



Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 8 November 2023

Report title: Prevention Improvement Plan – July / August 2023

Lead Member: Councillor Simon Rouse

Report sponsor: Area Commander Simon Tuffley

Author and contact: Community Safety & Safeguarding Manager Joanne Cook

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Action: Noting

Recommendations:

That the Prevention Improvement Plan highlight report (July – August 2023) summarising the progress made against the measures required to secure long-term improvements to Prevention delivery in Buckinghamshire Fire & Rescue Service (BFRS) is noted.

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 the then Her Majesty's Inspectorate of Fire and Rescue Services and the areas required to meet the Prevention Fire Standard and associated National Operational Guidance.

A mid-term review of the Prevention Improvement Plan was conducted ensuring that the actions identified against those recommendations not yet completed remain current both within the Service and aligned to national expectations from the National Fire Chiefs Council Central Program Office - Prevention.

Work to evidence attainment against the removal of the HMICFRS Prevention cause for concern regarding referrals was awaiting development from the third-party provider of the Premises Risk Management System, which was scheduled for after the delivery of the test environment for the Site Specific Risk Information (SSRI) element.

This work has now begun with the revised referral form agreed and an updated visit form format awaiting receipt for checking before system development begins. Once that has been completed, eight recommendations of the 27 remaining in the Prevention Improvement Plan (PIP) will be able to be closed.

Work on the actions linked to the outstanding recommendations has been minimal during this period due to the recognition of some issues related to the admin team processing referrals in a timely manner. Whilst the cause for this is yet to be established, workloads within the Central Prevention management and delivery teams were adjusted to address this.

As detailed in the highlight report (Appendix 1), the overall RAG rating has been adjusted to Amber due to the capacity demand associated with the referral processing issue and significant delays with regard to triaging referrals in the Firewise scheme and the delivery of intelligence led Fire Sense training to referral partners. These areas have been prioritised for action in the next period.

Financial implications:

The National Fire Chiefs Council Central Program Office for Prevention and the digital technologies workstream have developed a number of tools with the associated guidance which will be launched in quarters three and four of the year. These closely align to some of the outstanding recommendation actions and will be delivered at no cost to the Service.

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 related to the Service's prevention function covered within the Prevention Improvement Plan is detailed in the Prevention Fire Standard.

There are no direct legal implications associated with the Prevention Improvement Plan or the associated highlight report.

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 through both the statutory Community Safety Partnerships and other boards as appropriate.

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 progression 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:

Overview & Audit Committee, 8 November 2023 | Item 17 – Prevention Improvement Plan – July/August 2023

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 \(bucksfire.gov.uk\)](https://bucksfire.gov.uk/documents/2022/10/oa-item-17-17-10-21.pdf/)

15 March 2023 – Overview and Audit Committee – Prevention Improvement Plan Update 2

<https://bucksfire.gov.uk/authority/overview-and-audit-committee-15-march-2023/>

Appendix	Title	Protective Marking
1	Prevention Improvement Plan highlight report July / August 2023	Not protectively marked

Appendix 1: Prevention Improvement Plan

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

Summary – Period dated: July – August 2023

Key Activities

- The work on referral processing reported in the highlight report for March – April 2023 continues to draw time and resource to address. The recruitment of a substantive Administrative Support Manager commencing September 2023 will assist in driving the conversion of referrals to Home Fire Safety Visits offered in a timely manner.
- Following the redesign of the referrals form in PRMS in March, the draft form has been reviewed, with the next step being sandbox testing of it. This has removed questions which are no longer relevant from the data set which will ultimately increase administrative efficiency in processing referrals.
- The visit form in PRMS has been redesigned, aligning it with the national person-centred approach and the risk stratification scoring previously tested and agreed.
- The mid-term review of the Prevention Improvement Plan concluded ensuring the priorities and timescales of remaining recommendations continue to be appropriate.

Priorities for Next Period: Sept – Oct 2023

Progress

- 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 (this was delayed from last period)
- Onboarding of OHFSC timed for when the referrals in processes has been agreed
- Update of the Fire Sense program to ensure it is consistent to national messaging and aligns to service marketing formats.
- Update on Firewise in the context of the national picture needs to be prioritised and the procedure amended to reflect as the recommendation relating to this is significantly past its identified delivery date.

Complete

- Bandings added to local Prevention KPMs in liaison with DIT to ensure consistency in approach. Including the inclusion of an additional data line for the Service KPMs to ensure there is Service oversight of all data eligible for external (Home Office) reporting, specifically virtual or non-cross threshold visits
- Mapping of referrals by quarter to identify who/where they are received from and where Fire Sense delivery should be targeted to address gaps in referral sources where incidents in domestic dwellings is higher

Project: Prevention Improvement Plan



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Summary – Period dated: July – August 2023				Key Milestones		Forecast/ Actual	RAG
Key Activities (continued)				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		May 2023	
Change Request Log:							
NA		NA		NA		NA	

Risk/ Issue	RAG	Description	Mitigating Action	Next Action
Enter top three highest risks to the plan				
Staff capacity		Capacity of administration team is causing a significant impact on the capability to process Prevention referrals in a timely manner	Whilst 3 temps have been in place within the Admin team, and a recruitment process has begun for permanent staff, two temp roles end in September.	Recruitment commenced for Admin team vacancies
Prioritisation of visits by risk level (risk stratification)		Capacity and ability to make development changes to the Prevention side of the Premises Risk Management System due to work on the SSRI element impacted on the progression of several recommend actions. Staff capacity from risk 1 also impacted this.	Work on recording all visits in PRMS was completed whilst awaiting completion of the SSRI element	Draft visit form and sandbox testing of referral form to be scheduled for checking.
External workstreams		Areas of work related to the Firesetter Intervention Scheme (FIS) have a different delivery schedule to that of the Prevention Improvement Plan,	Updates sought and awaited from FIS lead on the recommendations linked to this.	Review Firewise procedure to ensure areas raised in the recommendation have been considered & are reflected within

Prevention Improvement Plan dashboard update – August 2023



Prevention Improvement Plan - Progress Dashboard

	Total recommendations	Complete	On track	On hold/delayed	Not started
Strategy, vision & leadership	7	5	0	2	0
Intelligence	15	12	0	3	0
Management of processes, systems and planning, including audit	15	5	2	8	0
Coordination and communication of operations	13	6	3	4	0
Delivery of operations	10	5	2	3	0
Grand totals	60	33	7	20	0