



# Buckinghamshire & Milton Keynes Fire Authority

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**Meeting and date:** Overview & Audit Committee, 15 March 2023

**Report title:** Prevention Improvement Plan – November/December 2022

**Lead Member:** Councillor Simon Rouse

**Report sponsor:** Area Commander Simon Tuffley

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**Action:** Noting

**Recommendations:**

That the Committee note the Prevention Improvement Plan highlight report (November - December 2022) summarising the progress made against the measures required to secure long-term improvements to Prevention delivery in Buckinghamshire Fire & Rescue Service (BFRS).

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**Executive summary:**

The Prevention Improvement Plan was written and presented to the Overview and Audit Committee in November 2021, along with the finalised Phase One Prevention Evaluation Report which had commenced in July 2020 but was paused due to revised priorities during the Covid 19 pandemic.

The Prevention Improvement Plan contains 60 recommendations, drawn from the Prevention Evaluation, the findings of Her Majesty's Inspectorate of Fire and Rescue Services and the areas required to meet the Prevention Fire Standard and associated National Operational Guidance.

Work to evidence attainment against the removal of the HMICFRS Prevention cause for concern is prioritised over other recommendations within the Prevention Improvement Plan, although the highlight report and dashboard demonstrate that work is also progressing on most other recommendations, noting that where this is not the case, work has been delayed by the delivery of externally led work from the Central Program Office Prevention Workstream.

Staff change has continued to impact upon the team in the period of this highlight report, with one new staff member recruited and one role becoming vacant again. This has understandably impacted on the team's ability to demonstrate attainment against the delivery periods originally identified.

However, subsequent to the period of the highlight report, the final vacant role has been recruited into and the team reached full headcount in January, noting that there is a six-month probationary period to competence.

As detailed in the highlight report (Appendix 1), seven recommendations have been completed within the two-month period covered, several of which related to the approval of the revised Prevention Strategy. The Prevention Strategy will however have to be revisited after the review of the Public Safety Plan.

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### **Financial implications:**

Amending communication methods and referral mechanisms in response to some of the Prevention Improvement Plan recommendations may introduce additional financial implications, however where appropriate, work completed by the NFCC on developing Online resources will be utilised.

Any requirement for growth will be submitted through the established internal governance arrangements for consideration.

### **Risk management:**

This Prevention Improvement Plan is the most effective way of ensuring continued improvement to ensure the best possible service is provided to the communities we serve.

The provision of regular highlight reports is an assurance tool to ensure that we are ultimately working towards aligning to national best-practice and more effectively to reduce risk in our communities.

There remain reputational corporate risks to the organisation should we be judged as inadequate by HMICFRS. The Service had already taken steps to mitigate this through having extensive internal and external audits of a number of areas of the Service, notably, elements of our operational activity has been subject to external independent assurance. The prevention evaluation is another example of applying constructive internal scrutiny to drive improvement and reduce risk.

Key risks are identified in the highlight report, of which the staffing issue has already been seen to impact upon delivery.

### **Legal implications:**

The key legislation, regulation, and duties linked to a Fire and Rescue Service's prevention function can include (but is not limited to) the following:

- The Road Traffic Act, Section 39
- Home Safety Act
- Housing Act
- Children's Act
- Working Together to Safeguard Children
- Safeguarding Vulnerable Groups Act and the Protection of Freedoms Act
- United Nations Human Rights Convention on the Rights of the Child

- Mental Capacity Act and Mental Health Act
- Police & Crime Act
- Modern Slavery Act
- Crime and Disorder Act
- Counter Terrorism and Security Act
- The Care Act
- Homelessness Reduction Act
- Anti-social Behaviour Crime & Policing Act

**Privacy and security implications:**

No privacy or security implications have been identified that are directly associated with this report or its appendices. The respective strands of the improvement plan will ensure Data Protection Impact Screening and full impact assessments are completed and reviewed where appropriate.

The report and its appendices are not protectively marked.

**Duty to collaborate:**

Collaboration with partners to ensure a collective and shared approach to identify and mitigating community risk is critical to ensure Prevention activity is effective. The evaluation identifies a number of areas where collaboration and partnerships can be developed for the benefit of community safety.

**Health and safety implications:**

There are no Health, Safety or Wellbeing implications arising from this report.

**Environmental implications:**

There are no environmental implications arising from this report.

**Equality, diversity, and inclusion implications:**

Whilst there are no identified implications directly associated with this report or its appendices, elements of work contributing to the progressive of individual recommendations have a positive impact upon some groups, specifically those where age is the protected characteristic. The respective strands of the improvement plan will ensure impact screening and full impact assessments are completed and reviewed where appropriate.

**Consultation and communication:**

The Prevention evaluation involved extensive engagement with stakeholders to ensure an effective and thorough evaluation of all our activity.

**Background papers:**

23 January 2020 - Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) – Buckinghamshire Fire and Rescue Service (BFRS) Inspection Findings Report:

[https://bucksfire.gov.uk/documents/2020/03/230120\\_item\\_7\\_hmicfrs\\_cover\\_report\\_23012020\\_appendix-min.pdf/](https://bucksfire.gov.uk/documents/2020/03/230120_item_7_hmicfrs_cover_report_23012020_appendix-min.pdf/)

10 November 2021 – Prevention Evaluation – Phase One Report

<https://bucksfire.gov.uk/documents/2021/10/oa-item-17-17-10-21.pdf/>

12 October 2022 – Fire Authority – Prevention Strategy

[Fire Authority Meeting - 12 October 2022 - Buckinghamshire Fire & Rescue Service \(bucksfire.gov.uk\)](#)

9 November 2022 – Overview and Audit Committee – Prevention Improvement Plan Update 2

[Overview and Audit Committee - 9 November 2022 - Buckinghamshire Fire & Rescue Service \(bucksfire.gov.uk\)](#)

<b>Appendix</b>	<b>Title</b>	<b>Protective Marking</b>
1	Prevention Improvement Plan highlight report – November/December 2022	Not protectively marked

# Project: Prevention Improvement Plan



<b>Lead Member:</b> <b>Project Sponsor:</b> <b>Project Manager:</b>		Cllr Simon Rouse AC Simon Tuffley Joanne Cook		<b>Project Objectives:</b> Following the Prevention Evaluation, a three-year plan is in place to develop Prevention within the service: Effective prevention strategy, processes and systems in place facilitating effective delivery of preventative information across the community				<b>Overall RAG</b> 	
Strategy, vision and leadership		Intelligence		Management of processes, systems and planning incl. audit		Coordination & communication of operations		Delivery of operations	

## Summary – Period dated: November – December 2022

### Key Activities

- Dedicated referral email ([referrals@bucksfire.gov.uk](mailto:referrals@bucksfire.gov.uk)) has been agreed as a single route into the Service. This enables work on the OHFSC to be progressed (had been placed on hold pending this) and Prevention Management to have oversight of referral volumes and outstanding referrals as identified in the HMICFRS report and Prevention Evaluation. Regular meetings scheduled for the Admin and Community Safety Team Leaders to move oversight of risk from Admin to Prevention. Guidance notes being written to support improvements to referral processes.
- Incident upload from Vision into PRMS reviewed against all incident types that should pull through. Although assured that all relevant incidents were being received with the exception of ‘small hazmat’, the system upgrade at TVFCS caused an issue with incident pull through that has not been able to be resolved. This has impacted on all follow up activity to incidents since that date, with measures necessary to redress the backlog when it is able to be accessed.
- Recruitment had brought the Central Prevention team to full headcount for the first time since October 2021. However, this has been disrupted by a member leaving during their probationary period. Processes in place to source a replacement from the other applicants from the most recent recruitment round, noting that onboarding to competent takes four to six months, will impact on delivery numbers until the end of June 2023.
- The Prevention Strategy was approved by the Fire Authority in October. Communication of it to relevant teams and partners commenced in this period.

## Priorities for Next Period: January - February 2023

### Progress

- Bandings to be added to local Prevention KPMs in liaison with DIT to ensure consistency in approach
- Consideration of additional data line to be added to Service KPMs to ensure there is Service oversight of all data eligible for external (Home Office) reporting, specifically virtual or non cross-threshold visits
- Following migration of PRMS and queue issues being rectified, post incident actions need to be addressed prior to Home Office data run
- Service procedure for quality assuring prevention processes to be written aligned to the expectations of the Prevention Fire Standard and Central Program Office Prevention Workstream’s work on Prevention customer engagement and evaluation
- Onboarding of OHFSC now that the referrals in process has been agreed

### Complete

- 6 month reports on Prevention activity showing key insights and case studies of Prevention impact in the community
- Behaviour change report evidencing the impact of Home Fire Safety Visits on the behaviour of those receiving them
- Mid term review of Prevention Improvement Plan to ensure priorities and timescales are still appropriate

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Summary – Period dated: November – December 2022	Key Milestones	Forecast/ Actual	RAG
<b>Key Activities (continued)</b>	Effective system for dealing with referrals implemented, prioritising those with highest level of risk	October 2022	
	Approval of revised Prevention Strategy	October 2022	
	An effective system defining levels of risk in the community	October 2022	
	Evidence in place to support removal of Prevention Cause for Concern	October 2022	
<b>Change Request Log:</b>			
NA	NA	NA	

Risk/ Issue	RAG	Description	Mitigating Action	Next Action
Enter top three highest risks to the plan				
Staff capacity		Failure to recruit into vacant roles impacting on ability of Prevention team to conduct core day to day activity as well as progress actions within the Prevention Improvement Plan	Member of the Community Safety delivery team left during their probation period. Impacting on time to that team reaching full capacity (all team members trained and out of probation)	Candidates from last recruitment round contacted and one person appointed to start in January.
Prioritisation of visits by risk level (risk stratification)		Capacity of 3 <sup>rd</sup> party company (Active Informatics) to make changes to the Prevention side of the Premises Risk Management System whilst the migration to 365 and development of the Site Specific Risk Information (SSRI) area is underway delays ability to progress areas of work required for prevention including the prioritisation of visits by risk level	If scoring within the system can be adjusted, threshold levels (bands) may have to be managed outside of the system but the Admin team are under capacity and do not have the resource to do this. Work on recording all visits in PRMS commenced whilst awaiting SSRI completion but delivery date is dependent on Active's ability to provide development time, and this has yet to be confirmed.	Once 'snagging' on SSRI area of PRMS is complete, development time has been assigned to enable risk stratification to be applied within the system.
Collaborative working – staff capacity		Staff retention in key departments and conflicting priorities within the organisation impacting upon Prevention team's ability to deliver against the recommendations	Regular liaison with relevant department leads to ensure early warning of issues that may impact upon progress against the cause for concern areas or the wider prevention improvement plan	Continue regular liaison with other dept leads

Prevention Improvement Plan dashboard update – December 2022



Prevention Improvement Plan - Progress Dashboard

	Total recommendations	Complete	On track	On hold/delayed	Not started
Strategy, vision & leadership	7	4	1	2	0
Intelligence	15	5	4	6	0
Management of processes, systems and planning, including audit	15	2	10	2	1
Coordination and communication of operations	13	6	6	0	1
Delivery of operations	10	4	4	2	0
<b>Grand totals</b>	<b>60</b>	<b>21</b>	<b>25</b>	<b>12</b>	<b>2</b>