

West Sussex Fire and Rescue Service Performance Report Quarter 4 2025/26

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Contents

	Page
Report Overview	3
Chief Fire Officer Summary	4
Performance Summary	5
Performance Dashboard	6-7
Areas of Significant Improvement and Success	8-14
Selected Focus Measures – Red and Amber Status	15-20



Strategic Performance Board Quarterly Report

Quarter 4 2025-2026

The aim of the Quarterly Performance Report is to summarise how West Sussex Fire & Rescue Service/Directorate has performed over the previous three months and to capture how performance contributes cumulatively to the year-end performance outcomes.

The report retrospectively presents information from the Performance and Assurance Framework (PAF) including the core measures and targets for the year which are current at the time of publishing. The report contains performance across the four elements of the PAF, namely Service Provision, Corporate health and where appropriate, CRMP Priority Programmes and Risk.

The explanations, mitigations and actions contained within this report are those endorsed by the Service Executive Board (SEB).

This report covers data from the period of 1st January – 31st March 2026



Chief Fire Officer Summary

Our new Community Risk Management Plan 2026-2030 (CRMP) was launched on 23rd March 2026, setting the direction for the service over the next 4 years. The CRMP responds to the risks identified in the county, including accidental dwelling fires, road traffic collisions, wildfires, and flooding, as well as emerging risks the service could face in the future.

There are five key priorities for our service:

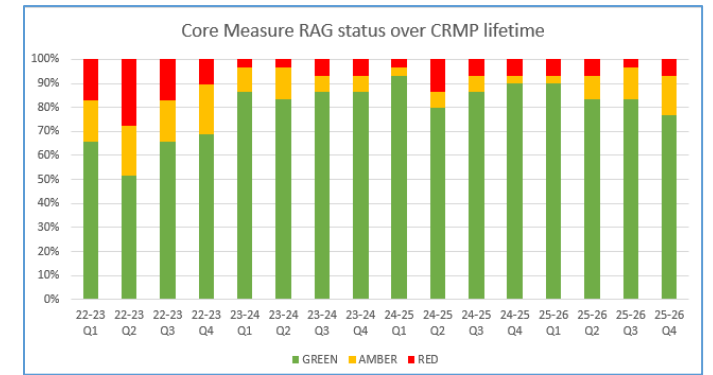
- Preventing fires and emergencies from happening
- Protecting people, firefighters and property by making buildings as safe as they can be
- Responding to fires and emergencies quickly and effectively
- Having an inclusive, safe and valued workforce
- Making best use of resources

These priorities were developed from a 2024 community survey and widely supported after public consultation last year. The final CRMP has been shaped by national guidance, local evidence, and valuable input from our communities, staff and partners.

Another key focus this quarter has been on putting the foundations in place for West Sussex Fire & Rescue programme to move into Sussex & Brighton Strategic Authority (SBSA) in April 2027, moving it from concept into an operational and accountable arrangement. Work has centred on ensuring the model is legally sound, strategically aligned and operationally workable in coordination with the SBSA.



Performance Summary



At the end of Quarter 4, 23 of the 30 core measures had a GREEN status, 5 were AMBER and 2 were RED.

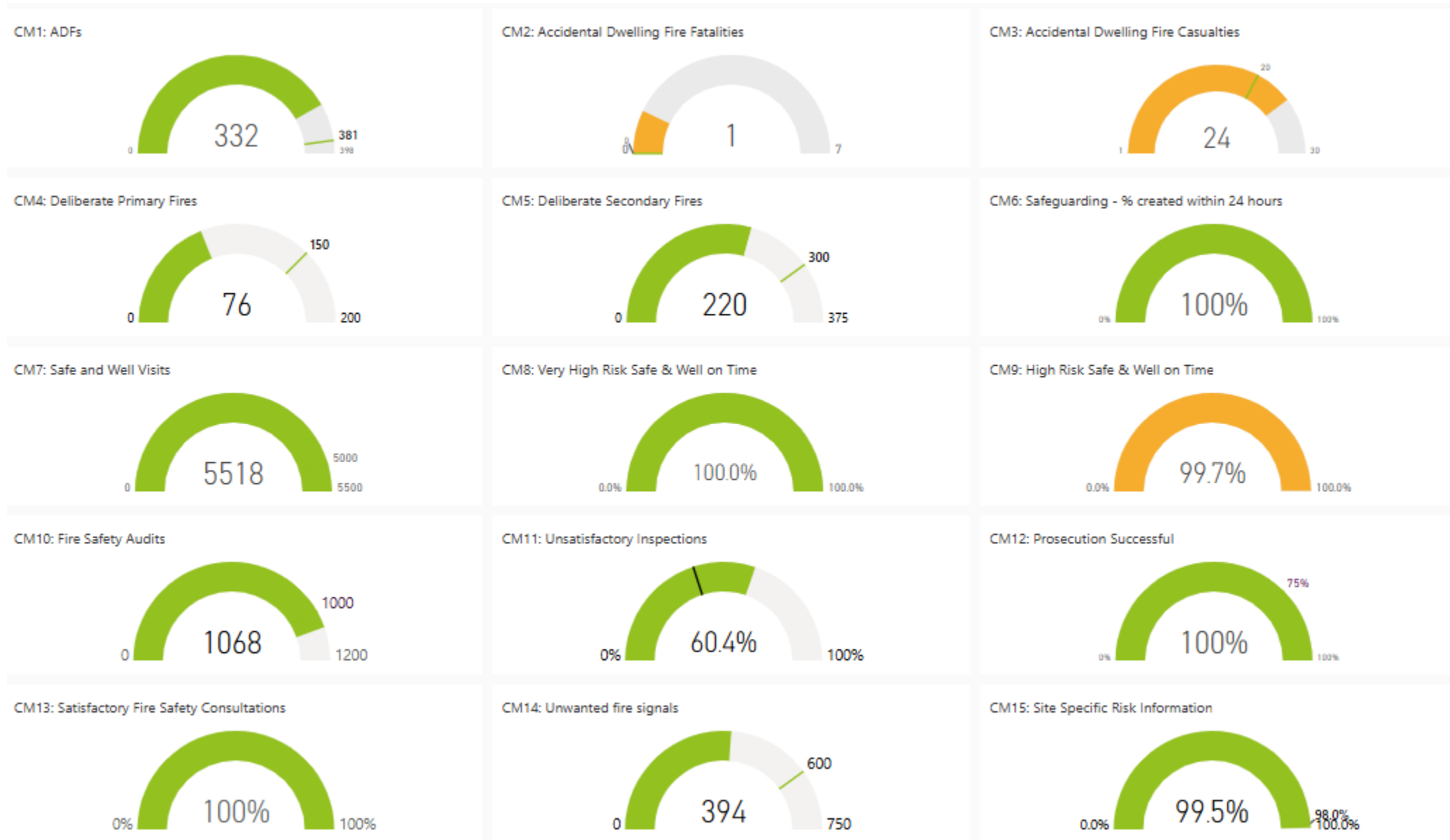
The one RED measure from the previous quarter (Adequate Crewing at all On-Call Stations) showed a notable improvement in performance to 46% this quarter.

Of the 4 measures that were AMBER in quarter 3:

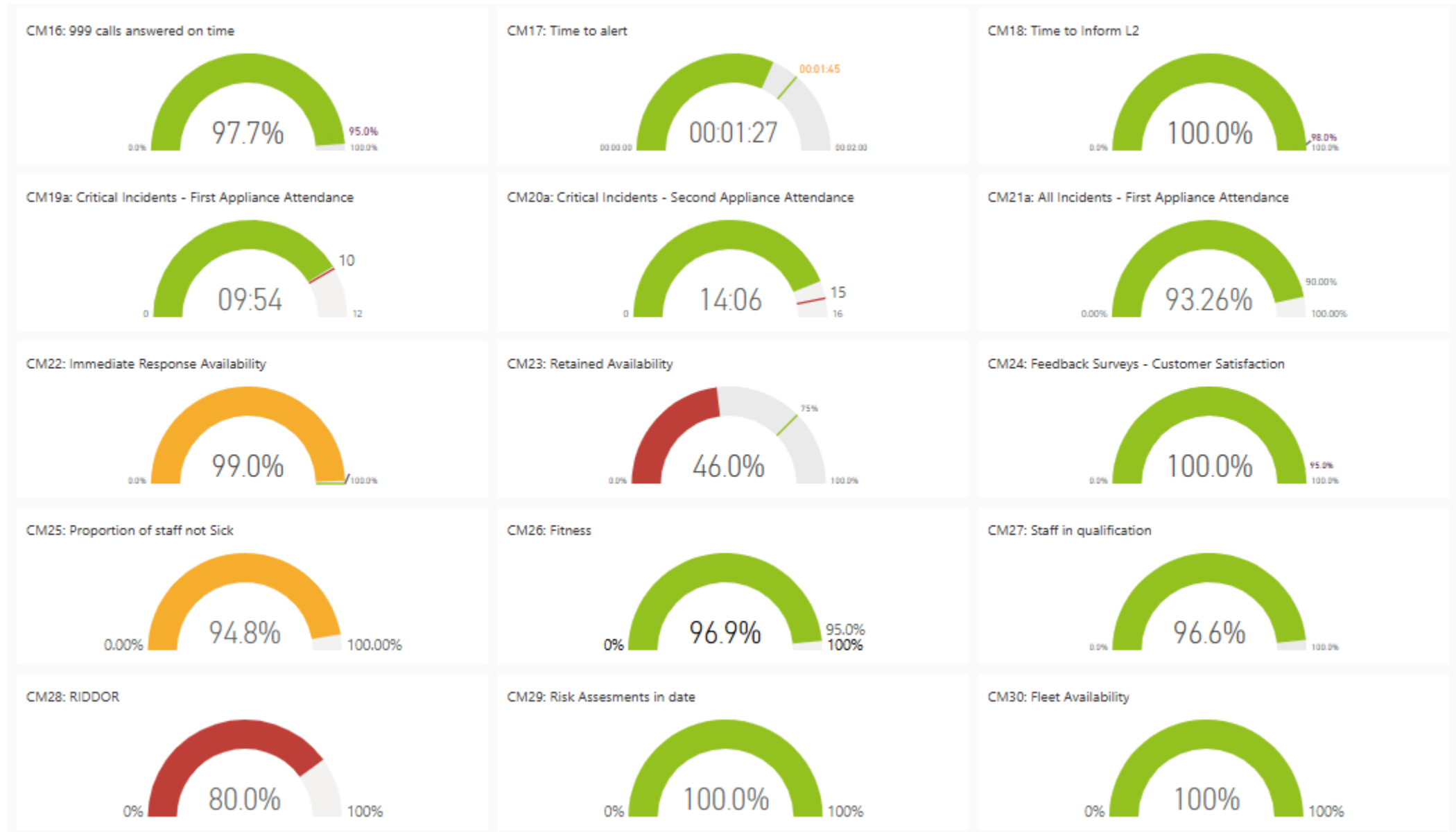
- The number of Accidental Dwelling Fire deaths remains AMBER since this is an annual cumulative measure. There have been no fatalities since Q2.
- The number of Accidental Dwelling Fire casualties remains AMBER. There were an additional 7 casualties this quarter.
- Whole Time Crewing Availability remains AMBER, with similar performance to the previous quarter.
- % of High Risk Safe and Well referrals contacted within 7 working days remains AMBER, with similar performance to the previous quarter.

Of the 18 comparable measures that were GREEN last quarter, 6 measures showed a decline in performance and 4 an improvement. % of staff who are not sick moved to AMBER status, and % of RIDDOR accidents investigated and reported on time moved to RED status.

Performance Summary for all core measures at the end of Quarter 4 (1 of 2):



Performance Summary for all core measures at the end of Quarter 4 (2 of 2):



Areas of Significant Improvement and Success

Quarter 4

(1st January – 31st March 2026)



Significant Improvement and Success

The Performance and Assurance Framework of which this report is a part of, has continued to demonstrate fire and rescue service performance and provide assurance to members and the public.

Quarter 4 saw sustained good performance in many areas, with the following measures showing particular success:

- CM1: Accidental Dwelling Fires in West Sussex in a financial year
- CM6: Safeguarding referrals made to Social Care colleagues in West Sussex County Council within 24 hours of discovery
- CM10: The number of FSO regulated buildings having received an audit in a financial year
- CM27: % Eligible operational staff in qualification
- CM29: % Health & Safety Risk Assessments in date

Core Measure 1: Accidental Dwelling Fires in West Sussex in a financial year

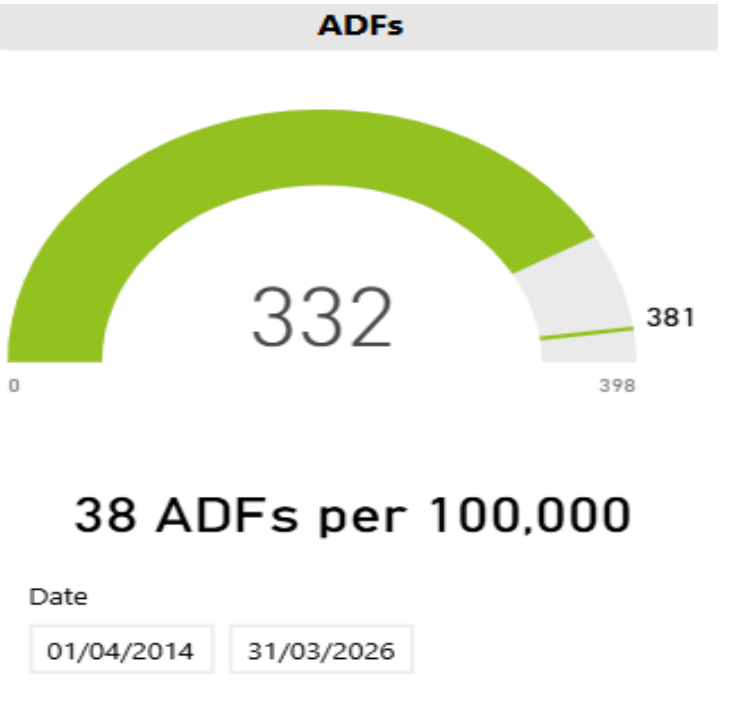
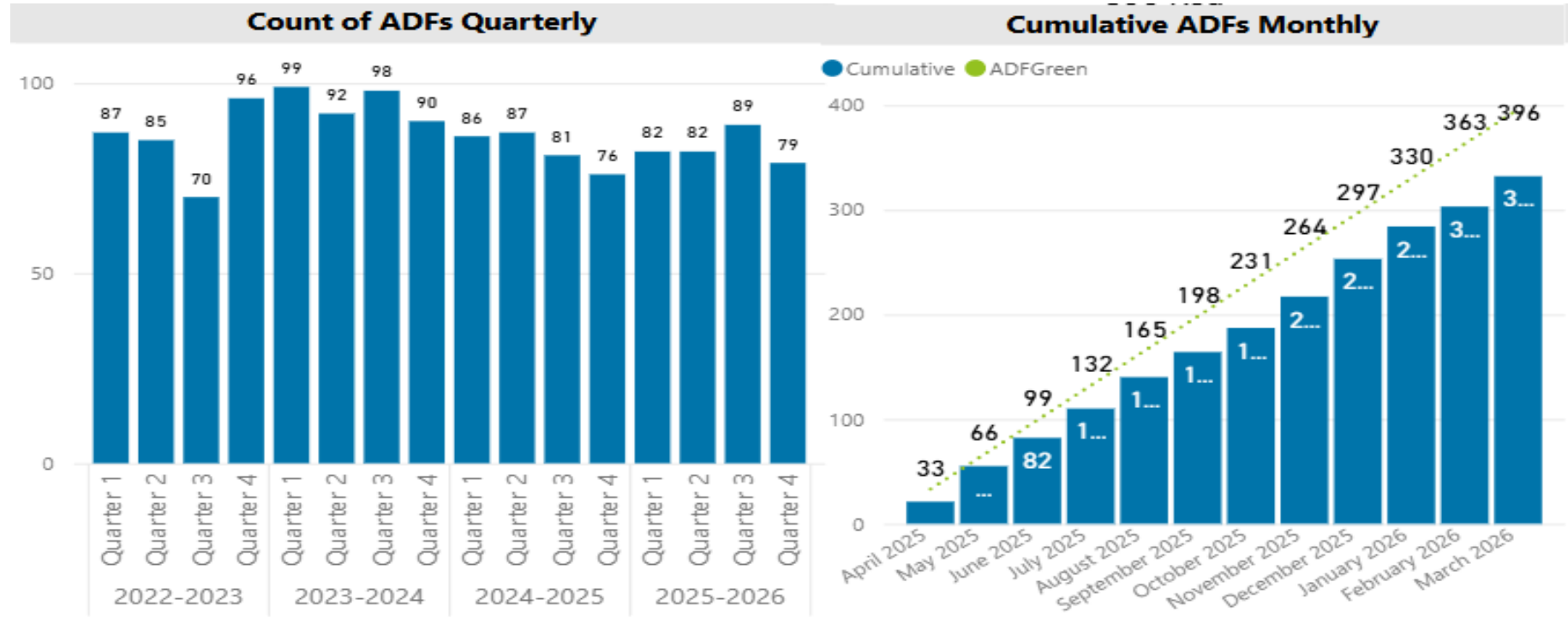
332 fires at the end of Q4 2025-26

Year End Forecast GREEN

Total number of accidental dwelling fires in West Sussex over a year period starting from April

Annual Target:
 <381 Green
 381-398 Amber
 >398 Red

Service Owner:
Nathan Cross
 Area:
Fires and Fatalities



Commentary
 The total number of Accidental Dwelling Fires (ADFs) in Quarter 4 is 79. The total for the year is 332, far below the threshold of 381. Cooking and faulty electrical equipment remain the most common causes of ADFs and are a central area of focus within our campaigns and Safe & Well Visits.

Actions
 Treat: We will continue to deliver Safe and Well Visits to those identified as being the most vulnerable. These visits will address the main causes of accidental fires in people's homes to raise awareness and provide preventative advice. A full review of SWVs to be undertaken as part of the new CRMP.

Core Measure 6: Safeguarding referrals made to Social Care colleagues in West Sussex County Council within 24 hours of discovery

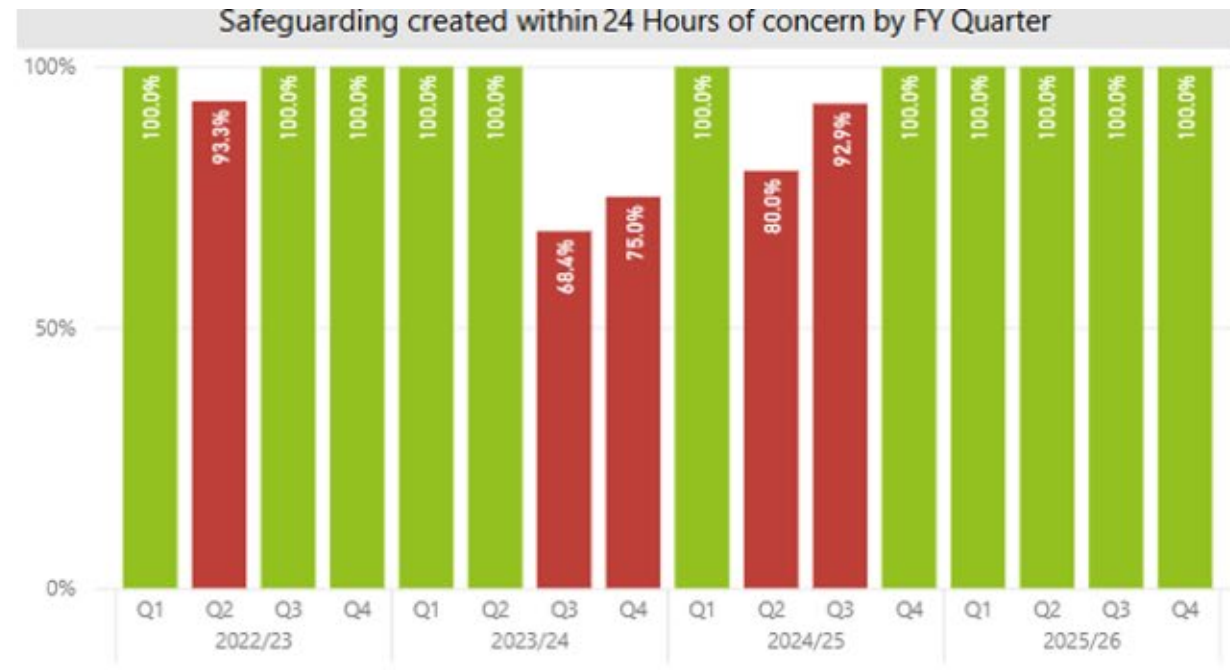
100% at the end of Q4 2025-26

Year End Forecast Green

Safeguarding referrals made to Social Care colleagues in West Sussex County Council within 24 hours of discovery over a year period starting from April.
 To ensure that safeguarding referrals are made in a timely manner for the protection of individuals considered at risk in West Sussex. This is the time taken from the Duty Officer or Safeguarding Coordinator being made aware of a safeguarding case, to the referral being made to the local authority.

Annual Target:
 100% Green
 98% - 99.9% Amber
 <98% Red

Service Owner:
Nathan Cross
 Area:
Prevention



Commentary
 A total of 5 safeguarding referrals have been made during Quarter 4. All were made within 24 hours of the incident. In total for the year, 22 safeguarding referrals were made and 100% were within 24 hours of the incident.

Actions
 Treat: We will continue to actively monitor our reporting processes to accommodate the new referral system implemented by Adult Social Care and to ensure all staff are confident to refer when required. Additional guidance has been provided to individuals who have not reported a safeguarding concern within 24 hours.

Core Measure 10: The number of FSO regulated buildings having received an audit

1068 completed at end of Q4 2025-26

Year End Forecast GREEN

This measure examines the total number of audits of these buildings undertaken in a year starting in April, under the Risk Based Inspection Programme (RBIP). The RBIP is a combination of the activities on specific risk premises, thematic risks and IRMP work and at the core of the RBIP is a regular inspection program for known sleeping risks. There are approximately 35,000 Fire Safety Order regulated buildings in West Sussex.

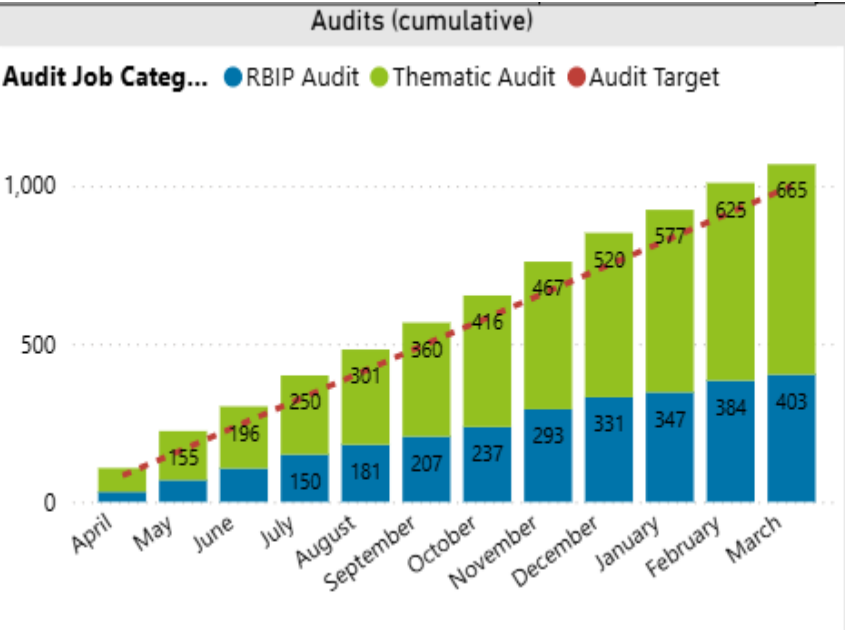
Annual Target:
1000 Green
850-999 Amber
>850 Red

Service Owner:
Dave Bray
Area:
Protection

Financial Year	Audits	Fire Safety Checks	Audits per 100 premises
2022/23	1009	524	2.9
2023/24	1041	769	2.9
2024/25	1235	533	3.5
2025/26			
Q1	302	31	0.0
Q2	265	16	0.0
Q3	284	43	0.0
Q4	217	130	0.0

National Average: 2.9 Audits per 100 premises in 23/24 Last Refresh Date 17/04/2026

[More Information](#)



Commentary
The number of Fire Safety Audits completed during 2025/26 has comfortably exceeded the target for the year.

Actions
Tolerate and monitor: Throughout 2025/26 the department have been focussed on the development journey of our fire safety regulators and have had a number of significant legal cases taken before the courts. Whilst this has reduced the time available to undertake audits, the service has exceeded the annual target

Core Measure 27: % Eligible operational staff in qualification

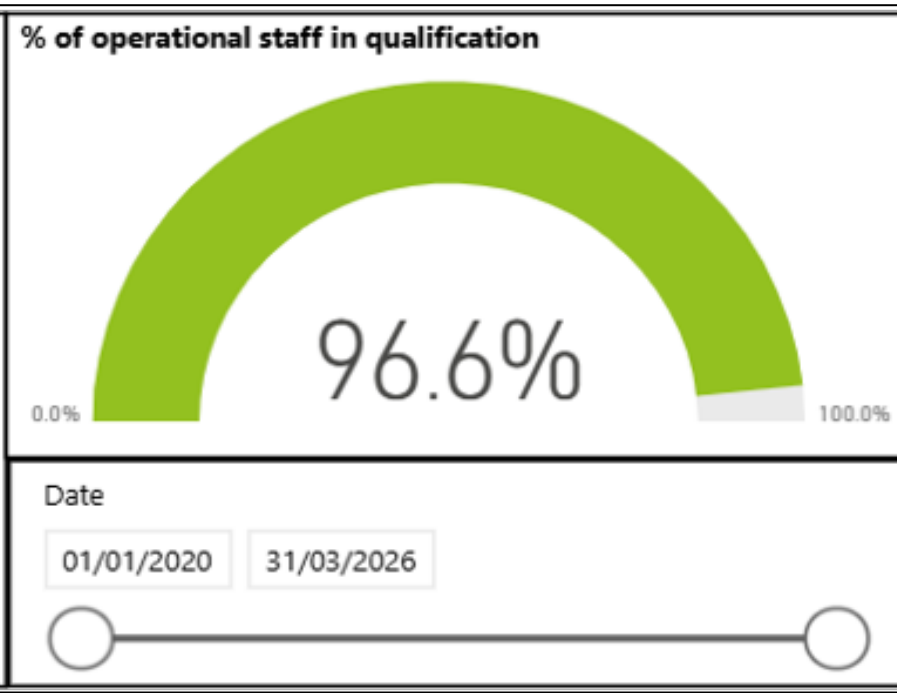
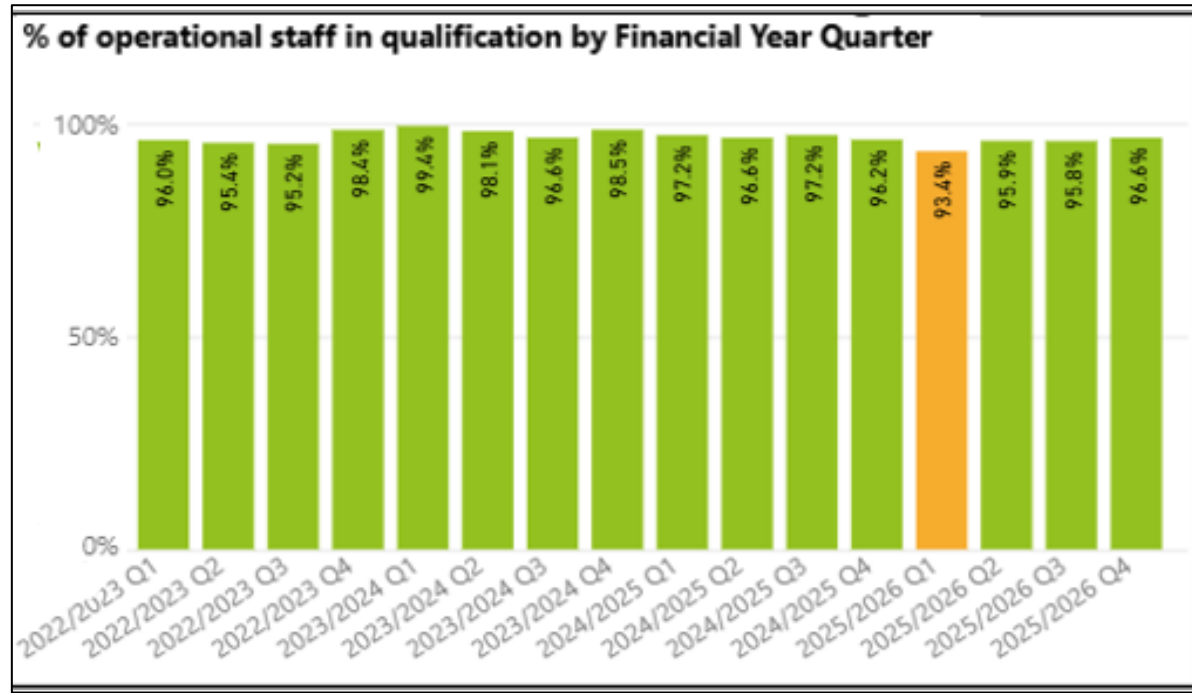
96.6% in Q4 2025-26

Year End Forecast Green

This measure examines the average percentage of operational staff (Station Managers, Watch Managers, Crew Managers and Firefighters) who have current qualifications in the use of breathing apparatus, emergency response driving and incident command (outlined in the 8 core areas of the Fire Professional Framework) as required by their role. This measure does not include Retained Firefighters who are in training, but who have not yet completed their Breathing Apparatus qualification. TRU staff and staff who are long term sick, on secondment, maternity leave, compassionate leave, unpaid leave or alternative duties are also excluded from this measure.

Annual Target:
 >95% Green
 85% - 95% Amber
 <85% Red

Service Owner:
Richard Abbot
 Area:
OTS&P



Commentary
 Operational Training, Safety and Preparedness has worked closely with the Data Analysis and Reporting Team and Service Delivery Station Managers throughout the last quarter to drive improvement against this measure. This collaborative approach has delivered a sustained uplift in performance, resulting in the measure achieving green status for the quarter. Continued joint working will ensure the Service maintains full oversight of staff competency requirements and that all personnel remain in qualification for their mandated skills.

Actions
 Treat: Service Delivery continue to embed the monthly training plan and continued communications with specific Station Managers whose stations are under-performing. Further improvements continue to be made to improve the data held on individuals' competency.

Core Measure 29: % Health and Safety Risk assessments within date

100% at the end of Q4 2025-26

Year End Forecast AMBER

WSFRS are required by law to complete risk assessments under the Health and Safety at Work Act 1974. The required period is either every 3 years for risk critical documents, 5 years for non-risk critical documents, or when there has been an update or change, for example in legislation. This measure examines the percentage of risk assessments currently in date.

Target:
100% Green
>95% Amber
<95% Red

Service Owner:
Richard Abbot
Area: **OTS&P**



Commentary
43 Health and Safety Risk Assessments were due for review in Q4. These have all been completed within the required timeframes.

Actions
Treat: Health and Safety will continue to manage the risk assessment database and ensure all risk assessments under review are completed within the given timeframes

Selected Measures (Red and Amber Status)

Quarter 4

(1st January – 31st March 2026)



Selected Measures (Red and Amber Status)

The following red and amber measures have been selected for examination by the Scrutiny Committee:

- CM3: Accidental Dwelling Fire casualties in West Sussex in a financial year
- CM9: % High Risk Safe and Well Visit referrals contacted within 7 working days
- CM23: Adequate Crewing at all On-Call stations
- CM25: % staff not sick across all staff groups

Core Measure 3: Accidental Dwelling Fire casualties in West Sussex in a financial year

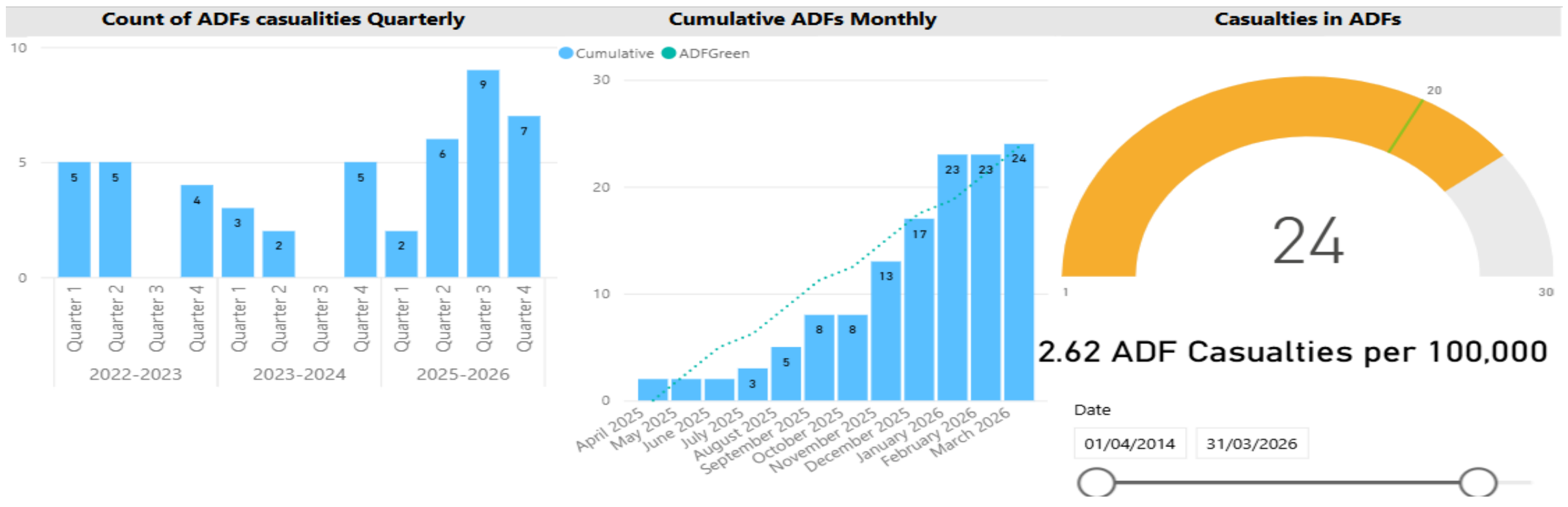
24 casualties at the end of Q4 2025-26

Year End Forecast Amber

The total number of casualties resulting from an accidental dwelling fire in West Sussex over a year period starting in April. This is limited to a person whose injury is fire related and was severe enough to require hospital attendance.

Annual Target:
 <20 Green
 20-30 Amber
 >30 Red

Service Owner:
Nathan Cross
 Area:
Fires and Fatalities



Commentary
 There have been 6 Accidental Dwelling Fire (ADFs) casualties reported Quarter 4, five of these casualties were recorded at one single incident. The total for the year is 24, which is above the threshold of 20, but far below the 32 casualties recorded in the previous year. In the past year there were 6 casualties recorded as having breathing difficulties, 5 casualties with severe burns, 4 with slight burns, 7 casualties reported as being overcome by smoke, gas or fumes and 2 other injuries.

Actions
 Treat: We will continue to investigate all serious fires to understand the cause and the opportunity to prevent future incidents. This learning will then be fed back into our preventative work and targeted campaigns. We will undertake a review of our Serious Fire Review process as part of the new CRMP, to develop our learning of these incidents and prevent similar from occurring.

Core Measure 9: High Risk safe and well visit referrals contacted within 7 working days

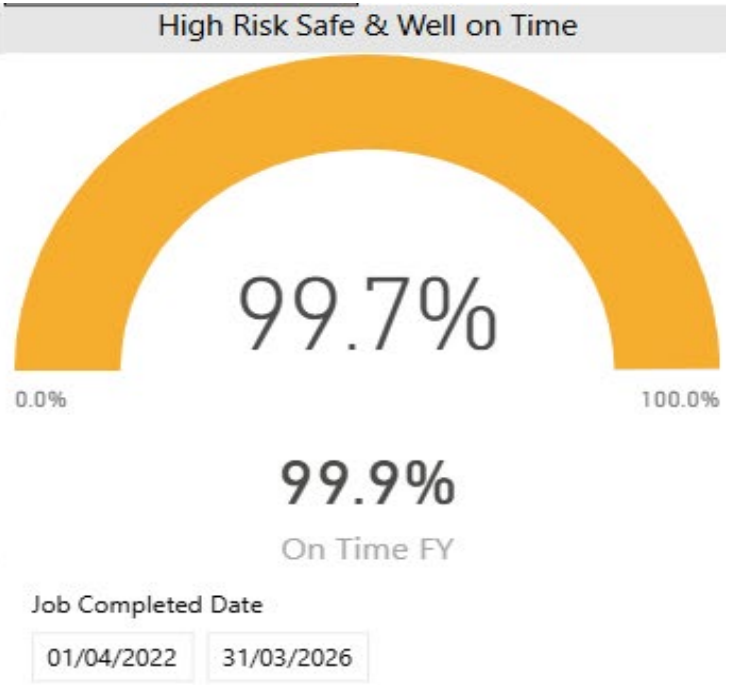
99.7% at Q4 2025-26

Year End Forecast Amber

The percentage of safe and well visit referrals for individuals assessed as high risk of dying or being injured in the event of a dwelling fire, contacted within 7 days. This measure excludes referrals for whom contact has been attempted but the individual is not living in their own home at the time of referral (e.g. hospital stay). Such individuals will be contacted after they return home.

Annual Target:
100% Green
98%-99.9% Amber
<98% Red

Service Owner:
Nathan Cross
Area:
Prevention



Commentary
A total of 592 customers were identified as having a high level of fire risk in Quarter 4. All, but 2 were contacted within 7 days and offered a visit. In the past year 2,808 high risk referrals were received. Of which 2804 (99.8%) were contacted within 7 days.

Actions
Tolerate and monitor: Customers with high levels of fire risk will continue to be a priority. Our processes for responding to those most in need are well established and we will continue to monitor performance through our quality assurance and evaluation frameworks. Where mistakes are identified we will engage with those staff members to help develop their understanding.

Core Measure 23: Adequate crewing at all On call stations

46.0% at the end of Q4 2025-26

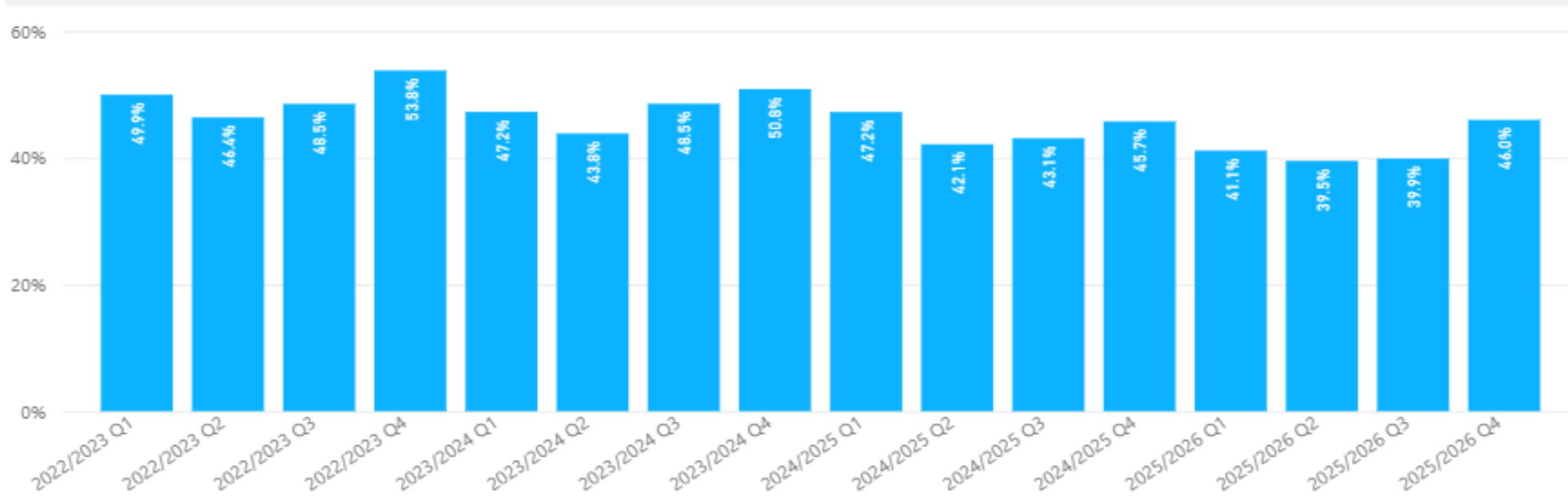
Year End Forecast RED

Retained frontline fire engines are crewed mainly by on-call fire fighters who are based at stations in more rural locations and, when they receive the call via their pagers, leave their place of work or home and attend emergencies from the local retained station. Four qualified people are required on a frontline fire engine to ensure safety. This measure examines the percentage of hours where there are sufficient minimum qualified fire fighters (4 personnel) on retained fire engines.

Target:
75% - 100% Green
65% - 74% Amber
<65% Red

Service Owner:
Adrian Carter
Area:
Service Delivery

Retained Fire Engines On The Run by Quarter (including current quarter to date)



Fire Engines On the Run

0.0% 46.0% 75% 100.0%

Financial Year to Date

41.6%

Date Range

01/04/2022 31/03/2026

Commentary
There has been another improvement in Q4 with a 6% increase in appliance availability. Staff continue to be revalidated in qualifications for Incident Command and with the continued push of 3.5 project which we are now starting to see real benefits.

Actions
Treat: Continue to monitor availability through IT platforms and address issues through Service Delivery governance in order to maximise our availability across the county. Taking forward actions from the strategic gap analysis of the National Research Project Report and implementation of our 3.5 project workstreams will remain a focus for Q4.

Core Measure 28: % RIDDOR (Reporting of injuries diseases and dangerous occurrences regulations) accidents that are investigated and reported on time

80% in Q4 2025-26

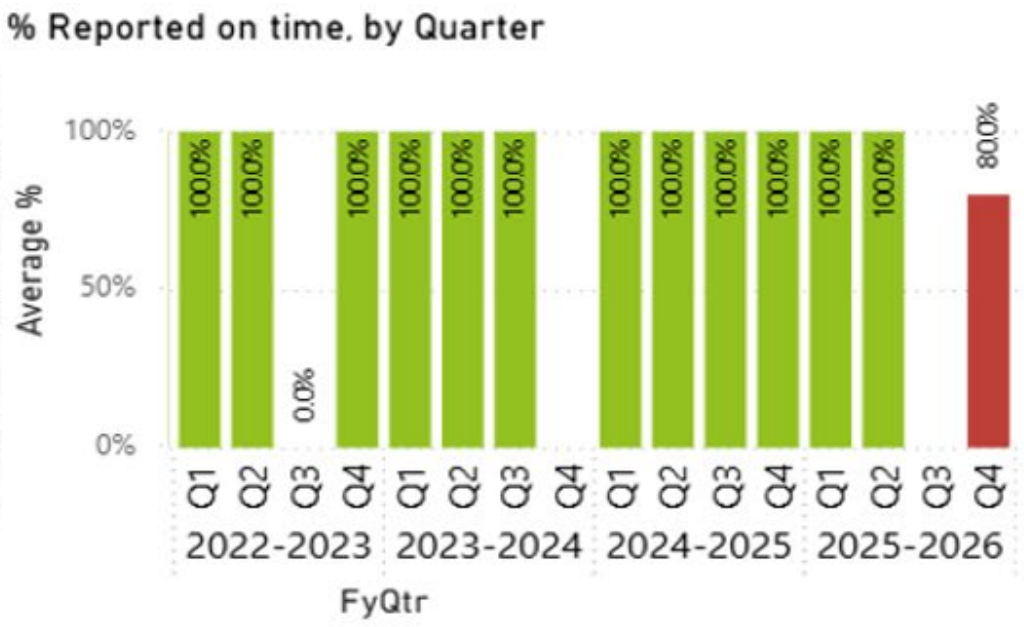
Year End Forecast
RED

All RIDDOR reportable Health and Safety Incidents must be reported within 10 days of the event occurring. Any contracted COVID-19 cases within the workplace are also reported under RIDDOR as per Health Safety Executives (HSE) requirements.

Target:
100% Green
>100% Red

Service Owner:
Richard Abbot
Area:
OTS&P

FY QTR	On Time	Out of Time	Total Incidents
2023-2024 Q2	2	0	2
2023-2024 Q3	3	0	3
2023-2024 Q4	0	0	0
2024-2025 Q1	2	0	2
2024-2025 Q2	2	0	2
2024-2025 Q3	2	0	2
2024-2025 Q4	5	0	5
2025-2026 Q1	1	0	1
2025-2026 Q2	4	0	4
2025-2026 Q3	0	0	0
2025-2026 Q4	4	1	5
Total	67	6	73



Commentary

In Q4, five RIDDOR reports were submitted to the HSE. Four were submitted within the required reporting timescales, while one was submitted late due to delayed internal notification of the incident and the staff member's absence from work.

Actions

Treat: Health and Safety maintain close monitoring of all incidents and will report a RIDDOR when necessary. The Station concerned with the late reported RIDDOR have been advised.