



## 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 **Thursday, 7 March 2019** 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 (Pages 5 - 16)
5.	Service Delivery Performance Monitoring Report 2018/19 - Quarter 3	DCFO	To consider a report (Pages 17 - 24)
6.	Service Delivery Programmes to date 2018/19 - Quarter 3	DCFO	To consider a report (Pages 25 - 38)
7.	Proposed Service Delivery Indicators and Targets for 2019/20	DCFO	To consider a report (Pages 39 - 46)
8.	Audit and Governance Action Plan Monitoring Report	DCFO	To consider a report (Pages 47 - 52)
9.	Customer Satisfaction Report - Quarter 3	HP	To consider a report (Pages 53 - 68)
10.	Operational Decision Making Procedures - Exception Report	HRes	To receive a verbal update
11.	Corporate Risk Register	OAM	To consider a report (Pages 69 - 72)
12.	Annual Review of Partnerships	HP	To consider a report (Pages 73 - 78)
13.	Update on HMP Bedford	HP	To receive a verbal update
14.	Review of the Work Programme	DCFO	To consider a report (Pages 79 - 84)

Item	Subject	Lead	Purpose of Discussion
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**Local Government Act 1972: Schedule 12A (as amended) - Exclusion on the Public** **Chair**

To consider whether to pass a resolution under Section 100(A) of the Local Government Act 1972 to exclude the public from the remainder of the meeting on the grounds that consideration of the following items of business is likely to involve disclosure of exempt information as defined in Paragraphs 1 and 2 of Part 1 of Schedule 12A to the Act as amended.

Item	Subject	Lead	Purpose of Discussion
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15.	Fire Fatality Incident Update	HP/HRes	To receive a presentation
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	Next Meeting	10.00 am on 26 June 2019 at Conference Room, Fire and Rescue Service Headquarters, Kempston, Bedford MK42 7NR	
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**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.

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For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
7 March 2019  
Item No. 4

**MINUTES OF SERVICE DELIVERY POLICY AND CHALLENGE GROUP MEETING HELD ON 29 NOVEMBER 2018 AT  
10.00am**

Present: Councillors C Atkins, D Franks, T Khan and J Mingay (Chair)

DCFO A Hopkinson, SOC I Evans, SOC G Jeffery and GC I McLaren

18-19/SD/025 Apologies

25.1 Apologies for absence were received from Councillors Chatterley and McVicar.

18-19/SD/026 Declarations of Disclosable Pecuniary and Other Interests

26.1 There were no declarations of interest.

18-19/SD/027 Communications

27.1 There were no communications.

18-19/SD/028 Minutes

**RESOLVED:**

That the Minutes of the meeting held on 19 September 2018 be confirmed and signed as a true record.

## 18-19/SD/029 Service Delivery Performance Monitoring Report Quarter 2

- 29.1 DCFO Hopkinson submitted the Quarter 2 2018/19 performance report and the Group discussed the exception reports for the eight indicators that were RAG rated Amber or Red.
- 29.2 SOC Evans reported that PI01 (primary fires) had missed its target by 4%. However, due to the seasonal variety of primary fires, with a greater number of incidents historically occurring in Quarters 1 and 2, it was hoped that this indicator would reach its target by year-end. Performance was higher than both Quarter 2 2017/18 and the 5 year average, with the number of all categories of fire decreasing.
- 29.3 This was evidenced by the performance against PI05 (accidental dwelling fires) which was currently exceeding its target by 18%.
- 29.4 PI04 (deliberate fires) had also missed its target; however, like PI01, the majority of these fires occurred during the summer months and it was anticipated that the rate of deliberate fires would decrease in Quarters 3 and 4. Performance against this indicator had also improved in comparison to Quarter 2 2017/18 and the five year average. This was recognised as an achievement, given the long, hot summer during which more deliberate fires would be anticipated.
- 29.5 DCFO Hopkinson advised that consideration was being given to reporting performance against these indicators in a different way that was more reflective of seasonal variation and expected performance, rather than a linear target divided evenly amongst the quarters. If changes were made, an algorithm could be run against historic data to provide the five year average and other comparative data. The targets for 2018/19 would be set at the Group's next meeting in March 2019.
- 29.6 It was noted that PI04 measured the Service's definition of "deliberate fires", the majority of which would not be incidents of arson. It was suggested that the word "arson" be removed from the target to clarify this.
- 29.7 SOC Jeffery advised that PI08 (average response time to primary fire incidents) had missed its target and the average response time at the end of Quarter 2 was 11.8 minutes. 73% of the incidents related to non-addressable locations. There had also been a step-change in performance against this indicator from 2016/17 to 2017/18 and the reasons for this were being investigated.

- 29.8 SOC Jeffery reported that PI11 (average call handling time to mobilise to primary fires) had missed its target by 36%. Whilst recognising that 60 seconds was a challenging target, there were also two calls of 401 seconds and 215 which had increased the average significantly. Both of these related to outdoor fires.
- 29.9 PI09 (average response time to dwelling fires), which measured response time to the fires posing the greatest risk to life, had exceeded its target.
- 29.10 It was suggested that performance against the response indicators may be related to the introduction of the new mobilising system which measured calls from point of connection rather than at incident creation. The Service had adopted this particular measure for comparative purposes as it was similar to that used to prepare nationally published statistics.
- 29.11 In relation to PI14 (number of “false alarm, good intent” mobilised to), SOC Jeffery reported that over 51% of these mobilisations in Quarter 2 were to controlled burns or fires on open ground. Performance against this indicator would continue to be monitored to identify if this was a trend or the result of the unusually warm and dry weather conditions.
- 29.12 SOC Evans advised that PI16 (number of fire safety audits/inspections completed) had missed its target as a number of additional inspections had been undertaken to multi-storey cladded buildings following the Grenfell disaster. This had resulted in the routine audit programme being temporarily suspended. The programme had also been affected by vacancies and secondments in the specialist fire safety inspection team. This was being addressed, however, the specialist qualifications required in order to undertake this work did take time to achieve, so performance against this indicator may be affected for the remainder of the performance year.
- 29.13 The Chair noted that the number of road traffic collisions attended by the Service continued to increase. There was a time lag on the data relating to people killed or seriously injured in these collisions. SOC I Evans advised that the Service had recently been granted access to collision data from Highways England and this was being used to inform community risk management.

**RESOLVED:**

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

18-19/SD/030 Service Delivery Programmes to Date Report Quarter 2

- 30.1 DCFO Hopkinson introduced a report detailing the progress and status of the Service Delivery Programmes and Projects to date.
- 30.2 He reported that the Mobile Data Terminal Project had been combined with another project and had been added to the Group's programme report. The Service was leading a national aggregation procurement project on this and Kent Police and Lincolnshire Fire and Rescue Services were the initial partners, with other fire and rescue services expressing an interest. This could lead to a significant saving in the unit cost.
- 30.3 DCFO Hopkinson advised that, due to ongoing national negotiations, it was proposed that the Co-responding Project be put on hold until progress could be made. In the interim period, the DCFO was meeting with the East of England Ambulance Service to discuss how this Service could support the Ambulance Service in relation to a wide range of areas. The local FBU representatives had agreed that these discussions could continue but not be implemented until a national agreement was reached.
- 30.4 Members requested an update on these discussions and DCFO Hopkinson suggested that these be reported under the Co-responding Project at the Group's next meeting.
- 30.5 The Emergency Services Mobile Communications Programme was rated as Amber as revisions to the strategic direction of the project had not yet been agreed at national level.
- 30.6 It was noted that, with the exception of two projects, all other projects were on target and reporting as Green.

**RESOLVED:**

That the progress made on the Service Delivery Programmes be acknowledged.



18-19/SD/031 New Internal Audit Reports

- 31.1 DCFO Hopkinson submitted the internal audit report for the Use of Risk Information. The auditors had awarded this substantial assurance.
- 31.2 SOC Jeffery added that the auditors had provided positive feedback and that the good practice of the Service in this area had been recognised.

**RESOLVED:**

That the progress made to date be acknowledged.

18-19/SD/032 Audit and Governance Action Plans Monitoring Report

- 32.1 DCFO Hopkinson reported that he had no changes to report and that all actions had been completed subject to follow-up audit.

**RESOLVED:**

That progress made against current action plans be acknowledged.

18-19/SD/033 Customer Satisfaction Survey Report Quarter 2 2018/19

- 33.1 SOC Evans presented the results of customer satisfaction surveys conducted from 1 July to 30 September 2018. During this period, the Service had achieved a 99% customer satisfaction rate.
- 33.2 The return rate had improved from Quarter 1, with 500 surveys being sent out to a sample of addresses where Safe and Well visits had been completed. The overall return rate at Quarter 2 had doubled from Quarter 1 but this continued to be monitored.

- 33.3 The importance of a high return rate in identifying and addressing vulnerabilities was acknowledged, and SOC Evans reported that he was raising this issue with Station Commanders to ensure that fire crews were aware of the importance of encouraging individuals to complete and return the surveys.
- 33.4 SOC Evans advised that there was the provision for the completion of surveys online; however, many of the vulnerable individuals who were targeted for Safe and Well visits preferred to complete paper surveys.
- 33.5 DCFO Hopkinson advised that following the replacement of the Mobile Data Terminals, it was envisaged that the surveys could be completed on tablets on site in future.
- 33.6 Councillor Atkins commented positively on the presentation given by David Lynch at the Neighbourhood Watch meeting the previous evening.

**RESOLVED:**

That the report and the continuing good levels of customer satisfaction be acknowledged.

18-19/SD/034 Operational Decision Making Procedures – Exception Report

- 34.1 There were no exceptions to report.

18-19/SD/035 Corporate Risk Register

- 35.1 GC McLaren presented the review of the Corporate Risk Register in relation to Service Delivery. There had been no changes to risk ratings during the reporting period.
- 35.2 Three risks had been updated: CRR02 (if we cannot 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 appliance), 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 firefighters and staff and 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 firefighters and the communities, reduce our ability to monitor performance, undermine RDS employees confidence in the Service and could result in negative media coverage).

**RESOLVED:**

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

18-19/SD/036 Liaison with HM Prison Bedford

- 36.1 SOC Evans introduced his report which provided information in relation to the Service's liaison with HMP Bedford following an increase in the number of incidents requiring a Service response over the last five year period. There had also been a significant disturbance at the prison in November 2016 which had resulted in £1million worth of damage to two wings of the Prison.
- 36.2 13 out of the 14 deliberate fire incidents requiring rescue had occurred at the Prison, and it was recognised that, due to the nature of the Prison, it was difficult to access in the event of an emergency.
- 36.3 In May 2018, the Prison had been placed in special measures by the Government as the result of safety concerns. An "urgent notification" process had been triggered in September 2018 regarding concerns over a lack of control in parts of the Prison. The inspection identified a high level of assaults on staff and poor and overcrowded living conditions. These conditions may have led to the increase in incidents.
- 36.4 The Prison was identified as a special risk and the Service made regular risk gathering visits and had site specific plans for both minor and major incidents in place. There had also been a number of multi-agency exercises conducted to test the emergency arrangements. However, the Service's operational debrief process had highlighted concerns with prison staff being unaware of agreed procedures leading to difficulties in gaining access.

- 36.5 There was a Memorandum of Understanding in place between the Prison and the Service and this was reviewed in September 2017. This was sent by the Service to the Prison in March 2018 for signature and to date had not been received.
- 36.6 As the Prison was a Crown Premises, the statutory enforcing authority for the fire safety arrangements was the Crown Premises' Fire Inspection Group and the CFO had written to the Group detailing the concerns raised by Members of the FRA. A response was received on 25 October 2019 which indicated that the Prison would be subject to a two-day inspection in the early part of 2019.
- 36.7 Councillor Atkins, as Ward Member for the ward in which the Prison was located, commented on the particular difficulties arising from the cohort of the Prison who were subject to short-term confinement.
- 36.8 DCFO advised that GC Cook had been tasked with meeting with the Governor or Deputy Governor of the Prison to discuss our concerns. He would also be asked to request that the Prison representatives sign and return the Memorandum of Understanding to the Service.

**RESOLVED:**

1. That the report be received.
2. That the report and the associated correspondence with the Crown Premises' Fire Inspection Group be referred to the next meeting of the Fire and Rescue Authority.
3. That the Group receive an update following the inspection of HMP Bedford by the Crown Premises' Fire Inspection Group in early 2019.

18-19/SD/037 Work Programme

- 37.1 The Group received its work programme and noted that it had requested an update report on HMP Bedford to be submitted to its next meeting.

**RESOLVED:**

That the Work Programme be received.

18-19/SD/038 Local Government Act 1972, Schedule 12A, Paragraphs 1 and 2 of Part 1: Exclusion of the Public

**RESOLVED:**

That, pursuant to Sections 100A(2) and 100A(4) of the Local Government Act 1972, the public be excluded from the discussion of the following item on the grounds that the matters to be discussed involve the likely disclosure of exempt information as defined in Paragraphs 1 and 2 of Part 1 of Schedule 12A to the Act (as amended):

Item

Fire Fatality

The meeting finished at 11.36am.

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By virtue of paragraph(s) 1, 2 of Part 1 of Schedule 12A  
of the Local Government Act 1972.

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**For Publication**

**Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
7 March 2019  
Item No. 5**

**REPORT AUTHOR: DEPUTY CHIEF FIRE OFFICER**

**SUBJECT: PERFORMANCE REPORT QUARTER THREE 2018-19  
(April 2018 to December 2018)**

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

Background Papers: Previous Service Delivery Quarterly Performance Summary Reports

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 provide the Service Delivery Policy and Challenge Group with with a report for 2018/19 Quarter Three, detailing:

1. A summary report of performance against Service Delivery indicators and associated targets for Quarter Three 2018/19 (April 2018 - December 2018).

Item 5.1

## RECOMMENDATION:

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

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### 1. Performance

- 1.1 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.
- 1.2 This report presents Members with the Quarter Three performance summary 2018/19 covering the period April 2018 to December 2018. Performance is shown in Appendix A. The indicators and targets included within the report are those established as part of the Authority's 2018/19 planning cycle.
- 1.3 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%

### 2. Performance Summary and Exception Reports Q3 – 2018/19

All performance indicators are on target with the exception of:

- 2.1 **Pi04 The rate of deliberate (arson) fires per (10,000 Population).** The cumulative target for Q3 is derived based on a linear projection against the full year target ie 75% of the full year target. However, deliberate fires have seasonal

variation, with more deliberate fires set in the spring, summer and autumn. Analysis of the distribution of incidents over previous years shows that on average 84% of our total annual number of deliberate fires occur in the first three quarters. On this basis the performance at Q3 is actually on track for meeting the annual target. Compared to this point last year the number of deliberate fires is down in all areas (buildings, dwellings, outdoor and road vehicles).

- 2.2 **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 more serious fires that harm people or cause damage to property, including buildings, vehicles or outdoor structures. The cumulative Q1 - Q3 target for Pi08 has been missed by 10%. This is predominantly due to the large number of fires in rural locations, as previously reported during Q2. However the average response time during Q3 is 9m 51s, which is within the 10m target and lower than that compared for Q3 17/18. In addition to Q2 data, previous performance reports have referenced the issue associated to ghost data. Following further investigation it has been identified that on a number of occasions the vehicle Mobile Data Terminals (MDT) have been sending additional information on new mobilisations, where actually the appliance is already at the incident or has returned. The Business Application Manager is working closely with Remsdaq to resolve the issue and source an engineered solution to prevent rogue mobilisation times being generated.

An in-depth analysis, using external support, is to be commissioned in the next few weeks to help us better understand how effective and efficient our emergency response cover arrangements are meeting our response standards, both currently and in the future, given the evolving risk profile across Bedfordshire. This will include analysing the casual factors behind the reported variation in response time performance. This is a defined action for 2019/20 in the draft CRMP. Our focus currently is on securing assurance that our data that will be subject to the analysis is accurate and up to date.

- 2.3 **Pi11 The average call-handling time to mobilise to primary fires.** The Q3 target for Pi11 has been missed by 40%. 60 seconds is a very challenging target and whilst considering the actual time of 84.17 seconds for Q3, it is relatively consistent with Q1 & Q2 actuals (83.95 & 80.84). Following further investigation into call-handling times during Q3, the longest three calls are 291, 203 and 192 seconds. The reasons behind the extended call times range from call handler error, call handler being placed on hold, to a caller trying to explain the location of a fire they could see from a footbridge over the A1. Station Commander Control continues to monitor call-handling times and those occurrences of elongated calls. Further investigatory work is underway to ascertain how these times are captured and from what point call-handling times begin to be measured, the purpose for this is to ensure consistency and to allow for accurate analysis of up to date data.

- 2.4 **Pi14 Number of "false alarm good intent" mobilised to.** The cumulative Q1 - Q3 target for Pi14 has been missed by 11%. However, during Q3 the Service was mobilised to 141 incidents which were deemed "false alarm good intent", and this is considerably lower than the 208 "false alarm good intent" mobilisations reported during Q2. The high number of incidents in Q2 were mainly due to the high level of controlled burning or fires in the open ground during the summer period. Due to the lower number of mobilisations in both Q1, 168, and Q3, 141 it is envisaged the Pi14 will still be on track for meeting the annual target.
- 2.5 **Pi16 The number of fire safety audits/ inspections completed.** In the reporting period there were 695 audits and 377 inspections of multi-storey housing undertaken as a special initiative. A further 155 inspections were made of retail premises prior to Christmas to check fire exit routes were clear. There were 29 cancelled audits due to premises being vacant and 148 fewer specialist audits due to staff abstractions and absence. The total number of audits and inspections is slightly below target (1227 against 1350) as a result of these initiatives and abstractions, and vacancies within the specialist fire safety inspection team (e.g. resourcing replacement fire safety MIS project).

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

## SUMMARY OF SERVICE DELIVERY 2018/19 QUARTER THREE

Measure				2018-19 Quarter 3					
No.	Description	Aim	2018-19 Full Year Target	Average over last 5 years	2017-18 Q3	Q3 Actual	Q3 Target	Performance against Target	Comments
Pi 01a	The rate of primary fires (per 100,000 population)	Lower is Better	157.57	127.62	129.86	115.05	118.18	Green	3% better than target
Pi 01b	The number of primary fires		1047	829.20	859	762	785.25		
Pi 02a	The rate of primary fire fatalities (per 100,000 population)	Lower is Better	0.45	0.36	0.60	0.15	0.34	Green	Aim to achieve fewer than 4 annual fatalities
Pi 02b	The number of primary fire fatalities		<4	2.40	4	1	3.00		
Pi 03a	The rate of primary fire Injuries (per 100,000 population)	Lower is Better	3.31	2.77	3.17	2.26	2.48	Green	Aim to achieve fewer than 23 annual injuries
Pi 03b	The number of primary fire injuries		<23	18.00	21.00	15	17.25		
Pi 04a	The rate of deliberate (arson) fires per (10,000 population)	Lower is Better	11.72	10.08	11.29	9.15	8.79	Amber	Missed Target by 4%
Pi 04b	The number of deliberate (arson) fires		779	655.60	747	606	584.25		
Pi 05a	The rate of accidental dwelling fires (per 10,000 dwellings)	Lower is Better	15.52	11.00	11.85	9.76	11.64	Green	16% better than target
Pi 05b	The number of accidental dwelling fires		411	286	310	258	308.25		

**SUMMARY OF SERVICE DELIVERY 2018/19 QUARTER THREE**

Measure				2018-19 Quarter 3					
No.	Description	Aim	2018-19 Full Year Target	Average over last 5 years	2017-18 Q3	Q3 Actual	Q3 Target	Performance against Target	Comments
Pi 06	The number of deliberate building fires	Lower is Better	68	52	45	37	51.00	Green	27% better than target
Pi 07	The percentage of occasions global crewing enabled 9 riders on two pump responses (whole-time)	Higher is Better	90%	95%	99%	98%	90%	Green	9% better than target
Pi 08	The average response time to primary fire incidents (mm:ss)	Lower is Better	10	9.04	10.61	11.04	10	Red	Missed target by 10%
Pi 09	The average response time to dwelling fires (mm:ss)	Lower is Better	10	7.89	8.96	8.79	10	Green	12% better than target
Pi 10	The average response time to road traffic collisions (mm:ss)	Lower is Better	13	9.87	11.75	12.05	13	Green	7% better than target
Pi 11	The average call-handling time to mobilie to primary fires (ss:ss)	Lower is Better	60	69.84	99.13	84.17	60	Red	Missed target by 40%
Pi 12	Number of "false alarm malicious" / "hoax calls" mobilized to	Lower is Better	122	103	82	86	91.50	Green	6% better than target
Pi 13	The percentage of false alarm malicious" / "hoax calls" not attended	Higher is Better	56%	46%	43%	58%	56%	Green	3% better than target

**SUMMARY OF SERVICE DELIVERY 2018/19 QUARTER THREE**

Measure				2018-19 Quarter 3					
No.	Description	Aim	2018-19 Full Year Target	Average over last 5 years	2017-18 Q3	Q3 Actual	Q3 Target	Performance against Target	Comments
Pi 14	Number of "false alarm good intent" calls mobilised to	Lower is Better	623	406	482	517	467.25	Red	Missed target by 11%
Pi 15	The percentage of Building Regulation consultations completed within the prescribed timescale	Higher is Better	95%	97%	96%	95%	95%	Green	Met Target
Pi 16	The number of fire safety audits / inspections completed	Higher is Better	1800	1381	1732	1227	1350	Amber	Missed target by 9%
Pi 18a	The rate of non-domestic fires (per 1,000 non-domestic properties)	Lower is Better	6.99	6.39	5.43	4.63	5.24	Green	7% better than target
Pi 18b	The number of fires in non-domestic buildings		125	114	97	87	93.75		
Pi 19a	The rate of automatic fire detector false alarms in non-domestic properties (per 1,000 non – domestic properties)	Lower is Better	37.19	39.43	26.73	25.31	27.89	Green	9% better than target
Pi 19b	The number of automatic fire detector false alarms in non-domestic properties		665	700	478	454	498.75		

## Information Measures Only

Measure		2018-19 Quarter 3		
No.	Description	Average over last 5 years	2017-18 Q3	Q3 Actual
Inf01	The number of RTC's attended	310.60	356	357
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	2.40	4	4
Inf04	The number of water related injuries	0.40	0	1



**REPORT AUTHOR:** DEPUTY CHIEF FIRE OFFICER

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

For further information on this Report contact: Prue Wullems  
 Service Improvement Manager  
 Tel No: 01234 845018

**Background Papers:** Previous Service Delivery Programme Quarterly 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 three, detailing the progress and status of the Service Delivery Programme and Projects to date.

## RECOMMENDATION:

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

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### 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 **Fleet Asset 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 **Replacement MDT Project** has been renamed to the **Replacement MDT Aggregation Project** as the scope has changed to cover national aggregated procurement of a universal MDT.

- 1.5 The Corporate Management Team monitors progress of the Strategic Projects monthly. The Strategic Programme Board now review the Programme quarterly, with the next Programme Board review scheduled on 24 May 2019.
- 1.6 Appendix A gives a summary of status to date on the projects in Service Delivery. 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. Requires Programme Board intervention

## 2. Programme and Projects Summary and Exception Reports Q3 – 2018/19

### 2.1 Change of reporting:

- The **Co-Responding Project** remains 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. This project will no longer be reported.
- The **Intelligence-Led Response** is deferred until further notice, and will no longer be reported.

### 2.2 There are currently two projects within Service Delivery in Exception status. These are as follows:

- The **Emergency Services Mobile Communications Programme (ESMCP)** remains on Amber as a timeline for delivery regionally is still under discussion, and it is still unclear how the programme and associated projects reporting is to be handled by the Home Office.
- The **Replacement MDT Aggregation Project** is Amber due to slippage in the original proposed timelines caused by the level of market interest generated by the RFI, and the complexities of gaining consortium approval to the technical specifications for a universal MDT.

SERVICE DELIVERY PROGRAMME REPORT

APPENDIX A

Project Description	Performance Status	Comments
<p><b>2018 Replacement Mobilising</b></p> <p><b>Aim:</b> To deliver a new mobilising system that is ESMCP compliant.</p>	<p><b>Green</b></p>	<p><b>06 February 2019: 2018 Replacement Mobilising System Project (RMP)</b></p> <p>The RMP is rated as Green and is still on track and expected to deliver as expected.</p> <p>During the last period BFRS and CFRS have made significant progress on the procurement documentation, including the Contract and the Inter Authority Agreement, with the intention to go out to market before the end of the financial year. Following this the tender submissions will undergo a shortlisting process to identify a suitable supplier.</p>
<p><b>Fleet Asset Management System</b></p> <p><b>Aim:</b> To implement a cloud-based Fleet Asset tracking system to manage fleet assets from purchase to end of life</p>	<p><b>Green</b></p>	<p><b>30 January 2019: Fleet Asset Management System</b></p> <p>The Fleet Asset Management Project is currently Green status though it has slipped slightly behind schedule due to additional technical due diligence requirements. This was to confirm that the correct middleware is part of the additional cross over package which allows the new cloud based system to integrate with the server based programs such as Great Plains and Requisition Manager. On 08/02/2019 it was concluded there were no technical issues to prevent procurement, therefore, procurement can now proceed.</p>

Project Description	Performance Status	Comments
<p><b>Collaborative Working</b></p> <p><b>Aim:</b> Exploring opportunities for collaborative working with other agencies</p>	<p><b>Green</b></p>	<p><b>30 January 2019: Collaborative Working</b></p> <p>The status of the project overall is Green.</p> <p><b>Estates</b></p> <p><b>Shared Headquarters:</b> Discussions are in progress to explore shared accommodation with a specific use which serves more practical purposes and offers direct improvement to front line services or training.</p> <p><b>Unmanned aerial vehicle (UAV):</b> Based at Potton Station, Work is underway to ensure compliance with legal and Civilian Aircraft Authority regulations.</p> <p><b>Red Routes:</b> A 6 months trial began on October 1st and Fire vehicles as a deterrent after incidents are returning to base through routes identified by Police as Burglary hotspots. Police will evaluate in April 2019.</p> <p><b>Blue Light Collaboration:</b> The newly formed Blue Light Collaboration Delivery Group (CDG) which is the tactical arm of the superior Blue Light Collaboration Strategic Board met for first time in November. At that meeting individual workstreams have seen project leaders nominated who will take responsibility for routine reporting to the group. A second Collaboration Conference is planned for February 18th at Police Headquarters. The theme of the conference is “Community Risk Management”.</p> <p><b>Joint vehicle workshops:</b> The feasibility of shared space for vehicle workshops is being explored with Police and Ambulance.</p> <p><b>Driver training:</b> The feasibility of Police and BFRS alleviating operational pressures of Police through closer working on driver training is being explored.</p>

Project Description	Performance Status	Comments
<p><b>Collaborative Working, Cont.....</b></p>	<p><b>Green</b></p>	<p><b>Motor cycle training:</b> There is currently a training programme underway to establish motorcycle trainers who can potentially offer training to Other Blue Light services including Blood Bike charity. This would be under license from College of Policing.</p> <p><b>What3words:</b> A new mobile App is being introduced into response processes and to supplement traditional response. The App is able to pinpoint any 3m x 3m area anywhere in the world by converting coordinates into a unique 3 word combination allocated to every square in the global grid. There is to be a publicity campaign to the public to increase the number of users. The App is available on every Appliance.</p> <p><b>Control room communications:</b> A report to the CDG is being prepared to detail what inter-control room communications currently exist. This is being done with a view to explore how this might be increased and expanded.</p> <p><b>Joint training:</b> A report to CDG is being prepared which details what training or use of training facilities currently exists. This is being done so that options for better use of estate, Trainers, Courses and equipment can be shared and better utilised to increase efficiency, frequency and uptake.</p> <p><b>NHS Services:</b> There are advanced discussions underway regarding an expansion of the Home Safety Adviser Service to introduce a Dementia Specific Service under contract to Bedford Clinical Commissioning Group (CCG). A one year Pilot will be evaluated in advance of considering expanding the service to be countywide across 3 CCGs. The service will be populated by referrals made directly from four Support organisation Partners.</p> <p><b>Local Authorities:</b> There are advanced discussions on achieving direct referrals from Local Authorities for Safe and Well visits. The Authorities will use BFRS priority Groups as the basis for referral. A Pilot has been agreed with Dunstable Fire Station for up to 40 referrals per month. This should increase the ratio of successful entries to aborted visits that current arrangements produce.</p> <p><b>BFRS Website:</b> A new Partnership page is in production detailing our current relationships and their purpose.</p>

Project Description	Performance Status	Comments
<p><b>Emergency Services Mobile Communications Programme (ESMCP)</b></p> <p><b>Aim:</b> 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>30 January 2019: Emergency Services Mobile Communications Programme (ESMCP)</b></p> <p>The ESMCP Project status remains on Amber as a timeline for delivery regionally is still under discussion. The focus continues to be on Coverage, with BFRS representatives attending regional Coverage meetings. Following the last regional meeting on 5th December it was agreed that BFRS would meet with the local Police team to discuss collaborative coverage testing. The first joint meeting took place on 28 January 2019, attended by SCs Auger and Pekszyk, at which the Assure products and the Police approach to coverage testing were discussed. Key points are as follows:</p> <ul style="list-style-type: none"> <li>• Police favour the assure 2.0 due to the PTT function, and are planning to hand out 10 Assure devices in squad cars across the county</li> <li>• Police have already done a significant amount of GNET tracker testing (heat maps of Beds, Herts and Cambs), and have agreed to provide us with these as a good indicator of weak signal areas</li> <li>• Police are working on a March delivery of the devices with assure 2.0 and request we complement their testing by;             <ul style="list-style-type: none"> <li>o Testing all of our estate;</li> <li>o Helping access and test COL's. BFRS already hold contact information for responsible people at most COL's.</li> </ul> </li> </ul> <p>A further meeting will be required to divide up the sites and agree what test is required i.e. inside of the building, in any service tunnels or similar. It was agreed that, due to licencing from EE, it would be problematic for the Police to take BFRS assure 2.0 devices and probably not assist them greatly. A gap closure plan will be created to manage any unexpected issues arising.</p>

Project Description	Performance Status	Comments
	<p><b>Amber</b></p>	<p><b>30 January 2019: Emergency Services Mobile Communications Programme (ESMCP), Cont....</b></p> <p>At a national level, in order to meet the accreditor’s security requirements, a significant amount of work needs to be done to the servers that are in use to support Assure 1.0. No formal announcement has yet been made but it is expected to delay rollout by a number of weeks, which may have a knock on effect on the rollout of Assure 2, and thereby the coverage testing timelines.</p> <p>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.</p>
<p><b>PPE (Bristol)</b></p> <p><b>Aim:</b> To replace the current supplier Ballyclare with a consortium supplier Bristol</p>	<p><b>Green</b></p>	<p><b>30 January 2019: PPE Bristol</b></p> <p>The PPE Bristol Project status is Green. The project is now in the final stages of implementation. The sizing programme is going well with 82% of the Service measured on the first round. 6 additional mop-up dates are now being programmed, and the project is on target for the 3rd May 2019 change over. Once this is complete a Project Closure and Benefits Handover report will be prepared and submitted to the Programme Board.</p>



Project Description	Performance Status	Comments
<p><b>Replacement MDT Project</b></p> <p><b>Aim:</b> To replace the out of support MDT equipment with ESN compliant hardware and software</p>	<p><b>Amber</b></p>	<p><b>05 February 2019: Replacement Risk Information MDT Project</b></p> <p><b>Aim:</b> To replace the out of support Risk Information MDT equipment with ESN compliant hardware</p> <p>This project has been renamed <b>Replacement MDT Aggregation Project</b> as its original purpose to procure Risk Information MDTs for BFRS has been changed to that of a national procurement project for universal MDTs purchased through an aggregation arrangement. This is a significant project for BFRS due to the prominence of taking the lead on national collaboration around aggregated procurement, and the considerable cost savings that can be gained.</p> <p>BFRS is collaborating with Kent FRS and Lincolnshire FRS on the basis of an Inter-Authority Agreement (IAA), regulating the relationship, obligations and responsibilities of the three (3) partners during procurement. Northern Ireland, County Durham and Darlington, and Cleveland FRSs are participating in the aggregation. Crown Commercial Service (CCS) is providing support to BFRS for the preparation and management of the procurement process until successful contract award and signature. Bevan Brittan has been appointed as the legal advisors to the project.</p> <p>The project status is Amber due to slippage in the original proposed timelines caused by:</p> <ul style="list-style-type: none"> <li>a) The complexities of gaining collaborative agreement for critical documents (legal agreements and technical specifications); and</li> <li>b) The high level of market interest in response to a Request for Information (RFI) / Market Engagement document, which led to some changes in the overall procurement strategy.</li> </ul>

Project Description	Performance Status	Comments
	<p style="text-align: center;"><b>Amber</b></p>	<p><b>05 February 2019: Replacement Risk Information MDT Project, cont.....</b></p> <p>Prior to Tender release, each FRS will sign a Memorandum of Understanding (MOU) with CCS to formally commit to the aggregation procurement process. Upon completion, each FRS will enter into an individually managed call-off contract with the winning Supplier for an initial period of three (3) years, with the possibility to extend for two (2) further twelve (12) month periods.</p> <p>The MDT Technical Specification has now been agreed with Kent and Lincolnshire subject to their formal approval process. The Inter-Authority Agreement has been reviewed and agreed with CCS, and issued to Kent and Lincolnshire for approval. CCS will release the Tender documents in the week commencing 4<sup>th</sup> March 2019, subject to completion of outstanding tasks (approval of Tender documents and the MOU, clarifying and finalising installation arrangements).</p> <p>The BFRS Procurement Manager is providing regular updates to CCS, who has been provided with copies of project documentation.</p>

Project Description	Performance Status	Comments
<p><b>Retained Duty System Improvement Project (RDSIP)</b></p> <p><b>Aim:</b> To deliver improvements to the effectiveness, efficiency and economy of the operation of the Retained Duty System within BFRS.</p>	<p><b>Green</b></p>	<p><b>04 February 2019: 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>Availability module:</b> The Service continues to work with the Gartan (software provider) in order to enhance the reporting capabilities and monitoring of contracts for RDS personnel. Work has been requested to enable a feature for individuals to indicate that they are responding to fire calls via the mobile App, further enhancing the response on the stations and aiding individuals in rostering the responding crews.</p> <p><b>Phased Alert:</b> Gartan have produced the work flow process for phase alerting and this has been approved by the Service, it is scheduled for implementation within quarter one of 2019.</p> <p><b>Payroll:</b> Phase 2 average earning payments and annual leave payment has been configured with the Gartan Payroll Manager, the Service continues to liaise with Gartan in overseeing the implementation. The new pay scales were successfully applied to the system in November and back pay calculated for individuals at the correct rate. Work has been requested to amend the pay file to output individuals' earnings in time values, in addition to the pay rates earned. This element of the project is now being overseen by the Payroll Manager.</p> <p>Internal audits have been conducted at 4 stations and further station audits have been programmed over the next few months. As a result of the audits the Service will be producing a report detailing all findings to ensure that all stations use a consistent approach to recording pay claims.</p>

Project Description	Performance Status	Comments
<p><b>Retained Duty System Improvement Project (RDSIP), Cont.....</b></p>	<p><b>Green</b></p>	<p><b>04 February 2019: Retained Duty System Improvement Project (RDSIP), Cont....</b></p> <p><b>Service Policies:</b> A presentation of the changes to the RDS system has been delivered to CMT resulting in full approval being given by members of CMT to proceed with formal negotiations on the RDS improvements. Formal negotiations have now started with the representative bodies along with production of an RDS handbook.</p>

Project Description	Performance Status	Comments
<p><b>Wholetime Duty Management System</b></p> <p><b>Aim:</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.</p>	<p><b>Green</b></p>	<p><b>04 February 2019: Wholetime Duty Management System (Rota Replacement):</b></p> <p>The project status remains Green (unchanged from last report). The project governance framework documents and Project PID have now been completed and approved by the Project Board.</p> <p>Formal contract has now been awarded to Gartan Technologies and the project team has produced the finalised pre configuration documents and these have been returned to Gartan. The project team continues to liaise with Gartan to ensure that the system is configured correctly and to the requirements of the Service. During the build time for the system (approx. 25 weeks) the Service will take part weekly conference calls with Gartan to address any issues and confirm details.</p> <p>After consultation with HICT and the Project Board, a decision has been undertaken to take a phased approach to system implementation; phase 1 ensuring the system is configured and introduced within the Service before phase 2 – full integration with existing systems.</p> <p>Gartan have confirmed that the Service will be provided with software version 5.3 and eventually moving onto version 5.4 once this has been released by Gartan for the UK Services. Gartan have advised the project team that version 5.4 is now delayed with a new release date of quarter 1 (2020) as opposed to August 2019.</p> <p>The project team has produced a work flow process diagram to ensure that all existing processes utilising MIS are included within the new roster software.</p>

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For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
7 March 2019  
Item No. 7

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**REPORT AUTHOR: DEPUTY CHIEF FIRE OFFICER**

**SUBJECT: PROPOSED SERVICE DELIVERY INDICATORS AND TARGETS FOR 2019/20**

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

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Background Papers: None

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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.*

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**PURPOSE:**

To advise Members of the proposed suite of Service Delivery Performance Indicators and associated targets for 2019/20 and to seek the Group's endorsement to incorporate these into the Service's performance management framework.

## **RECOMMENDATION:**

That Members consider and endorse the proposed Service Delivery Performance Indicators and Targets and Information Measures for 2019/20 as set out in Appendix A.

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### 1. Introduction

- 1.1 In line with its Terms of Reference, the Service Delivery Policy and Challenge Group is responsible for monitoring the performance of those areas of the Service's work falling within its scope. In order to facilitate this, the Group receives quarterly summary performance reports at each of its meetings.
- 1.2 The Service Delivery Policy and Challenge Group agreed in 2011 that they should be involved in the process of agreeing the suite of indicators and of setting the associated targets and that this should take place, as far as practicable, alongside the annual budget-setting, medium-term financial planning and strategic project planning processes. The Group's Work Programme for the current financial year therefore included this as an item for its meeting in March 2019.
- 1.3 This report advises the Service Delivery Policy and Challenge Group of the proposed targets for 2019/20 against a suite of measures.
- 1.4 The targets have generally been set against either a three or five year performance average with consideration placed upon the variations in previous years data. Where appropriate, consideration has also been given to current performance against 2018/19 targets.
- 1.5 As a general point it should be noted that the occurrence of certain fires and emergencies has a random element and in statistical terms our data set is relatively small (number of incidents etc). In consequence, there will be natural fluctuations in data and it may be difficult in the short term to know with any certainty to what extent changes in performance indicate a real trend.

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



## Proposed Service Delivery Performance Indicators and Targets for 2019/20

Ref	Performance Indicator	Frequency of Reporting	BFRS Baseline Performance	BFRS Target 2019/20	Target setting Rationale
PI 01	The rate of primary fires (per 100,000 population)	Quarterly	163 (5 yr average)	154.57	Projection for 2018/19 at year end is 1016 primary fires which is lower than the average of the previous 5 full years (and 2017/18 at 1077). It is recommended that the target is set at a 5% reduction on the 5 year average of 1058.
	The number of primary fires	Quarterly	1058 (5 yr average)	989	
PI 02	The rate of fire fatalities (per 100,000 population)	Quarterly	0.34 (5 yr average)	Less than 0.45	Target carried forward from 2018/19. There is an erratic historical data pattern (fire fatalities have ranged between 0 & 6 over the last 10 years) and can include acts of suicide and other factors that it is challenging for BFRS to address.
	The number of fire fatalities	Quarterly	2.4 (5 yr average)	Fewer than 4	
PI 03	The rate of fires injuries (per 100,000 population)	Quarterly	3.59 (5 yr average)	Less than 3.41	Target based on a 5% reduction on the average (23.4) of the previous 5 full years.
	The number of fire injuries	Quarterly	23.4 (5 yr average)	Fewer than 23	
PI 04	The rate of deliberate (arson) fires (per 10,000 population)	Quarterly	12.28 (5 yr average)	11.67	Projection for 2018/19 at year end is 721 deliberate fires which is lower than the average of the previous 5 full years of 799 (and 2017/18 at 876). It is proposed that the target is set at a 5% reduction on the 5 year average of 799.
	The number of deliberate (arson) fires	Quarterly	799 (5 yr average)	759	

## Proposed Service Delivery Performance Indicators and Targets for 2019/20

Ref	Performance Indicator	Frequency of Reporting	BFRS Baseline Performance	BFRS Target 2019/20	Target setting Rationale
PI 05	The rate of accidental dwelling fires (per 10,000 dwellings)	Quarterly	15.20 (5 yr average)	14.44	Projection for 2018/19 at year end is 344 accidental dwelling fires which is lower than the average of the previous 5 full years (and 2017/18 at 393). It is recommended that the target is set at a 5% reduction on the 5 year average of 398.
	The number of accidental dwelling fires	Quarterly	398 (5 yr average)	378	
PI 06	The number of deliberate building fires	Quarterly	59.33 (3 yr average)	53	Projection for 2018/19 at year end is 49 deliberate building fires, which is lower than the average of the previous 5 full years (and 2017/18 at 58). Target based on a 10% reduction on the average (59.33) of the previous 3 full years.
PI 07	The percentage of occasions global crewing enabled a total of nine riders on two pump responses (wholetime)	Quarterly	96% (5 yr average)	90%	Target maintained at 90%
PI 08	The average response time to primary fire incidents	Quarterly	9.45 minutes (3 yr average)	Within 10 minutes	Based upon attendance standard set in CRMP. There are currently known issues in relation to the accuracy of response time data.

## Proposed Service Delivery Performance Indicators and Targets for 2019/20

Ref	Performance Indicator	Frequency of Reporting	BFRS Baseline Performance	BFRS Target 2019/20	Target setting Rationale
PI 09	The average response time to dwelling fires	Quarterly	8.06 minutes (3 yr average)	Within 10 minutes	Based upon attendance standard set in CRMP. There are currently known issues in relation to the accuracy of response time data.
PI 10	The average response time to road traffic collisions	Quarterly	10.30 minutes (3 yr average)	Within 13 minutes	Based upon attendance standard set in CRMP. There are currently known issues in relation to the accuracy of response time data.
PI 11	The average call-handling time to mobilise to primary fires	Quarterly	77 seconds (3 yr average)	Within 60 seconds	Based upon attendance standard set in CRMP. There are currently known issues in relation to the accuracy of call handling time data.
PI 12	The number of 'false alarm malicious' and hoax calls mobilised to	Quarterly	139 (5 yr average)	111	Projection for 2018/19 at year end is 115 mobilisations to hoax calls which is lower than the average of the previous 5 full years (but higher than 2017/18 at 105). It is recommended that a target of 20% reduction on the 5 year average is set.

## Proposed Service Delivery Performance Indicators and Targets for 2019/20

Ref	Performance Indicator	Frequency of Reporting	BFRS Baseline Performance	BFRS Target 2019/20	Target setting Rationale
PI 13	The percentage of 'false alarm malicious' and hoax calls not attended	Quarterly	51% (5 yr average)	58%	Projection for 2018-19 at year end is 58% of hoax calls not attended which improves on the average (51%) of the previous 5 full years (and 2017/18 at 54%). It is recommended that a target of 58% is set.
PI 14	The number of 'false alarm good intent' calls mobilised to	Quarterly	664.8 (5 yr average)	665	Projection for 2018-19 at year end is 689 FAGI mobilised to which is worse than the average of the previous 5 full years (664.8) (and 17/18 at 586). It is recommended that the target is set at the 5 year average.
PI 15	The percentage of Building Regulations consultations completed within the prescribed timescale	Quarterly	97% (5 yr average)	95%	Target set on realistic level of compliance with building regulations guidance.
PI 16	The number of fire safety audits/inspections completed	Quarterly	1820 (5 yr average)	1800	This is a combination of the audits and inspections carried out by Fire Safety Inspection Officers and response personnel (600 & 1200).

## Proposed Service Delivery Performance Indicators and Targets for 2019/20

Ref	Performance Indicator	Frequency of Reporting	BFRS Baseline Performance	BFRS Target 2019/20	Target setting Rationale
PI 17	The percentage of fire safety audits carried out on high and very high risk premises	Annually	N/A	100%	Target based upon auditing all premises assessed as high/very high risk (as determined by the National Template). The number of premises in these categories fluctuates year on year.
PI 18	The rate of non-domestic fires (per 1,000 non-domestic properties)	Quarterly	7.08 (3 yr Average)	6.37	Projection for 2018-19 at year end is 116 non-domestic fires which is slightly better than 2017/18 (122) and the average of the previous 3 full years .Target based on a 10% improvement on the average (127) of the previous 3 full years
	The number of fires in non-domestic buildings	Quarterly	127 (3 yr Average)	114	
PI 19	The rate of automatic fire detector false alarms in non-domestic properties (per 1,000 non-domestic properties)	Quarterly	46.39 (3 yr Average)	33.24	Projection for 2018-19 at year end is 605 calls which is similar to 2017/18 (601). Implementation of changes to call handling and mobilising policy in 17/18 significantly reduced the annual number of incidents attended. Target of 600 is recommended based upon last two year's performance.
	The number of automatic fire detector false alarms in non-domestic properties	Quarterly	831 (3 yr Average)	600	

## Proposed Service Delivery Information Measures for 2019/20

Ref	Performance Indicator	Frequency of Reporting	BFRS Baseline Performance	BFRS Target 2019/20	Target setting Rationale
<b>Inf01</b>	The number of road traffic collisions attended by BFRS	Quarterly	387.4 (5 yr average)	n/a	For information only
<b>Inf02</b>	The number of people killed or seriously injured in road traffic accidents (Partnership Indicator)	Quarterly	222 (5 yr average 12-13 – 16/17)	n/a	For information only (Data not available for 2017/18)
<b>Inf03</b>	The number of water related deaths attended by BFRS	Quarterly	1.4 (5 yr average)	n/a	For information only

For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
7 March 2019  
Item No. 8

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

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

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

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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.*

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**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.

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**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 fourth 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')
UoRI 1 (18/19)	<b>RSM</b> Sep 18: Final Report (18/19)	Use of Risk Information  Head of Response	Medium	The Service Order for Site Specific Risk Information will be signed by the Chief Fire Officer, uploaded to the organisation's intranet and communicated to all relevant staff.	The CFO signed the Service Order and it has now been uploaded onto the Service library.	Original Oct 18	Completed – To be confirmed by follow up audit
UoRI 2 (18/19)	<b>RSM</b> Sep 18: Final Report (18/19)	Use of Risk Information  Head of Response	Low	The completion of validation exercises for Site Specific Risk Plans for Special Risk sites will be recorded.	Operational crews were reminded of the process when completing validation exercises via ODT.	Original Dec 18	Completed – No follow up required
UoRI 3 (18/19)	<b>RSM</b> Sep 18: Final Report (18/19)	Use of Risk Information  Head of Response	Low	The frequency of review of PTRIs will be considered and revised to an appropriate time period. PTRIs will be updated before the new review timeframe if new information is received through operational learning.	The review dates have been extended and all PTRI's have been reviewed. This will now be managed by a spreadsheet detailing all the PTRI's and there review dates.	Original Oct 18	Completed – No follow up 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')
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)**

**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>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>			

For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
07 March 2019  
Item No. 9

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**REPORT AUTHOR:** COMMUNICATIONS AND ENGAGEMENT MANAGER

**SUBJECT:** CUSTOMER SATISFACTION REPORT  
QUARTER 3, 2018/19: (01 APRIL 2018 – 31 MARCH 2019)

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

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Background Papers: None

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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.*

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**PURPOSE**

To report the levels of Customer Satisfaction during Quarter 3 2018/19 (01 APRIL 2018 – 31 MARCH 2019).

**RECOMMENDATION**

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

Item 9.1

## 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 compliment and complaint.
- 1.2. Surveys undertaken in Q3 2018/19 indicate that 99% of respondents across all survey areas were either very or fairly satisfied with the overall service provided. . This is consistent performance with previous reporting for 2018/19. The rate of responses for surveys issued in Quarter 3 is shown on the next page, with comparisons against the same period in 2017/18.
- 1.3. Figures in the report have been rounded to the nearest whole numbers.
- 1.4 Response rates.

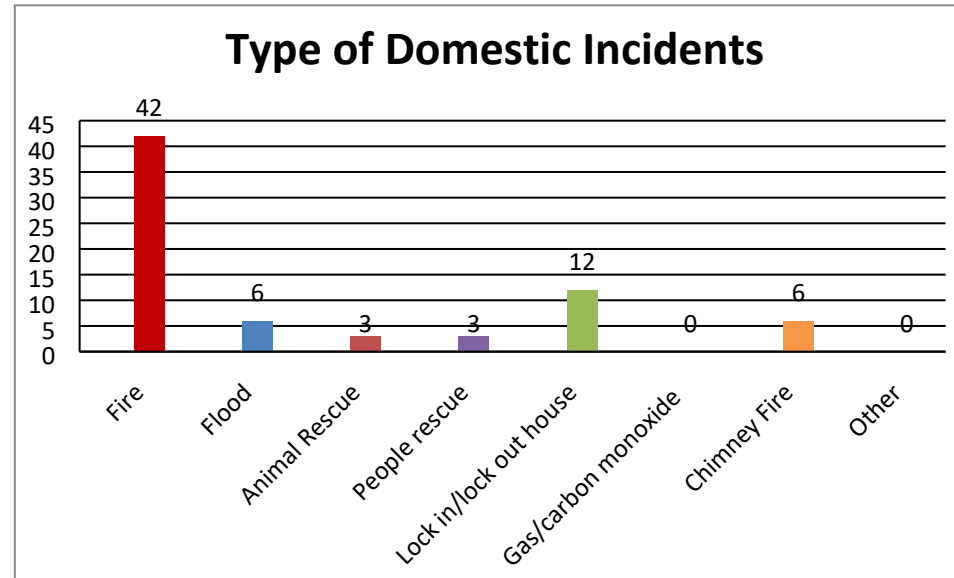
Area surveyed	Total number of surveys returned	Total number of surveys sent	Return rate	Comparison to Q3 2017/18 (return rate)
After the Incident (Domestic)	81	157	52%	58%
After the Incident (Non Domestic)	11	23	48%	47%
Safe and Well Visit	264	764*	35%	46%
Fire Safety Audit	164	309	53%	62.5%

<b>Totals / Average Return rate</b>	520	1,253	42%	53%

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

## 2. After the Incident (Domestic)

### 2.1. Type of Incident



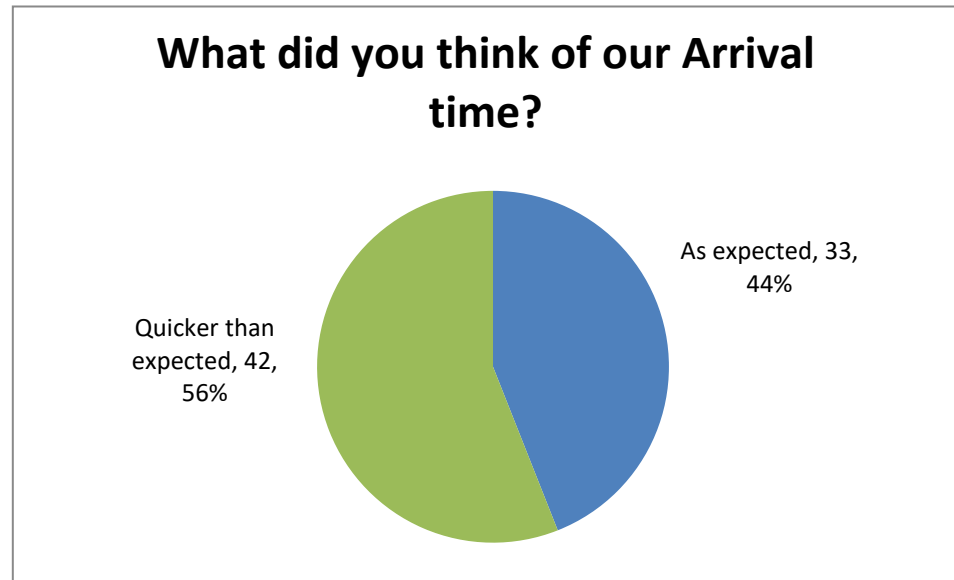
157 surveys were sent out and 81 replies were returned, providing a response rate of 52%. 72 respondents (88%) stated that their incident fell within three categories; a fire, locked in / out of property and flooding. The remaining 12% relates to rescues and animal rescue.

### 2.2. Overall satisfaction

Everyone that responded to this question (66 out of 81) was very or fairly satisfied with the service they received. No one stated that they were dissatisfied with the service they received (15 respondents did not choose to answer this question).

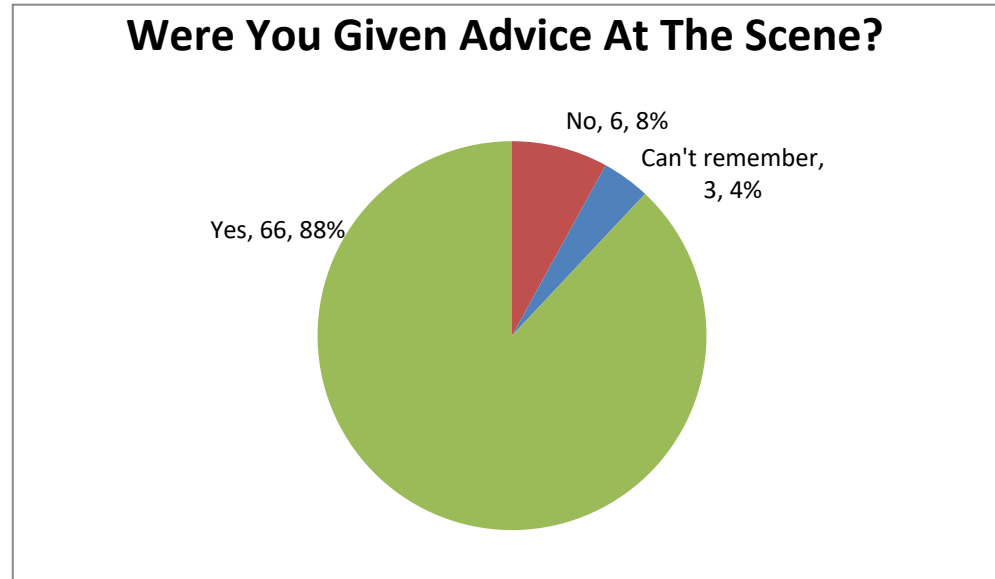


### 2.3. Arrival times



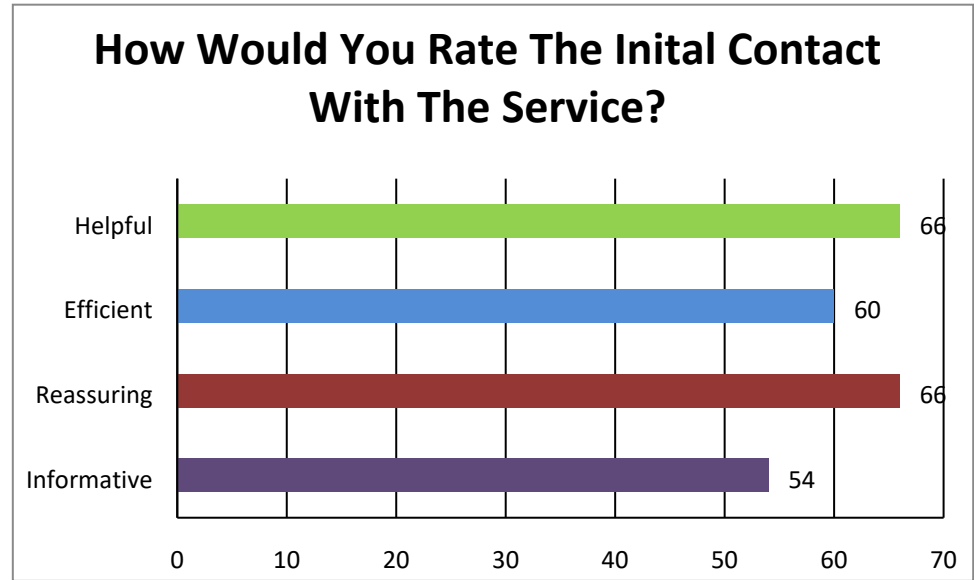
Of the 75 respondents who replied to this question, 42 (56%) thought the Service arrived quicker than expected, none thought the Service arrived slower than expected. 59% of respondents had called the Service themselves and they were all positive about the assistance they received. None of the respondents to this question stated that the time to arrive was slower than they expected.

## 2.4. Advice given



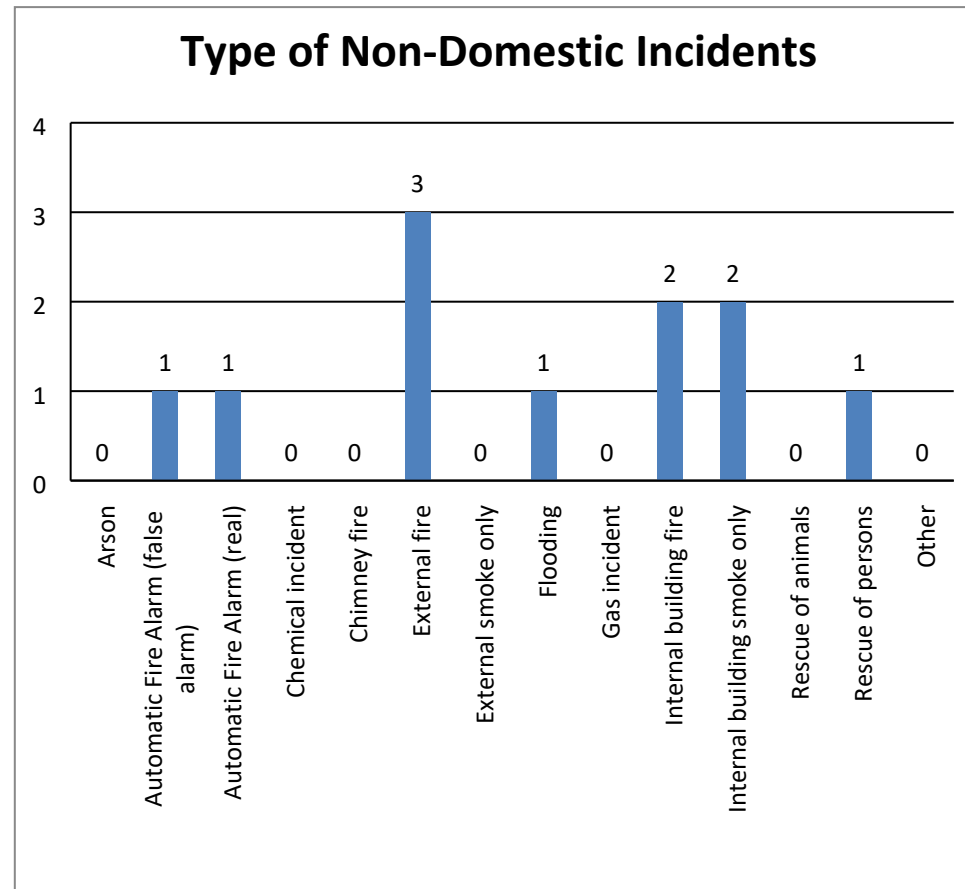
75 respondents replied to this question on the survey, 66 (88%) of those involved in incidents were given advice at the scene.

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



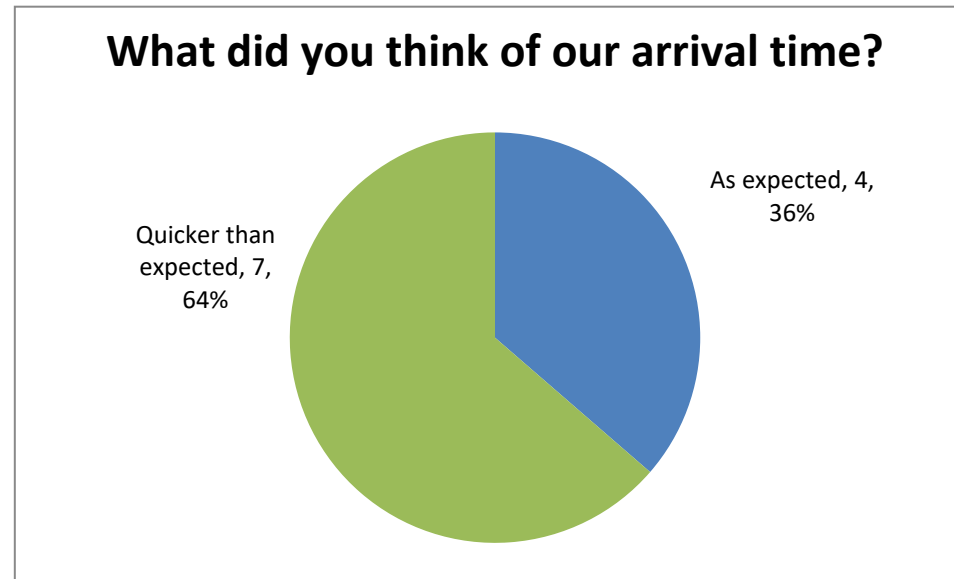
### 3. After the Incident (Non Domestic)

#### 3.1. Type of Incident



There were only 21 incidents involving commercial properties during Q3, from which 11 survey responses have been received (a response rate of 48%). In all 11 instances the respondent was very satisfied with the service they received from the Service.

### 3.2. Arrival Times

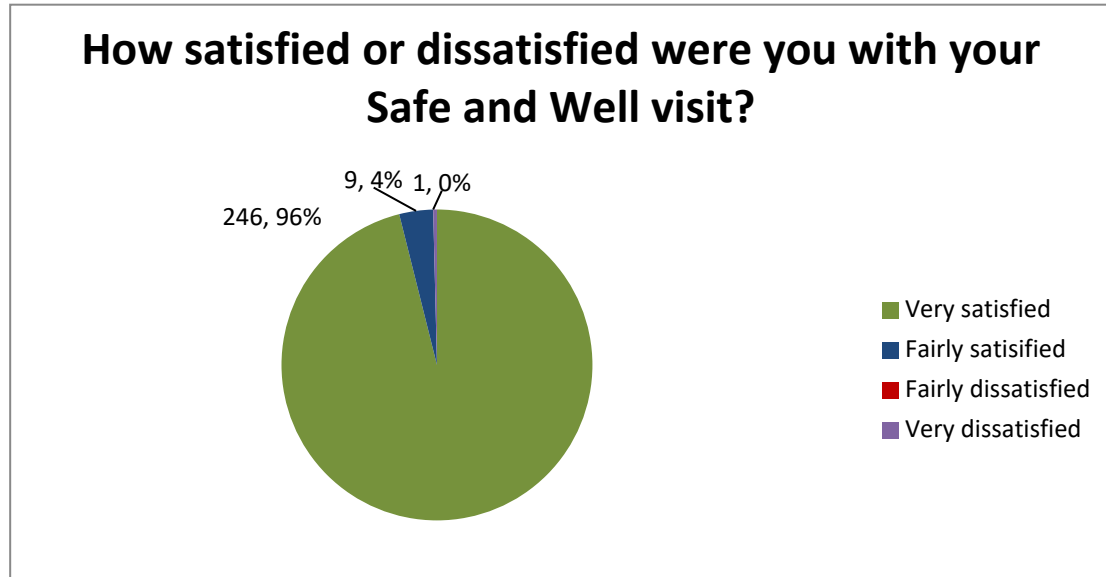


11 respondents answered this question and they were evenly divided on whether the Service arrived quicker than expected or as expected. None thought we arrived slower than expected.

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

During Q3 764 Safe and Well Visits took place and we continued to ask those visited to complete a S&WV questionnaire at the end of the visit. We have supported this by sending surveys to households in November 2018 and January 2019 that had not submitted one.

#### 4.1. Overall Satisfaction



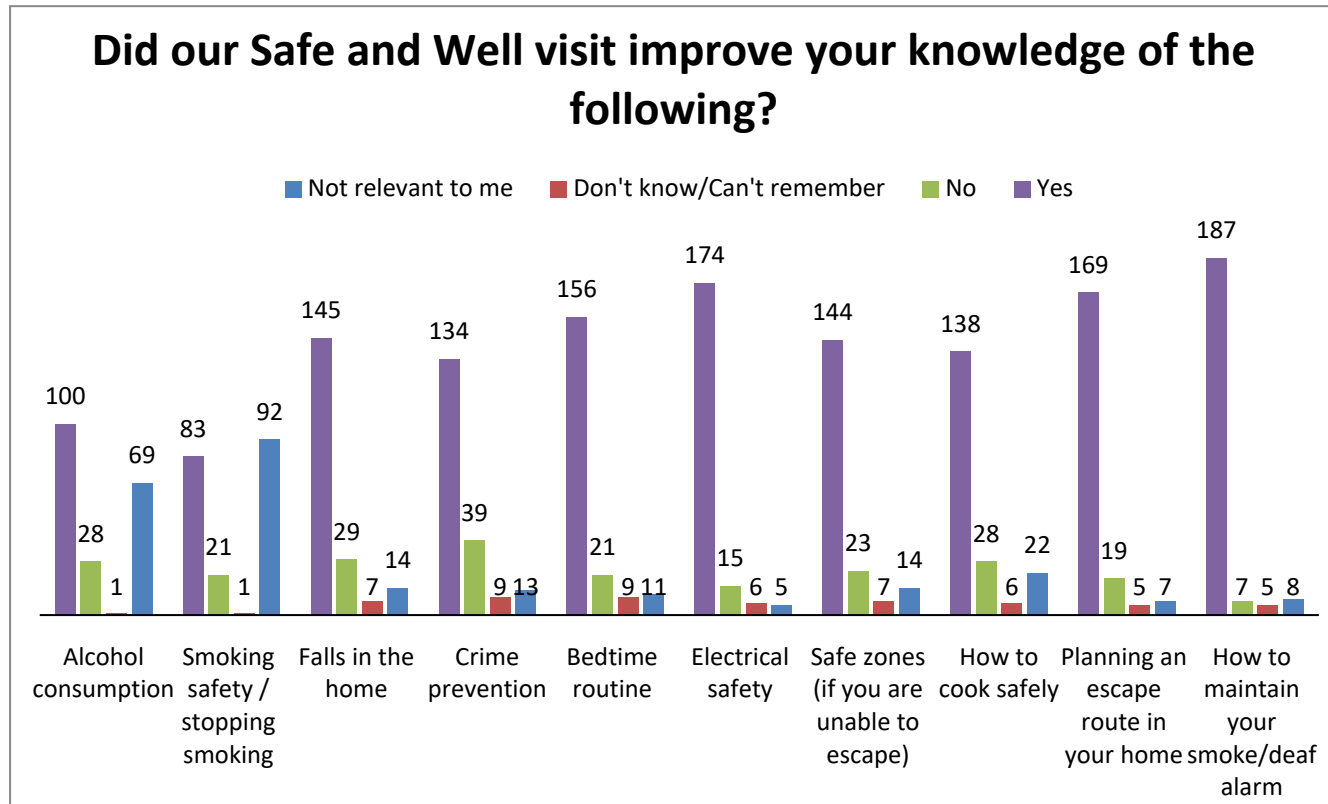
Of the 246 people who answered this question all respondents that replied, except for one, were very or fairly satisfied with their S&WV. One person stated that they were very dissatisfied. The reason for their dissatisfaction is that their smoke alarm battery was not working after the visit. Community Safety team have actioned this through the supply of a replacement.

There continues to be many positive comments provided from those we visited about the service that they have received from us. The most common comment was that the staff visiting them, whether Community Safety staff or Firefighters, were courteous, polite, friendly, helpful and professional.

## 4.2. Providing information

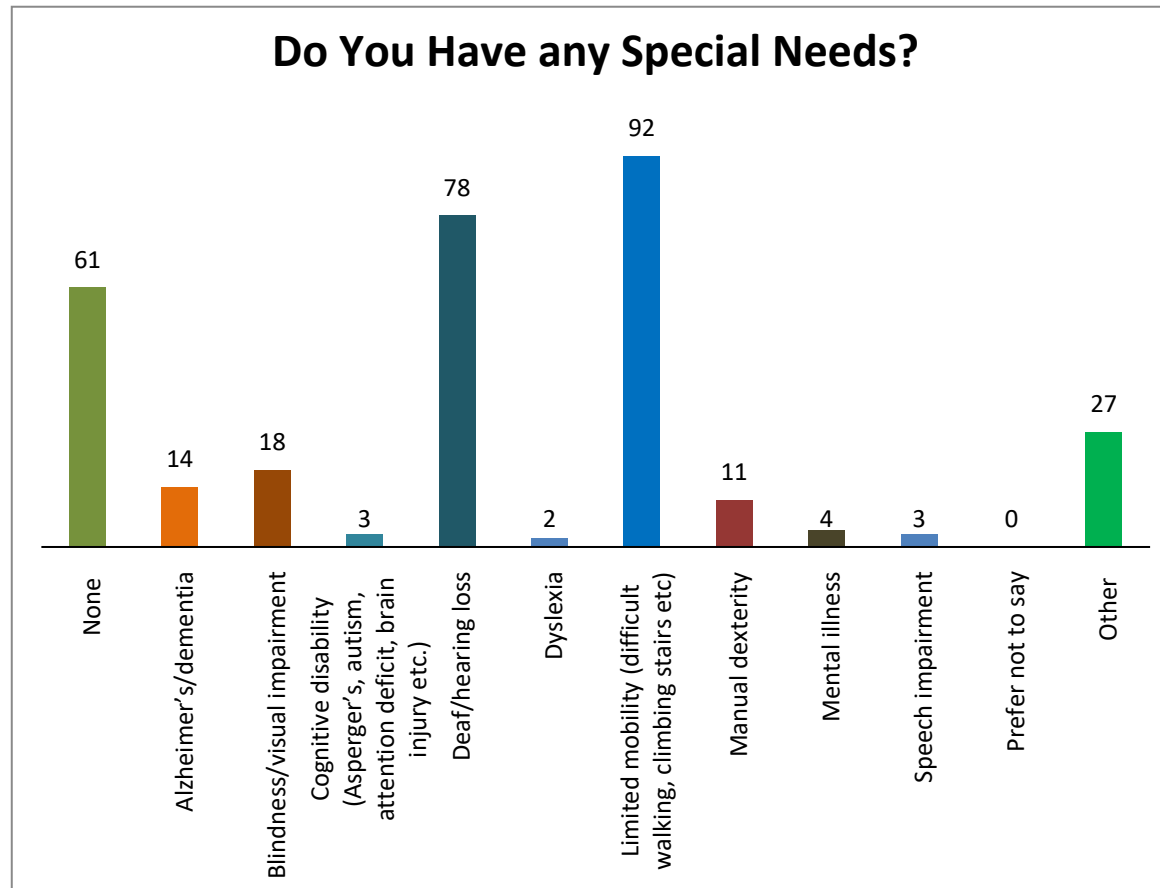
Part of the benefit of Safe and Well Visits is the opportunity to give vulnerable people more information about a range of safety issues, such as how to avoid slips and trips and talking to them about smoking cessation and their use of alcohol.

The table below shows how much those visited thought the advice given had improved their knowledge of these safety issues. In at 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.



## Health Issues

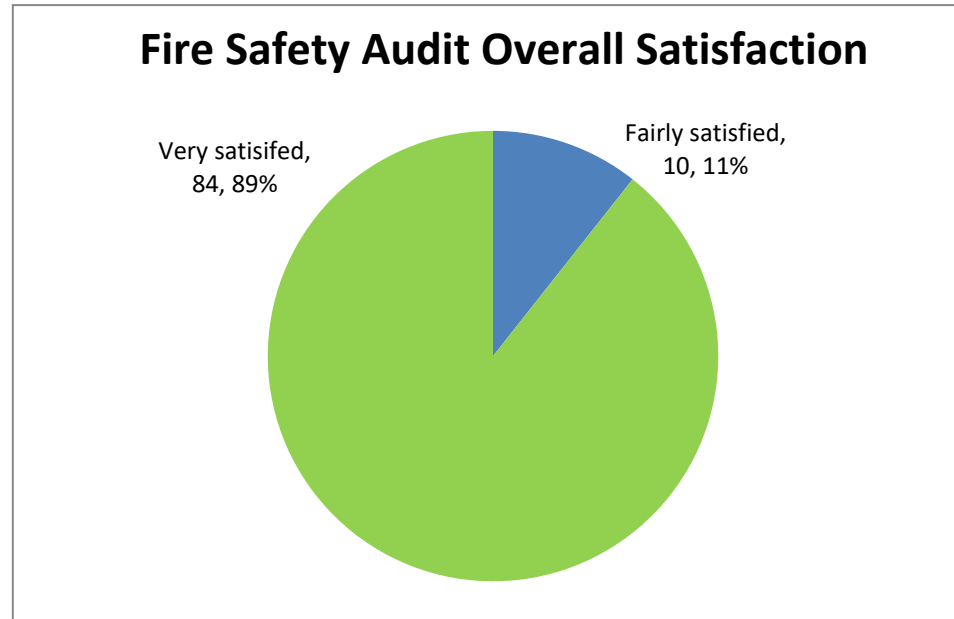
People who are receiving Safe and Well Visits are considered vulnerable due to their age and other factors; we specifically target these visits to those in our highest risk groups. Not all have health issues, however the table below shows some of the common issues affecting those visited. These include 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)

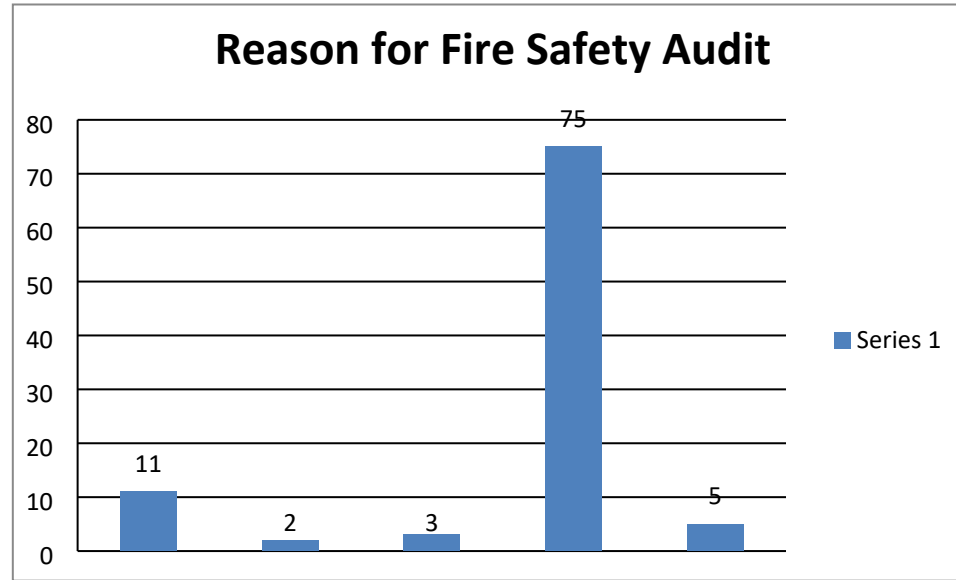
### 5.1. Overall Satisfaction



Of the 309 surveys sent out, 164 were returned, a response rate of 53%.

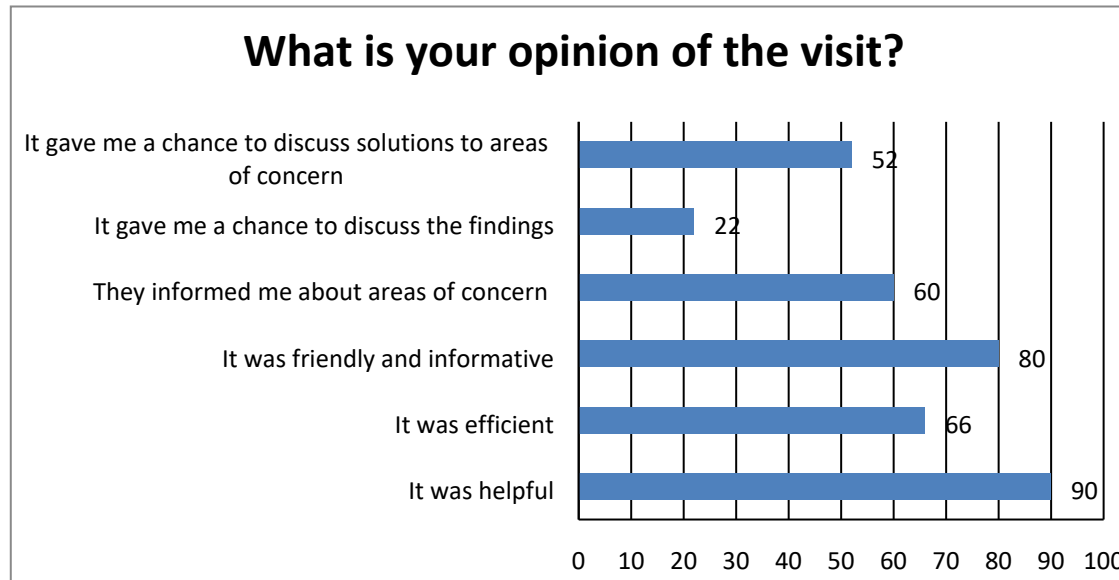
Not everyone responded to the question about overall satisfaction but of those who did (96) all were very or fairly satisfied with the Fire Safety Audit (FSA) they received.

### 5.2. Reason for Audit



Almost all respondents said their FSA were carried out as part of the routine inspection programme.

### 5.3. FSA Outcomes



Those premises receiving FSAs found our inspection teams to be helpful, friendly and informative as well as giving them an opportunity to discuss areas of concern and their findings. Under half (48%) of those having an FSA were required to take action with 62 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.

Despite a mail out to those receiving Safe and Well Visits the return rate on surveys remains lower than the previous year. Further steps will be taken in Q4 to both increase the number of surveys completed at the time of the visit and to increase rates of return by mailing surveys to those receiving visits. We are to explore alternative ways to undertake these surveys that that is more efficient and effective at providing the feedback we wish to gain.

## **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 third quarter 2018/19 the Service received 15 compliments, five in October, seven in November and three in December. Compliments are published in the Blue Bulletin newsletter and informed to the Fire and Rescue Authority.

## **8 Complaints**

In the third quarter of 2018/19 the Service received four complaints: two in October(both satisfied at Stage 1, not upheld), one in November (satisfied at Stage 1, not upheld) and one in December, which has been satisfied at Stage 1 upheld).

**SOC IAN EVANS  
HEAD OF PROTECTION**

For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
07 March 2019  
Item No. 11

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

**SUBJECT:** CORPORATE RISK REGISTER

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

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Background Papers: None

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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.*

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**PURPOSE:**

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

Item 11.1

## RECOMMENDATION:

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

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### 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 shown below for your information and approval.
- 2.2 Changes to individual risk ratings in the Corporate Risk Register:  
  
There are no changes to the Corporate Risk Register individual risk ratings.
- 2.3 Updates to individual risks in the Corporate Risk Register:

**CRR00002: If we cannot 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.**

Through the Retained Duty System (On-Call) Improvement Project, a number of work streams have provided options that support improvement with the recruitment and retention of On-Call personnel. It is through this project that the Service have defined opportunities that will support a more flexible and family friendly approach for On-Call personnel. The next phase of

this project includes negotiations, with the work force and trade unions, on policy changes to incorporate these improvements and lead to improving the Services overall availability of On-Call appliances. Presentations on these changes have been delivered to both CMT and SDLT. The initial meetings with the Representative Bodies have been carried out and scoping for formal negotiations agreed.

**CRR00022: 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.**

National Operational Guidance Program has now issued training specifications in a number of areas. The Service is waiting for specific gap analysis toolkits to be developed to enable an analysis to be completed. The Service is well embedded with Regional partners to ensure that best practice is shared and risk information is consistent.

**CRR00044: 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 firefighters and the communities, reduce our ability to monitor performance, undermine RDS employees confidence in the Service and could result in negative media coverage.**

The Gartan availability system continues to provide accurate availability information enhancing the day to day management of RDS (On-Call) individual and appliance availability. The system has proven to be very reliant at all times, supporting On-Call stations and management reporting.

**SERVICE 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

Risk Rating/Colour	Risk Rating Considerations / Action
Very High	<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>
High	<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>
Moderate	<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>
Low	<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>



For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
7 March 2019  
Item No. 12

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**REPORT AUTHOR: HEAD OF PROTECTION**

**SUBJECT: ANNUAL REVIEW OF PARTNERSHIPS**

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For further information on this Report contact: Service Operational Commander Ian Evans  
Head of Protection  
Tel No: 01234 84 5061

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Background Papers:

RSM Internal Audit Report 2017  
HMICFRS Report 2018

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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.*

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## PURPOSE

The purpose of this report is to provide Members of Service Delivery Policy and Challenge Group with an update on how the revised Partnership and Collaboration Policy implementation will strengthen our partnership governance and address previous internal audit recommendations and the area for improvement set out in HMICFRS report 2018.

## RECOMMENDATION

Members are requested to consider the content of the report.

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### 1. Background

- 1.1. BFRS has been involved in a wide range of partnership/collaboration work over many years and is subject to certain statutory requirements in relation to partnership working, such as those for Community Safety Partnerships and the Local Resilience Forum and the statutory duty to consider blue light collaboration under the Policing and Crime Act 2017. The Fire and Rescue National Framework for England also sets out expectations in relation to collaboration for both efficiency and effectiveness.
- 1.2. In 2014, BFRS implemented a recommendation from an Internal Audit undertaken by Baker Tilley to review partnerships on an annual basis and report outcomes to the Authority. A report was submitted to FRA in 2015/16, but deferred in 2017/18 to allow a policy review to be completed.
- 1.3. The policy review was required due to a need to better align the governance of partnerships to levels of risk and strategic significance and to improve evaluation of performance and return on investment. The levels of management oversight in many instances were disproportionate to these. This combined with the high volume of interactions with other agencies classified as partnerships within the scope of the policy, created somewhat bureaucratic and unwieldy partnership governance arrangements. The scope of the policy was also limited exclusively to the area of community safety.

- 1.4. A review undertaken in 2017 found that of 88 relationships deemed to be partnerships, most did not have any agreed outcomes, timeframe, performance standards or any means of evaluation. The partnership database did not reflect current activity with external organisations and discussion with staff identified that:
- The bureaucracy for maintaining the database was prohibitive in terms of volume and time
  - There was a general absence of evaluation criteria for partnerships and collaborations.
- 1.5. In 2017, RSM completed an internal audit of blue light collaboration activity and made a number of recommendations. These were completed in March 2018, but included actions regarding management, review and evaluation which were similar in some respects to the parallel partnership review.
- 1.6. In late 2018 a new draft partnership policy was produced taking account of audit recommendations and the review findings. This is currently out on circulation for consultation. It will be supported by a new partnership database to record details of all significant partnerships/collaborative working arrangements.
- 1.7. The report by Her Majesty's Inspectorate FRS on the inspection of BFRS published on 20 December 2018 included a range of positive findings on partnership/collaboration, recognising *'many positive examples of the service working constructively with partner organisations and other agencies'*. The report cited examples including; sharing premises with police and ambulance services; joint procurement; joint provision of services and work with licensing and housing authorities on rogue landlords and licensed premises. The report also identified the following area for improvement; *'The service should ensure it effectively monitors, reviews and evaluates the benefits and outcomes of any initiatives. This should include collaboration.'*
2. Features of proposed new policy arrangements
- 2.1. The new arrangements will apply to all relevant partnerships/collaborations. The definition of partnership adopted for policy purposes is:
- "A documented collaborative working relationship where the parties work towards a common purpose or desired outcomes, and where there is mutually agreed sharing of resources, risk and benefits within an agreed timeframe"*
- 2.2. The new policy will set out processes to identify the nature and strategic significance of partnerships/collaborations so that governance and oversight is proportional and undertaken at an appropriate management level by clearly designated owners.

This will serve to reduce the volume of partnerships requiring annual review at a strategic level and focus scrutiny on the partnerships with most impact.

- 2.3. The new policy will set out processes to ensure that the purpose, risks, benefits and resources in partnerships will be captured on a more user-friendly database and processes to ensure regular monitoring, review and evaluation of benefits and outcomes. The Partnership Development Manager will coordinate regular reporting appropriate to the significance of the partnership.
- 2.4. The new policy will also set out a process for regularly considering potential new partnerships that can be embarked on to assist the Service in the achievement of its strategic objectives.
- 2.5. Work is currently ongoing to prepare for implementation of the new arrangements upon conclusion of the consultation and publication of the new policy.
3. Potential future collaboration
  - 3.1. There is a range of collaboration being actively explored overseen by the Blue Light Collaboration board which is reported on direct to the Authority.
  - 3.2. The Partnership Development Manager also has a remit to work with all functions of the Service to identify and assist in the development of new collaborations, particularly those that can achieve efficiency savings or generate cost recovery or income.
  - 3.3. The draft Community Risk Management Plan 2019-2023 currently out for public consultation contains a plan for 2019/20 to 'Proactively pursue new and innovative ways to work together with partners to contribute to the wider public health agenda in support of the NHS 10 year plan'. The Service is currently in discussion with Alzheimer's Society, Memory Assessment Service and Bedfordshire Carers with regards to a proposed service for generating referrals for BFRS Home Safety Advisers to undertake Safe and Well visits and offer advice to reduce the risk of falls in the home.

4. Recommendation

4.1. Members are requested to consider the content of the report.

**SOC IAN EVANS  
HEAD OF PROTECTION**

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For Publication

Bedfordshire Fire and Rescue Authority  
Service Delivery Policy and Challenge Group  
7 March 2019  
Item No. 14

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**REPORT AUTHOR:** DEPUTY CHIEF FIRE OFFICER

**SUBJECT:** REVIEW OF WORK PROGRAMME 2018/19

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

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Background Papers: None

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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.*

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**PURPOSE:**

To review and 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 for 2019/20.

Item 14.1

**RECOMMENDATION:**

That Members review the work programme for 2018/19 and note the 'cyclical' Agenda Items for each meeting in 2019/20.

**ANDREW HOPKINSON  
DEPUTY CHIEF FIRE OFFICER**



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

<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>
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 2019/20</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	Update on HMP Bedford	Added by SDPCG 29 Nov 2018

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

Meeting Date	'Cyclical' Agenda Items		Additional / Commissioned Agenda Items	
	Item	Notes	Item	Notes
26 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		

Meeting Date	'Cyclical' Agenda Items		Additional / Commissioned Agenda Items	
	Item	Notes	Item	Notes
19 September 2019	<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 2019/20</li> </ul>	Verbal Update		

Meeting Date	'Cyclical' Agenda Items		Additional/Commissioned Agenda Items	
	Item	Notes	Item	Notes
20 November 2019	<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 2019/20</li> <li>• Review of the Fire Authority's Effectiveness</li> </ul>	Verbal update		