



HEREFORD & WORCESTER
HWFR
FIRE AND RESCUE SERVICE

Prevention Cause of Concern Action Plan

13 December 2021

How Hereford & Worcester Fire and Rescue Service
Keeps the Public Safe Through Prevention Activity

Strategic Lead: Anna Davidson – Assistant Director: Prevention

Cause of concern:

Prevention activity is not a sufficiently high priority for the service, and it is not adequately identifying those most at risk from fire.

Recommendations:

By 31 August 2021, the service should have plans in place for:

1. An effective system to define the levels of risk in the community.
2. The development and delivery of a prevention strategy that prioritises the people most at risk of fire and ensures that work to reduce risk is proportionate.
3. The review of systems and processes for dealing with referrals from partner agencies. This is to make sure they are managed effectively, and the backlog of safe and well visits is reduced and resourced in accordance with risk.

Detailed Findings:

We found that the service does not have a clear prevention strategy that identifies and prioritises those most at risk from fire. The service is making very limited use of risk modelling information to ensure prevention activity is targeted at the most vulnerable. We were concerned that prevention activity is not a sufficiently high priority for the service, and it has limited productivity when compared to other similar Fire & Rescue Services. There is limited capacity in the prevention team to deal with referrals, post fire prevention activity and campaigns. There is currently a backlog of referrals for the prevention team to complete and at the time of the inspection operational crews were doing very limited prevention activity. As was found in the round one inspection in 2018, there is also limited evaluation of prevention activity to assess its impact.

Source: HMICFRS letter to CFO Jon Pryce 29-06-21

What does good look like?

The FRS has developed and implemented an ambitious prevention strategy which is informed by local risk and complies with statutory requirements.

The FRS prevention plan is clear about where the greatest risks lie within its area and sets out a clear rationale for the level of activity to prevent fires and other risks.

The FRS uses the findings from prevention, protection and response activity to adapt its prevention plan. FRS prevention activity meets community expectations, and its core functions are sustained regardless of other discretionary priorities for the FRS.

The FRS targets its communications to provide information about fire prevention and to promote community safety. The FRS has a comprehensive understanding of the diverse needs of its communities and ensures that its engagement and communication is designed to be appropriate and accessible to meet those diverse needs.

FRS staff are able to recognise the opportunity to prevent fires and other risks, and are able to take appropriate action.

The FRS works with other FRSs, a wide range of partner organisations and diverse sections of the community to reduce the number of fires and other risks.

The FRS evaluates the impact of its prevention activity and uses this evaluation to improve its own and partners' approaches.

Extracts from HMICFRS Judgment Criteria

Aim:

Hereford & Worcester Fire and Rescue Service aims to discharge the action plan by July 2022.

Objectives:

A summary of key actions required including timescale for delivery.

All actions / evidence collated to meet our objectives will be signed off by a lead officer and the Prevention Improvement Panel.

Objective 1:

To have an effective system to define the levels of risk in the community.

Key:

AD	Assistant Director: Prevention
GC	Group Commander: Prevention
SCP	Station Commander: Prevention
SCH	Station Commander: HMICFRS
PM	Prevention Manager
SCM	Station Commander Malvern
GCN	Group Commander North District
DCFO	Deputy Chief Fire Officer
CFO	Chief Fire Officer

		Completion Date	Lead	Signed Off By/Date
1.1	Add the cause for concern onto the Prevention Risk Register and escalate onto the Strategic Risk Register	26.07.21	CGP PM	AD 27.07.21
1.2	Review of data sources / systems, seeking 3 quotes for replacement geographic information and modelling software, linked to joint system with Protection Directorate	30.09.21	SCH GCP	AD 18.10.21
1.3	Articulate our definition of the categories of people who are most at risk from fire, RTC and other risks what we mean by risk to underpin what we do, i.e. to understand who we target as those most vulnerable and at risk in our communities and be able to communicate that effectively. Collate into a position statement of risk groups and determine what constitutes high, medium and low risk for publication to compliment our Community Risk Management Plan. Using data to identify the risk groups determine from that those who fall into those categories	30.09.21	GCP PM SCP	AD 29.09.21
1.4	As recommended in the Prevention Fire Standard, attend regular regional FRS Prevention working group meetings to share best practice to drive innovation and continuous improvement	ongoing	PM	AD 13.12.21
1.5	Milestone. Review data sets and devise a clear procedure to establish where the greatest risks lie within the Service area, setting out a clear written rationale for the level of activity to prevent fires and other risks	30.12.21	GCP	
1.6	Review community data breakdown to establish which equality of access guidance documents would be most useful to prioritise and use as a Service, mapping recommendations into a paper for SMB	28.02.22	SCP	
1.7	In line with the new NFCC guidance on Home Fire Safety Visits (HFSV), review the classification of prevention checks we undertake and publish a summary document	31.12.21	PM	
1.8	Following the review of data sources - create a clear rationale being explicit about what data we use and how we use it – map into a flow chart / clarification document	31.03.22	GCP PM SCP	
1.9	Milestone. An effective system to define the level of risk in the community will be in place and reviewed annually.	31.03.22	GCP PM SCP	

Objective 2:

To develop and deliver a prevention strategy that prioritises the people most at risk of fire and ensures that work to reduce risk is proportionate.

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2.1	Communicate the Cause of Concern with Prevention Team	12.07.21	AD GCP	AD 12.07.21
2.2	Progress to date, following the cause of concern issued for prevention activity, reported to SMB	13.07.21	AD	DCFO 13.07.21
2.3	Prevention Improvement Panel established and Terms of Reference confirmed	14.07.21	AD	AD 14.07.21
2.4	Review Prevention Fire Standard and perform gap analysis against Prevention Strategy	21.07.21	AD PM	AD 21.07.21
2.5	Finalise, publish and promote Prevention Strategy, including KPI's for monitoring to assess the impact of prevention activity	30.07.21	AD DCFO CFO	CFO 30.07.21
2.6	Finalise the Prevention Strategy Action Plan and communicate to all staff, as well as agreeing with Station based managers	30.09.21	GCP	AD 02.11.21
2.7	In line with the new NFCC guidance on HFSVs. Collate and map quarterly KPI's for monitoring via P&I department to evaluate prevention activity and assess its impact	31.10.21	GCP PM SCP	AD 16-11-21
2.8	Create and publish a communication plan to articulate and share prevention aims across the service (internal)	31.12.21	GCP	
2.9	In line with the new NFCC guidance on HFSVs, formalise the plan for how we establish and maintain a competent and professional workforce to deliver prevention activities, to include the provision of safeguarding training, in a paper /statement of intent	31.12.21	PM	
2.10	We will apply an agile and proportionate approach to assessing risk based on need, which will range from telephone advice up to a Safe and Well check with referrals and partners. Applying an efficient and risk-based approach will ensure volume and quality in the delivery of our services and this will be recorded in a 5-year prevention strategy action plan	31.01.22	PM	
2.11	In line with the Prevention Fire Standard, establish a process to identify and capture feedback from a range of sources; to drive innovation and continuous improvement and enhance future performance. Review and publish the customer feedback and compile an annual report of recommendations.	31.03.22	PM	
2.12	Develop a means of evaluating prevention activity to assess its impact of on the local community	30.04.22	PM GCP	
2.13	Undertake efficiency-based value review, measuring resources in versus outputs, and continue to monitor efficiency.	30.04.22	PM GCP	
2.14	Investigate a body to undertake a peer review or external assessment of delivery against our strategy	30.04.22	GCP	

Objective 3:

To review the systems and processes for dealing with referrals from partner agencies. This is to make sure they are managed effectively and the backlog of safe and well visits is reduced and resourced in accordance with risk.

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3.1	Extend x4 Fixed Term Prevention Technician contracts until 31.12.21 to increase capacity pending a review of resources	30.06.21	PM	AD 30.06.21
3.2	Confirmation to Response to confirm they will complete home fire safety check as of 19.07.21 pending a full review of prevention work streams by the Prevention Department	16.07.21	AD PM	AD 16.07.21
3.3	Response and Prevention managers to meet to determine our classification of checks	04.08.21	PM SCP GCP	GCP 04.08.21
3.4	Reduce the backlog of checks from 500 to 250	03.08.21	PM SCP	AD 03.08.21
3.5	Eliminate historical backlog of remaining checks	30.10.21	PM	AD 18.10.21
3.6	Obtain feedback from Response on their time in motion study to inform the time available for crews to undertake prevention activity on a weekly basis	03.09.21	GCN	AD 29.09.21
3.7	Undertake a resource mapping exercise, measured against the Prevention Strategy, to determine a long-term sustainable prevention resource, and total service resources required to deliver a sustainable programme of prevention activity in line with the Strategy to include referrals, post fire prevention activity and campaigns	30.09.21	GCP PM SCP	AD 29.09.21
3.8	Paper to SMB to define what the Prevention department and Response teams deliver, what resource there is currently, how we will apply it and finally what we expect to deliver annually with that resource. If additional resources or structural changes are required this will be clearly recommended in this paper	26.10.21	AD GCP	AD 29.09.21
3.9	Allocate clear workloads and targets (with regular KPI management) to Response crews	27.10.21	GCP	AD 02.11.21
3.10	Define clearly the systems and processes for working with other agencies and formalise the partnership working approach and process for feeding back to partner agencies via a paper / statement of intent and include in the Prevention Action Plan	31.10.21	PM SCP	AD 13.12.21
3.11	Working with Corporate Communications develop and publish a Prevention communications plan (External)	30.11.21	PM SCP	AD 13.12.21
3.12	Establish quality assurance process for Home Fire Safety Visits	31.01.22	PM	
3.13	Review systems and processes for dealing with referrals from partner agencies, including development of on-line referral form for partner agencies and members of the public to ensure referrals are managed effectively	01.04.22	PM	
3.14	Work with relevant partners to plan, promote, support and deliver prevention activities in line with the risks outlined in our CRMP, formalise into an annual plan	30.01.22	PM SCP	