# PERFORMANCE COMMITTEE County Durham and Darlington Fire and Rescue Authority

### 2 MARCH 2020

# PERFORMANCE REPORT – QUARTER THREE 2019/20

# REPORT OF AREA MANAGER, EMERGENCY RESPONSE

## **Purpose of report**

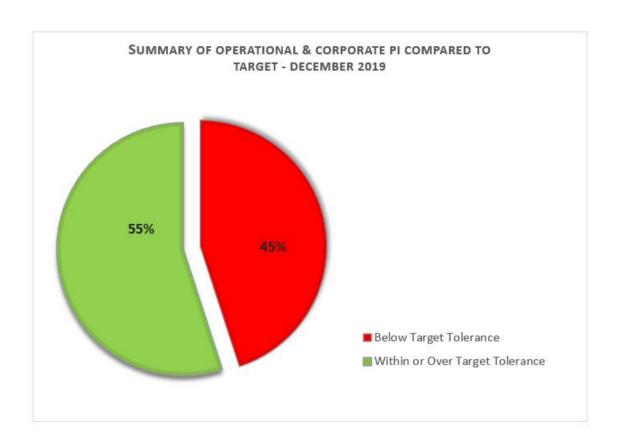
1. This report presents a summary of organisational performance at the end of the third quarter of the 2019/20 financial year.

# **Background**

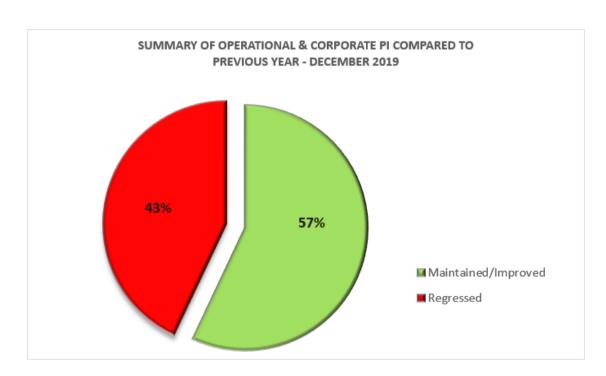
- 2. Both operational and corporate performance is monitored and managed internally via the monthly Performance and Programme Board (PPB) and Service Leadership Team (SLT) forums. Members of the Combined Fire Authority (CFA) consider performance on a quarterly basis at meetings of the Performance Committee and the full CFA.
- 3. A comprehensive suite of Performance Indicators (PIs) are employed to measure both operational and corporate performance. Targets are set on an annual basis against SMART criteria and take account of longer-term trends and the potential for spikes in performance.
- 4. This robust approach to performance management enables action to be taken at an early stage if performance is not meeting expectations and provides assurance that resources are being directed towards the areas of greatest risk.
- 5. In addition to setting a target level for relevant PIs, the Service also employs a system of tolerance limit triggers that allow under or over performance to be highlighted to the PPB when the PI goes beyond set tolerances, which vary depending on the indicator. Each PI has a total of four tolerance limit triggers; two each for both under and over performance.
- 6. Performance is presented from two perspectives: by comparison against the annual target levels, and by comparison with performance at the same point last year.

### Overview of performance across all indicator categories

- 7. The tables overleaf provide an overview of how key performance indicators were performing at the end of quarter three 2019/20, across both operational and corporate areas of the Service.
- 8. The first pie chart over the page shows that 55% of the strategic PIs met or exceeded their target level.



9. The next chart below shows that 57% of the strategic PIs either maintained or improved when compared to performance last year.



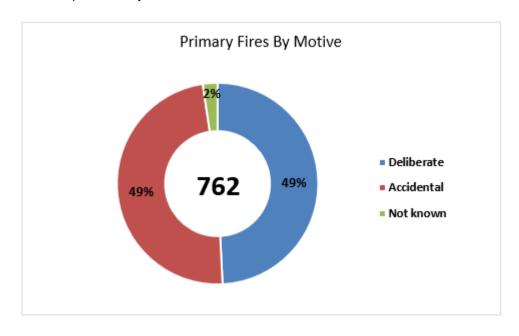
# Performance reporting by exception

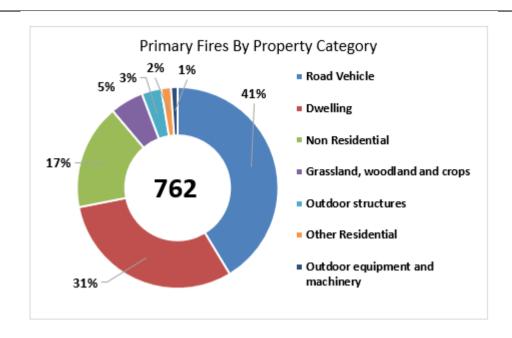
10. The following sections of the report present details of specific operational and corporate indicators where performance was notably strong or where additional work is required to secure improvement. An explanatory narrative is provided for each PI group along with information about how performance compares to the annual target and the previous year.

#### Prevention

Performance Indicator	Objective	Q3 2019/20 Actual	Q3 Target	Actual vs Target	2018/19 Q3 Actual	Actual vs Previous Year
PI 02 Primary Fires	Down	762	726	-5%	792	3.8%
PI 03 Accidental Dwelling Fires	Down	183	179	-2.2%	184	0.5%
PI 04 Injuries Arising from Accidental Fires in Dwellings	Down	17	16	-6.3%	10	-70%
PI 05 Total Secondary Fires	Down	1813	2153	16%	2260	20%
PI 07 Number of Safe and Wellbeing Visits	Up	15046	13646	10.3%	15562	-3.3%
PI 42 Percentage of Safe and Wellbeing Visits to High Risk People/Properties	Up	81.5%	80%	1.9%	83.1%	-1.9%

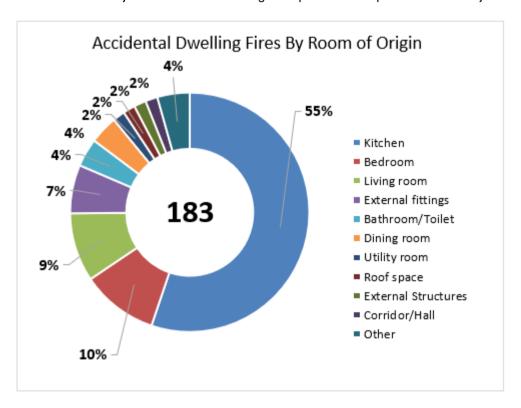
**PI 02 -** Easington District continue to have the highest amount (22) with the two top stations being Peterlee and Wheatley Hill - 22 (44%). 66% of primary fires across the service being vehicle fires. Peterlee had 50% car fires across the service. Work in on-going to address the number of car fires in the Easington District. There is a link to local and wider organised making this more complex. Further initiatives are being trialled within the district which will be monitored for success. In addition, this issue will be raised further at the Safe Durham Partnership. At the end of Q3 we sit at a figure of 762 compared to target of 726. This is an increase of 36 incidents across the PI. Although over the predicted target for this year we have seen a reduction of 30 incidents compared to the same period last year.

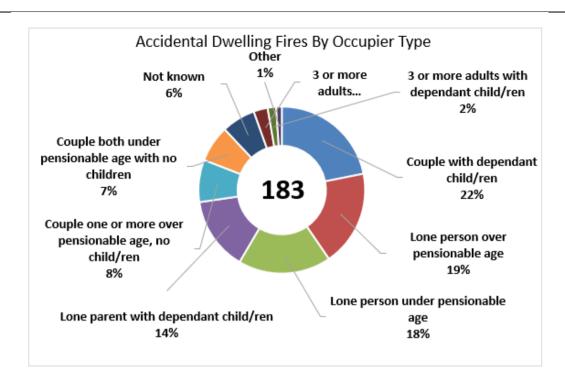




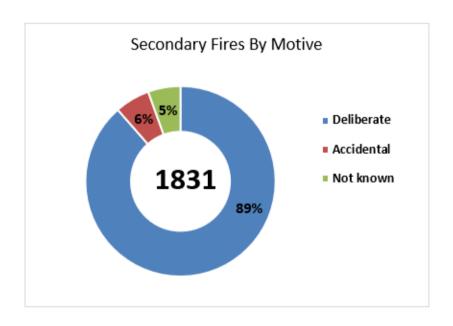
**PI 03 –** There has been a s;ight reduction in the number of fires compared to the same peiod last year (-12%). 80% of premises had smoke alarms fitted. There are strong links to cooking related fires, lone persons (apprximately 50%) and distraction.

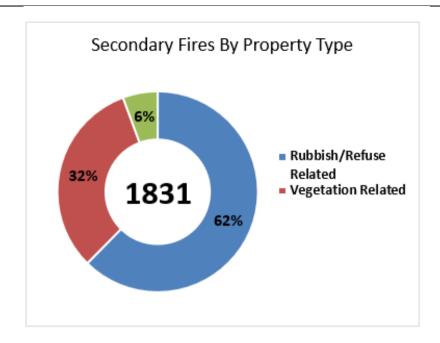
**PI 04** – We continue to see a low number of ADF recorded injuries during December and across Q3. In December we have seen two injuries recorded as being transported to hospital with minor injuries.





**PI 05** – Total for Dec – 120 compared to 93 for the same month last year. CDDFRS are still significantly lower in total compared to previous two years for the same period 1832 compared to 2260 a reduction of 19%. Easington District account for 32% of secondary fires across the service. Loose refuse accounted for 64% of secondary fires across the service in December (the total for the year is 54%). Over Q3 we have seen a significantly lower number of secondary fires across the service area. To put this in context in 2017/18 we saw 609 incidents, in 2018/19 543 incidents and for this reporting year 384; which equates to approximately a 37% reduction over the three-year Q3 figures.





**PI 07** – The vast majority of partner referrals are for slips trips and falls which account for 38% of all referrals. Crews have been tasked to focus on higher risk revisits moving into quarter 4 to ensure that we are concentrating on the most vulnerable members of the community based on data that suggests that they are at the highest risk from fire.

**PI 42 –** Over Q3 we have remained consistently in the 81-82% range for SAW to high risk people or premises. Managers form the CRM team have all attended the recent NFCC person centred pathway workshops, this workstream is driven by the NFCC CPO with the aim of introduction of a common method for SAW national.

#### **Protection**

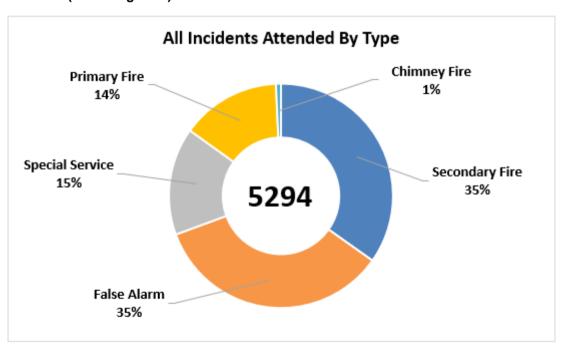
Performance Indicator	Objective	Q3 2019/20 Actual	Q3 Target	Actual vs Target	2018/19 Q3 Actual	Actual vs Previous Year
PI 10b Primary Fires in Non-Domestic Premises (enforced under the FSO by CDDFRS)	Down	66	54	-22.2%	N/A	
PI 13 Percentage of Building Regulations completed within required time period (15 working days)	Up	95.2%	100%	-4.8%	N/A	
PI 14 False Alarms Caused by Automatic Fire Detection Apparatus	Down	555	616	9.9%	654	15.1%
PI 17 Number of Fire Safety Audits	Up	1544	1664	-7.2%	1647	-6.3%

- **PI 10b** Primary fires in non-domestic premises (enforced under the FSO by CDDFRS) Actual 66 / Target 54- A post fire audit at Dr Inks in Darlington discovered issues with evacuation and raising the alarm during the incident and these were addressed by one of the business fire safety team. One premises in Darlington are currently being investigated by Environmental Health following a fire on their premises.
- **PI 13 –** Building Regs 95.2% within 15-day timescale for December which has remained consistent over the last quarter although we have seen a slight increase from October onwards through to December. We still have staff in the process of completing the Level 4 FS diploma which will give us some additional capacity around building regulations going forward.
- **PI 14 -** False alarms caused by automatic fire detection apparatus Actual 555 / Target 616. These figures have remained consistent over the quarter and under target. The number of chargeable UwFS YTD to December 31st 336. Number of cost recovery letters sent 31 (2 sent in December).
- **PI 17 –** Global figures Actual 1544 / Target 1664, Stations Actual 1360 / Target 1411, Central FS Team Actual 184 / Target 228. The central team have been asked to focus on making up the shortfall in these numbers which should be noticeable in future reports. There has been a knock-on effect of one of the business fire safety team being off on long term sickness absence following an operation.

# Response

Performance Indicator	Objective	Q3 2019/20 Actual	Q3 Target	Actual vs Target	2018/19 Q3 Actual	Actual vs Previous Year
Total Emergency Calls Received (including EMR)		11475			12377	7.3%
Total Incidents (excluding EMR)		5294			5953	11.1%
Total Fires		2629			3084	14.8%
Total False Alarms		1842			1938	5%
Total Special Services (excluding EMR)		820			931	11.9%
Total Road Traffic Collisions		230			267	13.9%
Total Emergency Medical Response (EMR)		23			18	-27.8%
PI 06 – Number of Response Standards Met	Up	4	6	-33%	4	0%
PI 12 – % Retained Availability on Stations	Up	69.7%	90%	-22.6%	70.6%	-1.3%
PI 08a Dwelling Fires Attended within 8 Minutes	Up	71.7%	70%	2.4%	69.2%	4%
PI 11a Fire Control Calls Received and Mobilised within 90 Seconds	Up	87.5%	90%	-2.8%	88	-0.6%
PI 16a Availability of on call appliances - 1st pump	Up	74.6%	90%	-17.1%	N/A	
PI 16b Availability of on call appliances - 2nd pump	Up	37.7%	90%	-58.1%	N/A	
PI 70 Number of Hydrant Inspections	Up	4281	4599	-6.9%	4604	-7%

# Total incidents (excluding EMR)



- PI 06 We continue to meet 4 out of 6 PIs under PI06, details of failures below in PI08C & D.
- **PI 12** Overall availability for December 64.5% influenced by the current AL policy relating to RDS, this is currently under review as part of the RDS project. Retained support officer now in role. RDS Support Project will report to PPB on progress.
- **PI 11a -** This indicator remains static at around 88%-89%. Control continue to monitor these calls on a monthly basis. Watch Managers continue to report to the FCM on these calls on a monthly basis.
- **PI 16a -** 1st appliance availability in December 70.2 %. This figure does not reflect the 'pure availability' of the first appliance as it incorporates, RDS Detachments, OCC and Casual hours incurred. Work ongoing to investigate a data set to separate. RDS Support Project will report to PPB.
- **PI 16b -** 2nd appliance availability for December down to 27.2 %. Barnard Castle 34.5% and Crook 19.9%. RDS Project will report to PPB.
- **PI 70** There is a project underway to implement a replacement for the Hydra system. Current underachievement is mainly due to problems with the hardware on station. The Emergency Response Team aim to ensure all hydrants are checked in-line with the annual programme however this PI may not accurately reflect the inspections completed until the introduction of the new system.

#### Workforce

Performance Indicator	Objective	Q3 2019/20 Actual	Q3 Target	Actual vs Target	2018/19 Q3 Actual	Actual vs Previous Year
PI 40 - All Staff Sickness	Down	5.99	4.50	-33.1%	6.63	9.7%
PI 41 All Staff Sickness Wholetime and Control Personnel	Down	5.58	4.50	-24%	4.65	-20%
PI 38 All Staff Sickness Excluding Retained Personnel	Down	5.25	4.50	-16.7%	4.59	-14.4%
PI 69 Number of Accidents to Personnel	Down	13	10	-30%	16	18.8%
PI 71 Number of Vehicle Accidents	Down	20	14	-42.9%	22	9.1%
PI 81 Percentage of Operational Staff Maintaining Competence	Up	93.8%	100%	-6.2%	100%	-6.2%
PI 80 Number of workplace assessments being undertaken by the training team	Up	56	45	+24%		
PI 82 Percentage of risk critical personal development plans actioned within 6 weeks	Up	92%	100%	-8%		
PI 86 Number of training courses cancelled (Core Risk Critical)	Down	31	18	-72.2%		
PI 87 Number of Student Places Not Taken Up Due to Programmed Courses (core risk critical) Running Under Optimum Capacity	Down	162	110	-47.3%	149	+8.7%

**PI 40 –** Current figures indicate absence above target for this year however many personnel who had previously been absent throughout quarter 3 have returned to duty, resulting in shifts lost to absence being reduced when compared to the previous months in quarter 3. There is no further planned absence within this category of staff moving into quarter 4 of the current reporting period.

**PI 38 -** Corporate absence increased throughout December when compared to previous months. This was predominately due to long term absence relating to mental health, muscular skeletal [MSK] and flu issues. Some personnel who have been long term absent are expected to return to duties on phased return throughout quarter 4 with a view to returning to full duties. There were a low number of shifts lost to short term absence throughout December relating to gastrointestinal and cold issues. All personnel have now returned to duty.

**PI 41 –** Within the wholetime category of staff December saw a large increase in short term absence when compared to the previous month of November. This was primarily due to gastrointestinal issues; cold, flu and respiratory problems. All personnel have now returned to full operational duties. Long term absence continued at the same rate as previous months with personnel being absent due to varied MSK related issues, as well as neurological concerns. MSK issues are relating to knee; shoulder; and hip. Some personnel who were long term absent throughout quarter 3 are expected to return to modified duties with a view to returning to full operational duties throughout quarter 4. Wholetime rider absence is within target for the reporting period. Absence levels within the FDO and DD category of staff are above target for the year. Control absence remained low throughout December with only 7 shifts lost to absence. Control absence is within target for the reporting period. HR will continue to work with line managers; OH and the service physiotherapist to assist personnel welfare in returning to full operational duties. HR will also look into the % take up of flu vaccine compared to previous years in an attempt to identify if this has possibly been a factor in increased levels of short term absence throughout December.

- **PI 69 –** No personal accidents during the month of December meaning that the total number of incidents (YTD) stays at 13, which is lower than the previous year of 17. December is the first month in the 2019/20 reporting period where the Service have not recorded a personal accident.
- **PI 71 –** There were 3 vehicle accidents in the month of December. The Manitou received minor damage whilst being used to move a car at STC, an appliance caused minor damage when manoeuvring between two double parked vehicles and an FDO impacted the rear of a 3rd party vehicle resulting in damage to both vehicles. All 3 incidents have been investigated respectively and recommendations have been made to help reduce the likelihood of any similar incidents in the future. This takes the Service to a YTD total of 20 vehicle accidents of which 4 were classed as 3rd party fault and 10 occurred in the first 2 months meaning that we have had 6 (driver fault) vehicle accidents in the last 7 months. This compares to the previous year of 24 (no 3rd party fault incidents).
- **PI 81 –** Of the 287 WT personnel, 269 of these are maintaining competence (93.7%). In relation to the 172 RDS personnel, 152 of these are maintaining competence (91.3%). Training are working with DM teams to ensure where possible all staff attend courses that are available and where necessary more dates are provided. Those out of competence are mainly linked to being on modified duties when returning from sickness absence.
- PI 80 There were 2 trainer observations, 2 driver trainer workplace assessments and 2 Dip Sampling assessments undertaken this month.
- **PI 82 –** There were a total of 14 submitted PDP's throughout October, November and December 2019. 13 of these PDP's were actioned with 6 weeks (92%).
- PI 86 Delivery: 2, Driver Training: 2.
- 2 HMEPU Driving courses were cancelled due to students not having the correct pre-requisite/qualifications to enable them to complete the training. There were also 2 Driver Training courses that were rescheduled: 1 EFAD revalidation was rescheduled due to student availability. 1 FDO Revalidation was rescheduled as the student was attending a risk critical course on the same day.

#### **Finance & Governance**

Performance Indicator	Objective	Q3 2019/20 Actual	Q3 Target	Actual vs Target	2018/19 Q3 Actual	Actual vs Previous Year
PI 34 - % of Invoices paid within 30 days	Up	98.6%	97%	1.6%	98.8%	-0.2%
PI 24 % of Freedom of Information Completed and Responded to within 20 Working Days	Up	98.7%	100%	-1.3%	98%	0.7%

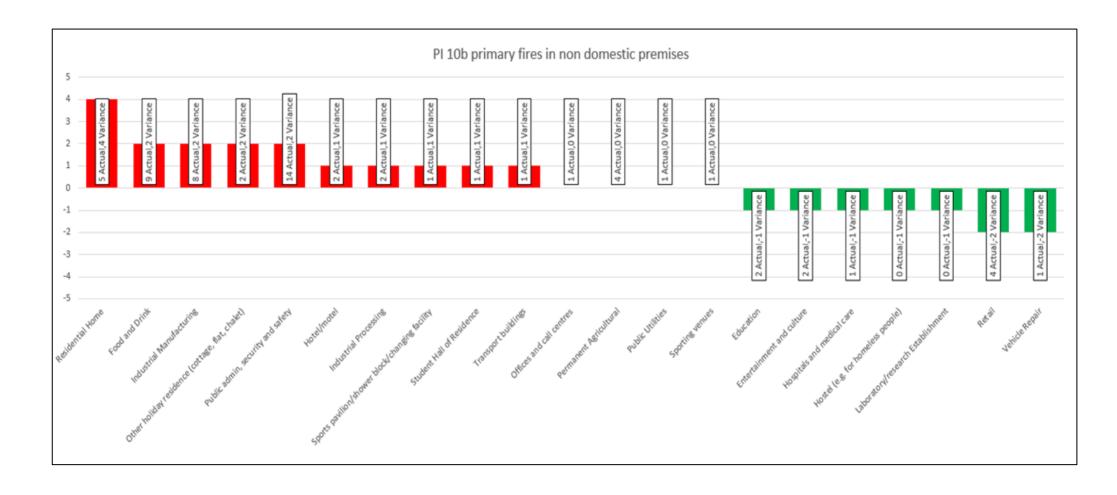
**PI 34 –** Finance staff are continuing to support the process due to issues with Oracle access and continue to have two clerks undertaking these duties on a regular basis. New access to the system is being tested with ICT and DCC but yet is proving to still have some issues still to be resolved.

**PI 24 -** The performance relates to a single FOI - received in June. This was a complicated request involving PDAs and availability. The resultant FOI was mainly late as some of the data was requested from ER not long prior to the deadline leaving not much time to answer the questions. These were around specials availability.

# **RECOMMENDATIONS**

- 11. CFA members are requested to:
  - a. **Note** the content of the report;
  - b. **Comment** on the reported performance.

Appendix 1 – PI10b Variance in Primary fires in non-domestic premises



Appendix 2 - PI 14 Variance in False Alarms caused by automatic fire detection equipment

