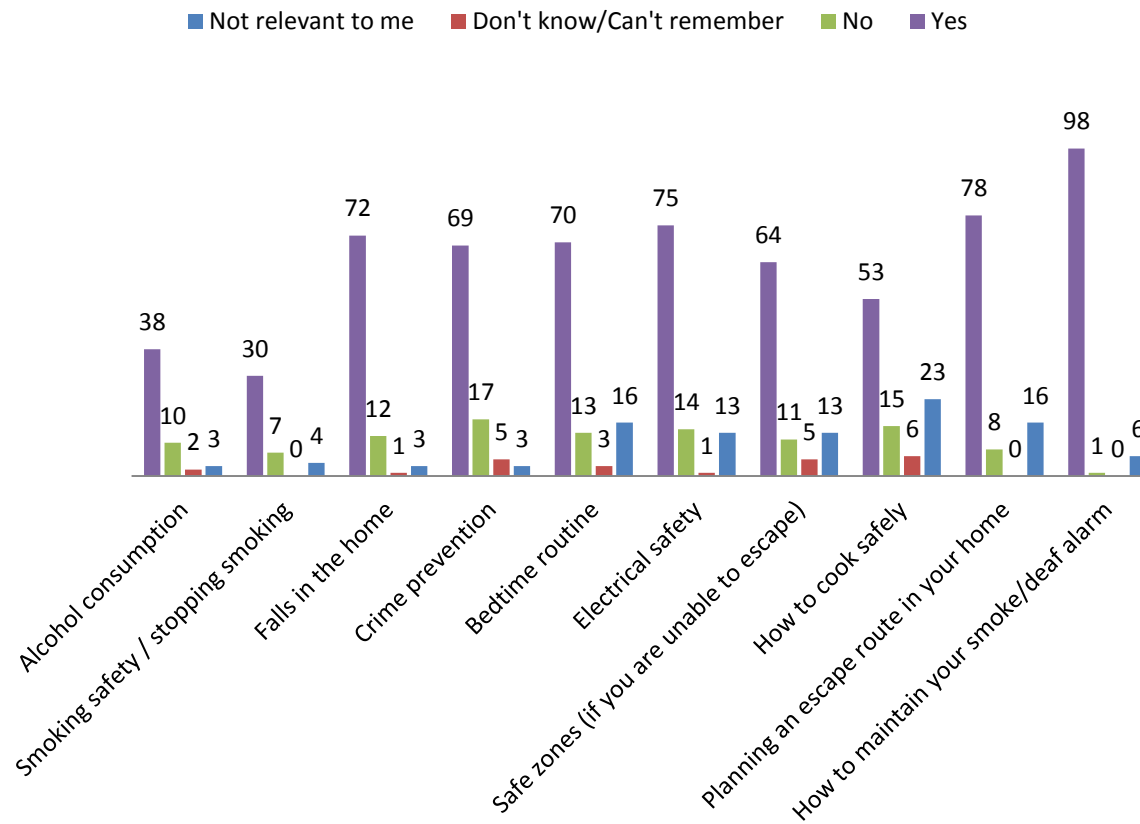
There were many positive comments from those we visited about the service people received. The most common comment was that the staff visiting them, whether Community Safety staff or Firefighters were polite, friendly, helpful and professional.

#### 4.2. Providing information

Part of the benefit from providing Safe and Well visits is the opportunity to give vulnerable people more information about a range of safety issues, such as how to avoid slips and trips and talking to them about smoking cessation and their use of alcohol.

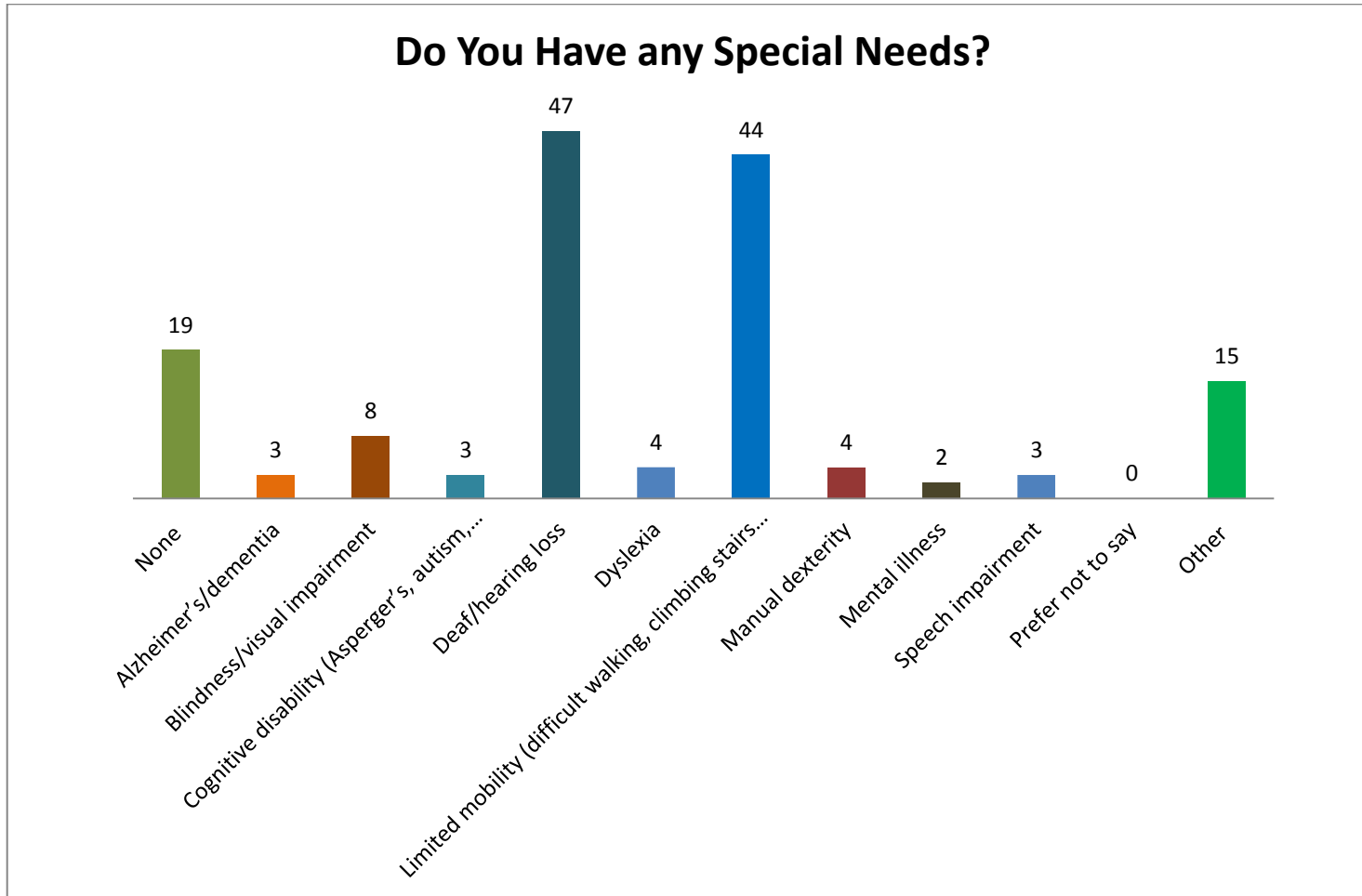
The table below shows how much those visited thought the advice given had improved their knowledge of these safety issues. In many cases three quarters of people benefited from advice on a wide range of topics. This was lower for alcohol consumption and smoking as many people did not smoke or consume alcohol.

### Did our Safe and Well visit improve your knowledge of the following?



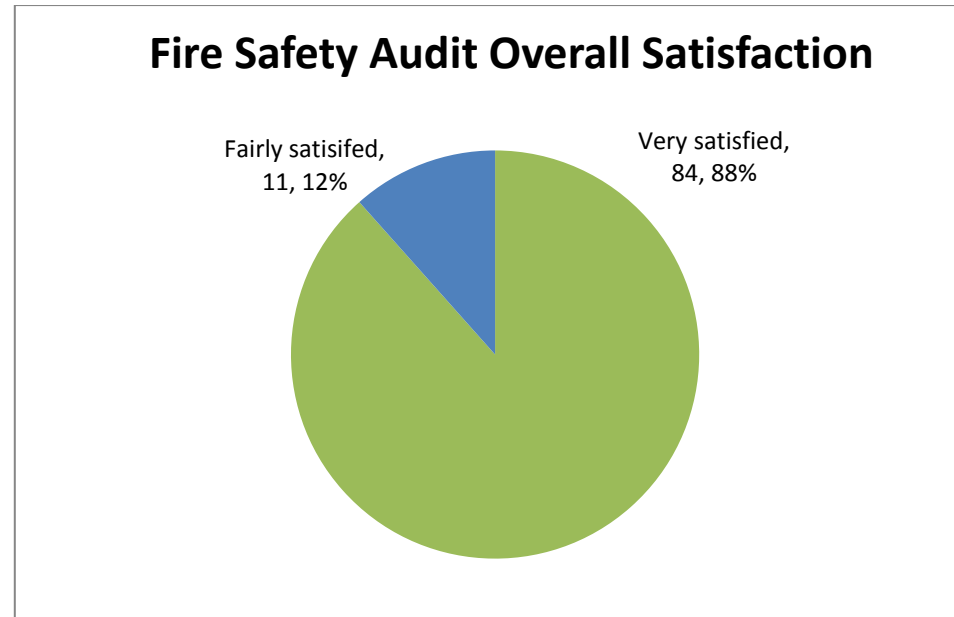
### 4.3. Health Issues

People who are receiving Safe and Well visits are considered vulnerable due to their age and other factors. Not all have health issues, but the table below shows some of the common issues affecting those visited. These include loss of hearing (with implications for the need for specialised smoke alarms for the hard of hearing) and limited mobility (with implications for their ability to escape from their property quickly).



## 5. Fire Safety Audit surveys (FSA)

### 5.1. Overall Satisfaction

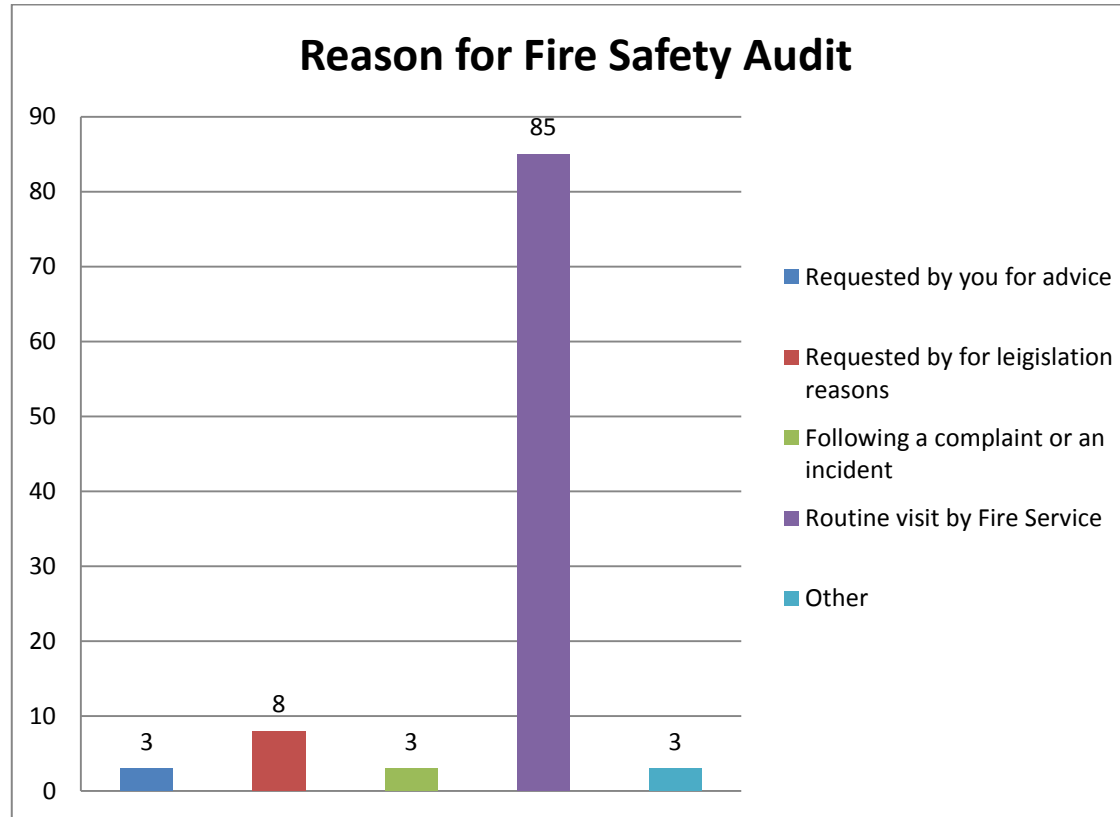


Of the 165 surveys sent out, 102 were returned, a response rate of 62%.

Not everyone responded to this question but of those who did all were very or fairly satisfied with the Fire Safety Audit (FSA) they received. One person did express dissatisfaction at the service they received but from their comments this appeared to be because they had not, in over twenty years, had been subject to a FSA rather than anything to do with the FSA itself. Overall they were fairly satisfied with the FSA.

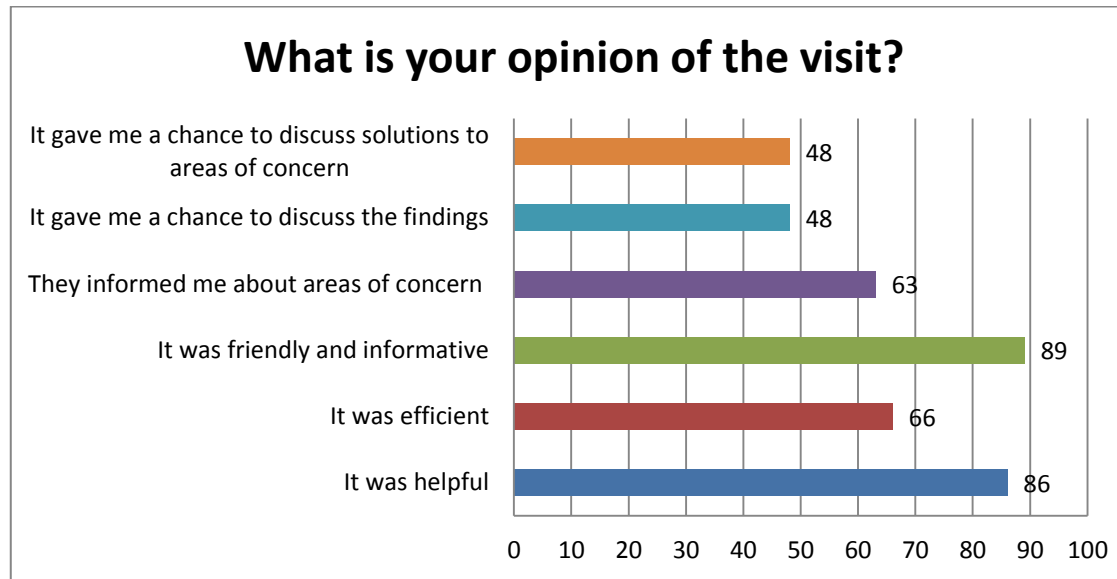


## 5.2. Reason for Audit



Once again not all respondents replied to this question but of those who did almost all said their FSA were carried out as part of the routine inspection programme.

### 5.3. FSA Outcomes



In general those receiving FSAs found them to be helpful, friendly and informative as well as giving them an opportunity to discuss areas of concern and their findings. Around half (48%) of those having an FSA were required to take action (48 of the 102 who replied) with 58 receiving a written report, with which they were either very or fairly satisfied.

### 6 Matters arising from Surveys

The level of customer satisfaction across all services continues to remain very high.

The fall in the return rate for Safe and Well visit questionnaires will be investigated.

## **7 Compliments**

The Service is pleased to have received a number of compliments from members of the public. These are received by letter and email. In the first quarter the Service received five compliments, three in April and two in May.

## **8 Complaints**

In the first quarter of 2018/19 the Service received six complaints: one in April, satisfied at Stage 1 and upheld; one in May, satisfied at Stage 1 and upheld and four in June, all satisfied at Stage 1, two upheld and two not upheld.

**SOC IAN EVANS  
HEAD OF PROTECTION**

This page is intentionally left blank

For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
19 September 2018  
Item No. 9

---

**REPORT AUTHOR: HEAD OF SERVICE SUPPORT**  
**SUBJECT: REPLACEMENT MOBILISING PROJECT 2018**

---

For further information on this Report contact: Christopher Ball, Head of Service Support  
Tel No: 01234 845000

---

Background Papers: Paper to FRA Mobilising System Options Appraisal 14 December 2017  
Paper to FRA Mobilising System Options Short List 8 February 2018  
Paper to FRA Future Mobilising System Recommendation 26 April 2018

---

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 present to Members of the Fire and Rescue Authority (FRA) an update on the Replacement Mobilising Project 2018 (RMP 2018), including some background information, focusing on the option that had been selected as the way forward and the scope of the work being undertaken in partnership with Cambridgeshire (CFRS) and Suffolk (SFRS) Fire and Rescue Services.

## RECOMMENDATION

That Members consider the update provided.

### 1. Background

- 1.1. Bedfordshire Fire and Rescue Service (BFRS) emergency call handling and mobilising system is currently provided through a partnership arrangement with Essex Fire and Rescue Service (EFRS). The system was procured in 2012 through a tender process supported by Government grant funding. The contract term for system components expires at the end of 2019 (Frequentis) and early 2020 (Remsdaq) respectively.
- 1.2. Towards the end of 2017 EFRS notified BFRS that in consideration of the end of the contract and upgrade costs they intended to procure a new Emergency Service Network (ESN) compliant system and would not be seeking extension to the current contract. In consequence of these circumstances BFRS also needs to plan for its future provision.
- 1.3. At the FRA meeting on 14 December 2017 the FRA endorsed a proposal to appoint consultants to assist the FRA to make the best decision for our future mobilising provision.
- 1.4. The first phase was completed on track and Mason Advisory provided a report setting out their recommendations based upon their initial review of a range of identified options. At the FRA meeting on 8 February 2018 the FRA endorsed a detailed appraisal of the following three options:
  1. Procurement of a new system in collaboration with EFRS
  2. Collaboration with East Coast and Hertfordshire Control Consortium
  3. Procurement of a new system in collaboration with Cambridgeshire FRS (CFRS) and Suffolk FRS (SFRS)
- 1.5. At the FRA meeting on 26 April 2018 a detailed appraisal of the three options was presented. This paper also highlighted provisional costs, other areas of technological hardware/software that may need to be considered to ensure consistency with partners, and the need to ensure that continuity of service through extending the use of the current system until a new system was implemented.
- 1.6. At that meeting it was recommended that the FRA procure a new mobilising system in collaboration with CFRS and SFRS as recommended by the consultant Mason Advisory, this recommendation was endorsed by the FRA.

1.7. Following the approval by the FRA to enter into a joint collaboration with CFRS and SFRS for the procurement of a new emergency call handling and mobilising system the following has been put in place:

- A joint Executive Project board has been established between, BFRS, CFRS and SFRS.
- A number of project teams have been established to progress the detail on various work streams including:
  - Technical specification;
  - Procurement Strategy;
  - Supplier engagement days;
  - Common ways of working between Services;
  - Resource requirements, both physical and financial;
  - Project interdependencies, such as the Emergency Services mobile Communications Project; and
  - ICT requirements, including mobile Data Terminals for Risk Information and Mobilising.

1.8. Through this collaboration the need for either Service to retain a secondary control room is removed as this function is taken up by the opposite Service. Effectively BFRS becomes the fall back for CFRS/SFRS and vice versa, which both improves resilience and allows opportunities for cost savings through economies of scale.

This arrangement also provides further opportunity to align ways of working within the region, supporting the direction set by Principal Officers at a regional level.

**STRATEGIC OPERATIONAL COMMANDER CHRISTOPHER BALL  
HEAD OF SERVICE SUPPORT**

This page is intentionally left blank



For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
19 September 2018  
Item No. 10

---

**REPORT AUTHOR: HEAD OF PROTECTION**

**SUBJECT: ARSON CASE STUDY**

---

For further information on this Report contact: Ian Evans, Head of Protection  
Tel No: 01234 845000

---

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 provide Members of the Service Delivery Policy and Challenge Group with a case study on how the Service responds to incidents of deliberate fire setting in domestic dwellings.

### **RECOMMENDATION**

That Members of the Service Delivery Policy and Challenge Group consider the report provided.

## 1 Actions Taken on First Response

- 1.1 On 11 June 2018 at 00:52 hours Fire Control received a call to a fire in a bungalow in a residential area of Luton. The first fire appliance arrived on scene at 01:00. A total of three fire appliances attended and breathing apparatus teams assisted by the use of thermal imaging cameras searched the property and extinguished the fire using two high pressure hoses. The whole building was affected by fire and smoke damage.
- 1.2 On the basis of initial information gathered on-scene the fire was declared 'persons reported'. However, on searching the property it was found to be unoccupied at the time of the fire. The attending crews noted that there were signs of forced entry to the property and appeared to be two separate seats of fire (in the kitchen and in a bedroom) – clear indications of a deliberately set fire. Mindful of this, crews struck an appropriate balance between scene preservation and ensuring that the fire was fully extinguished. Group Commander Steve Allen, who is a member of the Service specialist Fire Investigation Team, had attended the fire as part of the initial response for Incident Command purposes and then took responsibility for fire investigation.
- 1.3 Uniformed police also attended the incident and it was noted that there was excellent on-scene liaison from the police duty Sergeant and police assisted FRS greatly with scene safety, inner cordon control and initial enquiries. Immediate house to house enquiries were commenced on the night.
- 1.4 The son of the householder attended on the night of the fire and GC Allen briefed the family member of the situation. The family member facilitated the necessary permissions to legally enter the property for fire investigation purposes. Victim support was discussed, but not required by the family as the elderly owner is currently in care and the bungalow was unoccupied.
- 1.5 Normal protocol is to secure the fire scene and defer investigation until daylight hours. Unfortunately police scene guard was not possible due to operational difficulties, however, police arranged for the property to be boarded up overnight and placed a police vehicle on the drive to assist with scene integrity and ensure preservation of evidence.

## 2 The Fire Investigation

- 2.1 GC Allen returned to the scene the following morning and carried out a joint fire investigation with police Scenes of Crime Officer (SOCO) in accordance with the Memorandum of Understanding (MOU) for Fire Investigation. Scene evidence indicated a deliberately set fire following a burglary of the property.
- 2.2 CID had been assigned to the case and a Detective Constable attended the scene to liaise with the investigation team and the family representative. Following the Fire Investigation SOCO remained at scene carrying out further forensic work around the burglary. The forensic investigation recovered blood within and just outside the property. The presence of blood may explain the fire as an attempt to mask or obscure DNA evidence (dependant on the offender(s) forensic awareness).
- 2.3 The blood recovered at the scene was identified as belonging to an individual known to be staying with a neighbour close by the scene. A warrant was issued for the arrest of the suspect who was known to the police.
- 2.4 GC Allen completed a formal Fire Investigation report which may subsequently be presented in evidence in criminal proceedings.
- 2.5 Police have subsequently arrested an individual wanted in connection with the incident. GC Allen has remained in touch with CID and has now received a formal request to provide a Fire Investigation report for submission to the Crown Prosecution Service (CPS). The report will be drawn from findings in the original Fire Investigation contemporaneous note and will be submitted to the CPS via CID. This submission will include confirmation that GC Allen will be available to attend crown court as required.

## 3 Other Actions

- 3.1 GC Allen gave further support to the family, providing advice on notifying insurers and assisting with recovery of documentation from the property to facilitate this process. The property was handed back to the family following the burglary investigation.
- 3.2 A referral was made by the Police to the victim hub following the incident.

- 3.3 Subsequently to the incident an after fire 'hot strike' was carried out with calls to 10 properties in the immediate vicinity. Cards were left at those properties where the householder was not at home at the time of the call. This initiative resulted in two households taking up the offer of a 'safe and well' (home fire safety check) visit.
- 3.4 GC Allen will provide feedback on progress and outcomes of the investigation to SOCO colleagues. This is standard practice as SOCO colleagues are not always included in outcomes of cases if they are not required to attend court. This supports the positive working relationship which underpins the intent in the MOU.
- 4 Recommendation

That Members of the Service Delivery Policy and Challenge Group consider the report provided.

**SOC IAN EVANS  
HEAD OF PROTECTION**

For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
19 September 2018  
Item No. 11

---

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

**SUBJECT:** CORPORATE RISK REGISTER

---

For further information on this Report contact: Strategic Operational Commander Andy Peckham  
Head of Service Development and Assurance  
Tel No: 01234 84 5129

---

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 will be provided at the meeting. 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:

The Corporate Risk Register individual risk ratings have been reviewed and there are no changes for this update.

- 2.3 Updates to individual risks in the Corporate Risk Register:

The Corporate Risk Register individual risks have been reviewed and there are no changes for this update.

**STRATEGIC OPERATIONAL COMMANDER ANDY PECKHAM  
HEAD OF SERVICE DEVELOPMENT AND ASSURANCE**

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

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	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 BLFRS</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>

This page is intentionally left blank



For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
19 September 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
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>	<p>Move to March 2019</p> <p>Verbal Update</p>	<p>Replacement Mobilising System</p> <p>Arson Case Study</p>	<p>Added by SDPCG 26 June 2018</p> <p>Added by SDPCG 26 June 2018</p>

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>• Annual Review of Partnerships</li> <li>• Review of the Work Programme 2018/19</li> </ul>	Verbal Update		

**SERVICE DELIVERY POLICY AND CHALLENGE GROUP (SDPCG) PROGRAMME OF WORK 2019/20**

<b>Meeting Date</b>	<b>'Cyclical' Agenda Items</b>		<b>Additional / Commissioned Agenda Items</b>	
	<b>Item</b>	<b>Notes</b>	<b>Item</b>	<b>Notes</b>
TBC June 2019	<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 2019/20</li> </ul>	Verbal Update		