# West Sussex Fire & Rescue Service Improvement Plan

Year 2 Improvement Plan

# Contents

# PREVENTION | PROTECTION | RESPONSE | PEOPLE

# Foreword

We are committed to ensuring the safety of residents and visitors to West Sussex by delivering a response, prevention and protection service operating to the highest performance standards.

We acknowledge the professionalism and dedication of our staff. Their individual efforts and achievements are valued and central to making our communities safer and stronger.

Continuous improvement is at the heart of everything we do and this plan sets out clearly the areas where we need to focus. We have a clear set of actions to improve how effectively and efficiently we prevent and protect the public against fires and other emergencies, how we respond to fires and other emergencies, and how we look after the people who work for our service.

To help achieve our aims, we have established an Improvement Board to assess our progress and drive improvement required as outlined in the recent HMICFRS inspection report. We welcome this challenge and scrutiny and we are confident we can move our service forward at pace.

*Duncan Crow*
*Cabinet Member for Fire & Rescue and Communities*
*West Sussex County Council*

*Sabrina Cohen-Hatton*
*Chief Fire Officer*
*West Sussex Fire & Rescue Service*

**PREVENTION | PROTECTION | RESPONSE | PEOPLE**

# HMICFRS Summary Report & Latest Findings

*"We have concerns about the performance of West Sussex Fire and Rescue Service (FRS) in keeping people safe and secure. In particular, we have serious concerns about how it looks after its people. In view of these findings, we have been in regular contact with the chief fire officer, as we do not underestimate how much improvement is needed.*

*The service requires improvement in the way it keeps people safe and secure. It requires improvement in how it:*
> *Understands the risk of fire and other emergencies;*
> *Prevents fires and other risks;*
> *Responds to fires and other emergencies; and*
> *Responds to national risks.*
> *And it is inadequate in the way it protects the public through fire regulation.*

*We judged the service to require improvement in its efficiency. It requires improvement in the way it uses resources and in the affordability of its service.*

*It is inadequate in the way it looks after its people. It requires improvement in the way it:*
> *Promotes the right values and culture;*
> *Gets the right people with the right skills; and*
> *Manages performance and develops leaders.*
> *It is inadequate in the way it ensures fairness and promotes diversity.*
*Overall, there are improvements we expect the service to make. We will be monitoring progress."*

During the revisit in January 2020 HMICFRS found a clear commitment from the service and WSCC to make the improvements the service needs. It was recognised that more action is necessary, but we have seen tangible improvements, especially within the four months prior to the inspection, in mitigating the risks to public safety initially identified.

## PREVENTION | PROTECTION | RESPONSE | PEOPLE

# Summary of Improvement Pillars

HMICFRS inspected West Sussex Fire and Rescue Service through the autumn of 2018. They fed back concerns they had identified , which were confirmed during a formal debrief on 12 December 2018, and later confirmed in writing on 10 January 2019. This is the first time that HMICFRS has inspected fire and rescue services across England. Their focus is on the service we provide to the public, and the way we use resources available. The inspection assessed how effectively and efficiently West Sussex Fire and Rescue Service prevents, protects the public against, and responds to fires and other emergencies. They also assessed how well we look after the people who work for the service.

*The actions and recommendations contained within this improvement plan are aligned to and should be read in conjunction with the HMICFRS report. The completion & delivery will be monitored via the approved WSFRS project and programme governance process and assured through the HMICFRS Improvement Board*

In carrying out the inspections, three main questions are answered:

1. How **effective** is the fire and rescue service at keeping people safe and secure from fire and other risks?

2. How **efficient** is the fire and rescue service at keeping people safe and secure from fire and other risks?

3. How well does the fire and rescue service look after its **people**?

INSPECTION FINDINGS

| EFFECTIVENESS | REQUIRES IMPROVEMENT |
|---|---|
| Understanding the risk of fire and other emergencies | Requires improvement |
| Preventing fires and other risks | Requires improvement |
| Protecting the public through fire regulation | Inadequate |
| Responding to fires and other emergencies | Requires improvement |
| Responding to national risks | Requires improvement |
| **EFFICIENCY** | **REQUIRES IMPROVEMENT** |
| Making best use of resources | Requires improvement |
| Making the fire and rescue service affordable now and in the future | Requires improvement |
| **PEOPLE** | **INADEQUATE** |
| Promoting the right values and culture | Requires improvement |
| Getting the right people with the right skills | Requires improvement |
| Ensuring fairness and promoting diversity | Inadequate |
| Managing performance and developing leaders | Requires improvement |

# PREVENTION | PROTECTION | RESPONSE | PEOPLE

# Effectiveness - Cause for Concern 1
## *Preventing Fire and Other Risks*

*Prevention activity does not always align with a risk identified in the Integrated Risk Management Plan (IRMP). Home fire safety checks are not being carried out in a timely manner and there is a backlog of 552 high risk cases*

| Activity | Owner | By |
|---|---|---|
| COVID-19 Safe & Well Visits Pent up Demand | Head of Prevention | Complete Q2 20/21 |
| Safe and Well Visit Quality Assurance Process to be developed | Head of Prevention | Complete Q2 20/21 |
| Safe & Well Visit Standard Operating Procedure reviewed against the IRMP and new electronic risk matrix implemented to align the risk | Head of Prevention | Complete Q3 20/21 |
| Review existing volunteer programme and further develop their roles | Head of Prevention | Complete Q2 20/21 |
| Safe & Well Visit Quality Assurance Process Review | Head of Prevention | Q2 21/22 |
| Recruitment of additional Volunteers | Head of Prevention | Q1 21/22 |

# Effectiveness - Cause for Concern 2
## *Protecting the Public Through Fire Regulation*

*The service does not have a robust methodology for the risk-based inspection programme that identifies its highest risk premises. The database used to manage premises information is unreliable affecting the accuracy of the information. The service is unable to carry out the number of audits of high risk premises that it commits to as part of its programme.*

| Activity | Owner | By |
|---|---|---|
| COVID-19 Fire Safety Audits Outstanding Pent up Demand | AM Protection | Complete Q2 20/21 |
| Quality Assurance Process to be developed | AM Protection | Complete Q2 20/21 |
| Review and implement a new IT system for Prevention and Protection | AM Protection and Head of Prevention | Complete Q3 20/21 |
| Protection Quality Assurance Process review | AM Protection | Q2 21/22 |

# PREVENTION | PROTECTION | RESPONSE | PEOPLE

# Effectiveness - Area for Improvement 1
## *Understanding the risk of fire and other emergencies*

| Activity | Owner | By |
|---|---|---|
| Local Risk Management Plan - Risk Analysis, Incident Data and Dashboard Development | Area Manager Strategic Risk & Improvements | Completed Q1 20/21 |
| Local Risk Management Plan – Business and action plans per station developed that responds directly to local risk. | Area Manager Response | Completed Q3 20/21 |
| Local Risk Management Plan – Performance & Dashboard Information | Area Manager Response | Q4 20/21 |
| Local Risk Management Plan – 3 month review of 21/22 and further development to improve data, the risk analysis and action planning to respond. | Area Manager Response | Q2 21/22 |
| Fire Survival Guidance Reviewed | Area Manager Strategic Risk & Improvements | Q4 21/22 |
| Performance Assurance Framework Reporting Commences | Deputy Chief Fire Officer | Completed Q1 20/21 |

**PREVENTION | PROTECTION | RESPONSE | PEOPLE**

# Effectiveness- Area for Improvement 2
## *Preventing fire and other risks*

| Activity | Owner | By |
|---|---|---|
| All staff completed Mandatory e-learning Safeguarding Training | Head of Prevention | Completed Q1 20/21 |
| Risk based inspections aligned to new Fire Safety Enforcement Strategy | Area Manager Protection | Completed Q1 20/21 |

# Effectiveness - Area for Improvement 3
## *Responding to fires and other emergencies*

| Activity | Owner | By |
|---|---|---|
| Technical Rescue Unit function Options appraisal and decision taken | Area Manager Response | Complete Q3 20/21 |
| New Technical Rescue Unit operating model commences | Area Manager Response | Q4 20/21 |
| Incident Debrief Process Improved | Area Manager Strategic Risk & Improvements | Q1 21/22 |
| National Operational Guidance adoption commences | Area Manager Strategic Risk & Improvements | Q3 20/21 |
| National Operational Guidance wider rollout | Area Manager Strategic Risk & Improvements | Q4 21/22 |
| Service Delivery Centre Trial begins | Area Manager Response | Complete Q4 19/20 |
|  |  |  |
| Marginal Gains – County Crewing Commences | Area Manager Response | Complete Q4 19/20 |
| Marginal Gains to improve Retained Availability – Band G Contract; Increased Turn in times | Area Manager Response | Q3 21/22 |
| Operational Assurance SOP in place and staff trained | Area Manager Strategic Risk & Improvements | Q4 20/21 |
| LRF exercises to include operational staff | Area Manager Strategic Risk & Improvements | Q4 20/21 |
| False Alarm Reduction Strategy Implemented | Area Manager Protection | Q3 21/22 |

# Effectiveness - Area for Improvement 4
## *Responding to National and Local Risk*

| Activity | Owner | By |
|---|---|---|
| Robust system in place to review and update its risk assessments | Area Manager Strategic Risk and Improvements | Q4 20/21 |
| Operational staff have good access to Cross Border Risk Information | Area Manager Strategic Risk and Improvements | Q4 20/21 |

**PREVENTION | PROTECTION | RESPONSE | PEOPLE**

# Efficiency - Area for Improvement 5
## *Making the best use of resources*

| Activity | Owner | By |
|---|---|---|
| Effective monitoring review and evaluation of the benefits and outcomes of any collaboration | Area Manager Strategic Risk and Improvement | Q4 20/21 |
| Effective measure to ensure that staff are productive in delivering the priorities in the IRMP | Area Manager Strategic Risk and Improvement | Complete Q1 20/21 |
| Resources allocated appropriately and prioritises activities | Area Manager Strategic Risk and Improvement | Q4 21/22 |
| FC20 Implementation Plan | Assistant Chief Fire Officer | Complete Q4 19/20 |
| Adequate resilience arrangements in place for mobilised fire engines at all times | Area Manager Response | Complete Q3 19/20 |
| A resource management plan implemented to prioritise local risk delivery work | Area Manager Strategic Risk and Improvement | Q4 20/21 |
| Local Risk Management Plan - Group and station plans Objectives set | Area Manager Response | Complete Q3 20/21 |

**PREVENTION | PROTECTION | RESPONSE | PEOPLE**

# Efficiency - Area for Improvement 6
## *Making the best use of resources*

| Activity | Owner | By |
|---|---|---|
| Introduction of the Design Authority Group to ensure alignment to corporate Centre functions | Head of Organisational Assurance & Governance | Complete Q3 20/21 |
| Alignment to Reset and Reboot plans within wider County Council | Heads of Service | Q4 20/21 |

# People – Values, Ways of Working & Wellbeing
# Cause for Concern 3 & Area for Improvement 7
## *Promoting the Right Values and Culture*

*West Sussex FRS staff sometimes act in ways that go against its core values. This is leading to bullying in the workplace.*

| Activity | Owner | By |
|---|---|---|
| Develop and or source Mental Health Awareness training for managers, and arrange a Wellbeing seminar for all staff to highlight the importance of discussing and managing mental and physical health | Health & Wellbeing Manager | Q4 20/21 |
| Develop and launch a range of health and wellbeing events and activities | Health & Wellbeing Manager and Diversity & Inclusion Advisor | Q3 20/21 |
| Arrange and undertake bi-monthly People Surgeries for operational and support staff | Health & Wellbeing Manager | Complete Q3 20/21 |
| Develop a range of Health & Wellbeing Guidance | Health & Wellbeing Manager | Q4 20/21 |
| Review, Revise & Update the current provision for Stress Awareness training | Health & Wellbeing Manager | Q4 20/21 |
| Review the feedback of the latest staff pulse survey | Head of People & Organisational Development | Q4 20/21 |
| Undertake a full review of all WSFRS Health & Wellbeing Policies and Procedures | Health & Wellbeing Manager | Q1 21/22 |
| In conjunction with the Health & Safety Manager undertake a review of the provisions for managing stress | Health & Wellbeing Manager | Q4 20/21 |

# People – Values, Ways of Working & Wellbeing
# Cause for Concern 4 & Area for Improvement 9
## *Ensuring fairness and promoting diversity*

*West Sussex FRS does not engage with or and seek feedback from staff to understand their needs. We found this to especially be the case with some under-represented groups. When staff raise issues and concerns the service does not respond quickly enough.*

| Activity | Owner | By |
|---|---|---|
| Develop a dignity and respect framework that is aimed at outlining the expectations of staff, managers and senior leaders | Diversity & Inclusion Advisor | Q4 20/21 |
| Design, develop and deliver half day dignity and respect workshops for managers | Diversity & Inclusion Advisor | Q4 20/21 |
| Establish a forum of volunteer Diversity Champions | Diversity & Inclusion Advisor | Completed Q3 20/21 |
| New equipment and workwear to be fit for purpose | County Fleet Manager and Head of People and Organisational Development | Q4 20/21 |
| Implementation of a Shadow Board | Head of People and Organisational Development and Head of Organisational Assurance and Governance | Q4 20/21 |

## PREVENTION | PROTECTION | RESPONSE | PEOPLE

# People - Area for Improvement 8
## *Getting the right People, with the right skills*

| Activity | Owner | By |
|---|---|---|
| Develop and implement a range of engagement initiatives and strategies in conjunction with the FRS Communications & Engagement Lead | Head of People & Organisational Development | Completed Q2 20/21 |
| Develop and implement a process to effectively monitor the number of hours that are worked by staff and in particular retained staff | Health & Wellbeing Manager & People Support Office | Q4 20/21 |
| Develop a process to ensure that Risk Assessments are systematically undertaken by managers | Group Manager Training  and Health & Safety Manager | Q4 20/21 |
| Undertake a full review and modernise the processes around moving and transfer staff and management including the Staff Control Group | Head of People & Organisational Development | Completed Q3 20/21 |
| Develop a WSFRS Workforce Development Plan aligned to WSCC People Strategy setting | Head of People & Organisational Development | Q4 20/21 |
| Develop a Resourcing and Talent Development Plan for WSFRS aligned to the WSCC People Strategy | Head of People & Organisational Development | Q4 20/21 |
| Undertake annual organisational skills and knowledge assessment | Head of People & Organisational Development | Q4 20/21 |
| Develop a range of rolling personal development programmes | Workforce Development Consultant | Q4 20/21 |
| Undertake a review of the WSFRS Learning & Development Prospectus and update | Workforce Development Consultant and Group Manager Training | Q4 20/21 |
| Review the current recruitment attraction methods used for WSFRS new recruits and revise to increase the diversity of applicants | Head of People & Organisational Development | Q4 20/21 |

# People - Area for Improvement 10
## *Managing performance and developing leaders*

| Activity | Owner | By |
|---|---|---|
| A full review and redesign of the FRS Induction process for both operational and support staff | Workforce Development Consultant | Q4 20/21 |
| Review the Appraisal process | Head of People & Organisational Development | Q4 20/21 |
| Develop mechanisms for monitoring completion of appraisals | Workforce Development Consultant & People Support Officer | Completed Q3 20/21 |
| Develop a My Appraisal flowchart quick guide for appraisee's | Workforce Development Consultant | Completed Q3 20/21 |
| Development of a talent management programme in conjunction with WSCC aimed at identifying potential leaders | Head of People & Organisational Development | Q4 20/21 |
| Undertake a full review of the recruitment and selection policy and procedure (SOP), as well as practice, for operational and support staff | Head of People & Organisational Development | Q4 20/21 |
| Undertake a full review of the Promotions Board Process and revise | Head of People & Organisational Development | Q4 20/21 |
| Develop an internal interviewee skills workshops | Head of People & Organisational Development | Completed Q3 20/21 |

# Summary of Key Activity Completed Year 1

# Summary of Key Activity Completed (Year 1, Page 1)

| Activity | Owner |
|---|---|
| Safe and Well Visits Backlog cleared | Head of Prevention |
| Prevention Strategy Published | Head of Prevention |
| SAWV Standard Operating Procedure reviewed and published with revised risk matrix | Head of Prevention |
| Safe and Well Visits completed within target (in line with the revised SAWV SOP) | Head of Prevention |
| Necessary changes from SAWV monitoring mechanism review implemented | Head of Prevention |
| New Performance measure for outstanding SAWV created for inclusion in monthly reporting | Head of Prevention |
| Prevention team structure reviewed and changes implemented | Head of Prevention |
| New Performance measure for outstanding SAWV created for inclusion in monthly reporting via dashboard on PowerBi | Head of Prevention |
| Safe and Well Visit and supplementary safeguarding training delivered to operational crews face to face via Skype | Head of Prevention |
| Prevention team structure reviewed, and changes implemented with additional capacity created to deal with increased demand for complex high risk Safe and Well Visits | Head of Prevention |
| Undertaken consultation with volunteers to establish and implement the volunteer development plan | Head of Prevention |
| Safeguarding process linked to FC20 and immediate process for implementing referrals established | Head of Prevention |
| Amended Safeguarding Policy and procedure published | Head of Prevention |
| New IT System for Prevention implemented to meet business requirements for Prevention and Protection | Area Manager Protection and Head of Prevention |
| Fire Safety Audits Backlog Cleared | Area Manager Protection |
| New Management Structure for Protection Team | Area Manager Protection |
| New Risk Based Inspection Programme (RBIP) Implemented | Area Manager Protection |
| Fire Safety Enforcement (Protection) strategy Reviewed and Updated | Area Manager Protection |

# Summary of Key Activity Completed (Year 1, Page 2)

| Activity | Owner |
|---|---|
| New monthly Performance and Assurance Framework Developed | Area Manager Strategic Risk & Improvements |
| National Operational Guidance Options Paper developed and considered. | Area Manager Strategic Risk & Improvements |
| An integrated exercise plan in partnership with Response and Resilience and Emergencies team to test operational capabilities across all levels 1-4 and ensure exercising with partners developed | Area Manager Strategic Risk & Improvements |
| Conduct staff training to support new Operational Assurance SOP | Area Manager Strategic Risk & Improvements |
| Introduce a robust mechanism for performance management of risk assessment data base to transparently report the organisational position. | Area Manager Strategic Risk & Improvements |
| Conduct a review of workplace accident investigations and subsequent management actions concluding in a report of findings in the form of an decision paper with implementation plans to support. | Area Manager Strategic Risk & Improvements |
| Go live FireWatch with a resilient IT infrastructure | Assistant Chief Fire Officer |
| Staff Conference – November 2019 | Service Executive Board |
| Listening Groups Held and Report created to feedback to staff | Head of People and Organisational Development |
| Equalities, Diversity & Inclusion Officer appointed | Head of People and Organisational Development |
| Values Overview Workshops/Seminars held across different staff groups. | Head of People and Organisational Development |
| AFSA Regional Development Day (Hosted in West Sussex) Planned but not held due to COVID | Equalities, Diversity & Inclusion Officer |
| AFSA Summer Conference - WSFRS Workshop Planned but not held due to COVID | Equalities, Diversity & Inclusion Officer |
| Pulse Survey tailored to Fire and Rescue Service | Head of People and Organisational Development |
| Action plan for the Time to Change Pledge through Mind's Blue Light Programme implemented | Head of People and Organisational Development |
| Wellbeing Advisor appointed | Head of People and Organisational Development |

# Appendices

# Appendix A – Summary of Effectiveness
## Areas for Improvement / Causes of Concern & Recommendations

**Cause for Concern & associated recommendations in effectiveness were highlighted by HMICFRS as the following:**

**1.** Prevention activity doesn't always align with risks identified in the IRMP. Home fire safety checks aren't being done in a timely manner and there is a large backlog of high-risk cases.

> *Recommendations*
>> 1. The service should ensure it targets its home fire safety check activity at people most at risk.
>> 2. The service should ensure it carries out home fire safety checks in a timely manner.

**2.** West Sussex FRS doesn't have a clear strategy for using its risk-based inspection programme to identify the highest risk premises. The database it uses to manage premises information is unreliable and not always accurate. The service can't carry out the number of audits of high-risk premises that it commits to as part of its programme.

> *Recommendations*
>> 1. The service should ensure that its risk-based inspection programme targets it highest risk premises.
>> 2. The service should ensure that effective and robust systems are in place to manage its protection activities.

**Areas for Improvement in effectiveness were highlighted by HMICFRS as the following:**

1. The service should ensure its firefighters have good access to relevant and up-to-date risk information.
2. The service should ensure staff understand how to identify vulnerability and safeguard vulnerable people.
3. The service should ensure it addresses effectively the burden of false alarms (termed 'unwanted fire signals').
4. The service should ensure it has an effective system to use learning from operational response to improve its command and control.
5. The service should ensure the availability of its on-call fire engines is aligned to the risks identified in its IRMP.
6. The service should ensure it has an effective system to maintain the competencies of all incident commanders.
7. The service should ensure that, where possible, LRF exercises include operational staff at all levels to improve interoperability and competence.
8. The service should ensure operational staff have good access to cross-border risk information.
9. The service should arrange a programme of over-the-border exercises, sharing the learning from these exercises.
10. The service needs to ensure it allocates its resources appropriately and prioritises activities that address the risks identified in its IRMP.
11. The service should have effective measures to ensure staff are productive and using their time efficiently to deliver the priorities in the IRMP.

**PREVENTION | PROTECTION | RESPONSE | PEOPLE**

# Appendix B – Summary of Efficiency
## Areas for Improvement / Causes of Concern & Recommendations

**Areas for Improvement in efficiency were highlighted by HMICFRS as the following:**

1. The service should ensure there is effective monitoring, review and evaluation of the benefits and outcomes of any collaboration.

2. The service should do more to identify areas where innovation, including the use of technology, can help it improve productivity and develop capacity.

# Appendix C – Summary of People
## Areas for Improvement / Causes of Concern & Recommendations

**Areas for Improvement in people were highlighted by HMICFRS as the following:**

1. The service should ensure it has a robust system in place to review and update its risk assessments, and that recommendations from workplace accidents are actioned in a timely manner.

2. The service should have appropriate means to monitor the working hours of its staff.

3. The service should ensure its workforce plan takes full account of the necessary skills and capabilities it needs to carry out its IRMP.

4. The service should ensure all staff are appropriately equipped for their role.

5. The service should put in place an open and fair process to identify, develop and support high-potential staff and aspiring leaders

**Cause for Concern & associated recommendations in People were highlighted by HMICFRS as the following:**

**3.** West Sussex FRS's staff sometimes act in ways that go against its core values. This is leading to bullying in the workplace.

 *Recommendations*

  1. The service should clearly and effectively communicate its core values to staff. This should include acceptable behaviour statements.

  2. The service should ensure that staff act in line with its values and are trained to identify and deal with non-compliance.

**4.** West Sussex FRS doesn't engage with or seek feedback from staff to understand their needs. We found this to especially be the case with some under-represented groups. When staff raise issues and concerns, the service doesn't respond quickly enough.

 *Recommendations*

  1. The service should ensure that it effectively engages with its staff, including minority groups.

  2. The service should improve communications between staff and senior managers, so concerns are responded to in a timely and appropriate way.

**PREVENTION | PROTECTION | RESPONSE | PEOPLE**