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Phil Loach  
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Councillor Greg Brackenridge  
Chair  
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22 January 2021

Dear Mr Loach and Cllr Brackenridge,

**COVID-19 INSPECTION: WEST MIDLANDS FIRE SERVICE**

In August 2020, we were commissioned by the Home Secretary to inspect how fire and rescue services in England are responding to the COVID-19 pandemic. This letter sets out our assessment of the effectiveness of your service's response to the pandemic.

2. The pandemic is a global event that has affected everyone and every organisation. Fire and rescue services have had to continue to provide a service to the public and, like every other public service, have had to do so within the restrictions imposed.

3. For this inspection, we were asked by the Home Secretary to consider what is working well and what is being learned; how the fire sector is responding to the COVID-19 crisis; how fire services are dealing with the problems they face; and what changes are likely as a result of the COVID-19 pandemic. We recognise that the pandemic is not over and as such this inspection concerns the service's initial response.

4. I am grateful for the positive and constructive way your service engaged with our inspection. I am also very grateful to your service for the positive contribution you have made to your community during the pandemic. We inspected your service between 14 and 25 September 2020. This letter summarises our findings.

5. In relation to your service, a major incident was declared by the local NHS trust on 31 January 2020, and by the West Midlands strategic co-ordinating group in the week of 23 March 2020.

6. In summary, we were impressed by how the service evolved its ways of working during the pandemic. This enabled it to continue to provide its statutory functions, as well as supporting

the wellbeing needs of its staff. The service updated its plans as it understood the new risks introduced by the pandemic and has already started to develop plans to adapt and adopt the best aspects of its new ways of working.

7. The service continued to respond to emergency calls. Government restrictions meant the service had to change how it provided its prevention and protection activity, as the service was not able to visit some people and premises. We were impressed with how it used technology to conduct safe and well visits and business fire safety audits remotely, and to stay in touch with the public. A good example of this was the 999eye tool that allows the public to live stream emergencies to the service. This meant the service could continue to give advice to the most vulnerable people, and to those responsible for high-risk premises, while keeping staff and others safe from possible infection.

8. Digital technology was also used to support remote working and communicate with staff. A digital strategy to improve the use of technology was in place before the pandemic, but a lot of this work was accelerated to meet the challenges the pandemic caused.

9. We were particularly impressed by the way the service sought and used scientific and medical advice during the pandemic. The service set up a group that advised it on how to implement government guidance and adapt existing ways of working. This group included a fire authority observer member who is a professor in the NHS. It also provided advice to the national fire sector through the National Fire Chiefs Council (NFCC), as well as to regional organisations through the local resilience forum (LRF).

10. We recognise that the arrangements for managing the pandemic may carry on for some time, and that the service is now planning for the future. In order to be as efficient and effective as possible, West Midlands Fire Service should focus on the following areas:

(a) It should determine how it will adopt, for the longer term, the new and innovative ways of working introduced during the pandemic, to secure lasting improvements.

(b) It should discuss with all staff to determine how it can best support them throughout the pandemic.

### **Preparing for the pandemic**

11. In line with good governance, the service had a pandemic flu plan and business continuity plans in place which were in date. These plans were activated.

12. The plans were detailed enough to enable the service to make an effective initial response, but understandably they didn't anticipate and mitigate all the risks presented by COVID-19.

13. The service has reviewed its plans to reflect the changing situation and what it has learned during the pandemic.

14. The plans now include further detail on personal protective equipment (PPE) requirements, track and trace arrangements and control room workforce plans.

### **Fulfilling statutory functions**

15. The main functions of a fire and rescue service are firefighting, promoting fire safety through prevention and protection (making sure building owners comply with fire safety legislation), rescuing people in road traffic collisions, and responding to emergencies.

16. The service has continued to provide its core statutory functions throughout the pandemic in line with advice from the NFCC. Pandemic restrictions hindered access to vulnerable people and premises, which required the service to adjust its approach to prevention and protection. Digital technology was innovatively used to work with these restrictions.

### *Response*

17. The service told us that between 1 April and 30 June 2020 it attended fewer incidents than it did during the same period in 2019.

18. The overall availability of fire engines during the pandemic was broadly the same as it was during the same period in 2019. Between 1 April and 30 June 2020, the service's average overall fire engine availability was 93.9 percent compared with 93.7 percent during the same period in 2019. We were told that this was the result of lower than expected sickness levels among wholtime staff and staff doing voluntary additional shifts, which were already used to supplement staffing numbers.

19. The service didn't need to change its crewing models or shift patterns during this period.

20. The service told us that its average response time to fires remained broadly the same during the pandemic compared with the same period in 2019. This was because they could maintain pre-pandemic levels of staff availability, and because there was less road traffic during this period. This may not be reflected in [official data recently published by the Home Office](#), because services don't all collect and calculate their data the same way.

21. The service had good arrangements in place to make sure that its control room had enough staff during the pandemic.

22. This included effective resilience arrangements, such as training more staff for control room roles, including management and administration roles. The service provides the control function for Staffordshire Fire and Rescue Service. This is a long-standing agreement.

## *Prevention*

23. The NFCC issued guidance explaining how services should take a risk-based approach to continuing prevention activity during the COVID-19 pandemic. The service developed their local guidance earlier than the NFCC guidance, which they gave to the NFCC for consideration. Their approach was in line with the national guidance that was later issued.
24. The service decreased the number of safe and well visits that it would normally undertake. It reviewed which individuals and groups it considered to be at an increased risk from fire as a result of the COVID-19 pandemic. As a result, it added new information about individuals who are at increased risk from fire into its integrated risk management planning process.
25. The service decided to stop offering face-to-face safe and well visits except to its most vulnerable people in the community, where staff could safely visit with suitable PPE.
26. Instead of face-to-face safe and well visits, the service introduced the option of a safe and well visit by telephone. It also used other options, including its 999eye tool, which allows people to walk around their homes and stream the images to prevention staff who can offer advice. We found this to be a good example of how to use technology to adapt prevention work, so that the service could continue to support those most vulnerable in the community.

## *Protection*

27. The NFCC issued guidance on how to continue protection activity during the COVID-19 pandemic. This includes maintaining a risk-based approach, completing desktop audits and issuing enforcement notices electronically. The service broadly adopted this guidance.
28. The service reviewed how it defines premises as high-risk during the pandemic. As a result, it confirmed that sites such as care homes and buildings that have aluminium composite material cladding are at increased risk from fire, so it inspected these premises remotely with the responsible persons. It had already developed guidance and risk assessments early in the pandemic, which it shared with the NFCC.
29. The service decreased the number of fire safety audits it would normally undertake. The service stopped carrying out face-to-face fire safety audits. It introduced risk-based desktop appraisals instead of face-to-face audits in order to minimise face-to-face contact between members of staff and the public.
30. The service continued to issue alteration notices, enforcement notices and prohibition notices. It also continued responding to statutory building control consultations.
31. It also introduced other measures to reduce social contact and protect staff, such as limiting the number of staff entering premises, applying social distancing and hygiene measures, and asking that doors in premises be left open so that staff didn't need to touch door handles that may be contaminated by the virus. These were as well as providing PPE, using the 999eye tool, giving advice by phone and using a triage system to assess risk.

32. The service has continued to engage with those responsible for fire safety in high-risk premises with cladding similar to that at Grenfell Tower, in particular, premises where temporary evacuation procedures are in place.

33. A Nightingale hospital was in the service area, in Birmingham. The service worked with the hospital's responsible person to put in place suitable and reasonable fire safety measures. The service wasn't involved in the initial development of these measures but worked with the responsible person to ensure that the measures complied with fire safety regulations.

### **Staff health and safety and wellbeing**

34. Staff wellbeing was a clear priority for the service during the pandemic. It proactively identified wellbeing problems and responded to any concerns and further needs. Senior leaders actively promoted wellbeing services and encouraged staff to discuss any worries they had.

35. Most staff survey respondents told us that they could access services to support their mental wellbeing if needed. Support put in place for staff included occupational health, mindfulness sessions, access to a psychotherapist weekly, cognitive behavioural therapy sessions, and regular communications and information on the service's intranet site (Mesh). The service used its networking group (Inspire) and representative bodies to discuss with its staff how it should plan for the potential longer-term effects of COVID-19 on the workforce.

36. Staff most at risk from COVID-19 were identified effectively, including those from a black, Asian and minority ethnic background and those with underlying health problems. The service worked with staff to develop and implement processes to manage the risk and used the scientific cell it had set up to get up-to-date information. When the government identified black, Asian and minority ethnic communities as being at higher risk, the service responded by recognising the impact on those staff and communities. It gave extra guidance, and used conversations with line managers to decide whether and how to make adjustments.

37. The service made sure that firefighters were competent to do their work during the pandemic. This included keeping up to date with most of the firefighter fitness requirements.

38. The service assessed the risks of new work to make sure its staff had the skills and equipment needed to work safely and effectively.

39. The service provided its workforce with suitable PPE on time using both the national fire sector scheme and independent suppliers and made sure it achieved good value for money.

### *Staff absence*

40. Absences have decreased compared with the same period in 2019. The number of days or shifts lost due to sickness absence decreased by 14.7 percent between 1 April and 30 June 2020 compared with the same period in 2019.

41. The service updated the absence policy so that it could better manage staff wellbeing and health and safety, and to make more effective decisions on how to allocate work. This included information about reporting COVID-19 absences (including self-isolation), pay and conditions during COVID-19 absences, and testing requirements. It also included information on returning to work after a period of absence or self-isolation, and on training for managers. Data was routinely collected on the number of staff absent, self-isolating and working from home.

#### *Staff engagement*

42. Most staff survey respondents told us that the service provided regular and relevant communication to all staff during the pandemic. This included weekly virtual briefing sessions for all staff with the chief fire officer, virtual team meetings, and information through the service's intranet site about wellbeing and health and safety. But some staff said that they didn't get regular communication from their manager.

43. The service intends to maintain many of the digital ways of working that have been introduced to aid efficiency and flexibility during the pandemic. It will also recognise people's preferences about working from home versus working in an office. It intends to continue many of the wellbeing services it has introduced, such as mindfulness training, as part of its usual processes.

#### **Working with others, and making changes locally**

44. To protect communities, fire and rescue service staff, including firefighters, were encouraged to carry out extra roles beyond their core duties. This was to support other local blue light services and other public service providers that were experiencing high levels of demand, and to offer other support to its communities.

45. The service carried out the following new activities: moving bodies, assisting vulnerable people, advising NHS and clinical care staff working with COVID-19 patients on how to fit face masks, delivering PPE, assembling face shields, packing food for vulnerable people and delivering essential items to vulnerable people. The service had trained its staff to be ready and able to support the local ambulance service, but this support ultimately wasn't needed.

46. A national 'tripartite agreement' was put in place to include the new activities that firefighters could carry out during the pandemic. The agreement was between the NFCC, National Employers and the Fire Brigades Union (FBU), and specifies what new roles firefighters could provide during the pandemic. Each service then consulted locally on the specific work they had been asked to support to agree how to address any health and safety requirements, including risk assessments. If extra work was requested, including variations to a role, it needed national and local agreement before it could start.

47. The service consulted locally to implement the tripartite agreement with the FBU, the Fire Officers' Association and UNISON.

48. The service carried out the following activities under the tripartite agreement: delivery of essential items to vulnerable people; fitting face masks for NHS and clinical care staff; moving bodies; delivering PPE and medical supplies to NHS and care providers; and packing and repacking food supplies for vulnerable people.

49. All of the new work done by the service under the tripartite agreement was agreed in time for it to start promptly and in line with requests from partner agencies.

50. There were extra requests for work by partner agencies that fell outside the tripartite agreement. These included transporting GPs to emergency appointments and helping local authorities to support people who were shielding from or were clinically extremely vulnerable to COVID-19. This work was agreed and done on time and in line with the request from the partner agencies.

51. All new work was risk-assessed and complied with the health and safety requirements, including those set out under the tripartite agreement.

52. Activities to support other organisations during this period were monitored and reviewed. The service has identified which activities it will continue. For example, continuing to support the wider wellbeing and health needs of those most vulnerable in the community.

#### *Local resilience forum*

53. To keep the public safe, fire and rescue services work with other organisations to assess the risk of an emergency, and to maintain plans for responding to one. To do so, the service should be an integrated and active member of its LRF. West Midlands Fire Service is a member of the LRF for the West Midlands and Warwickshire area.

54. The service was an active member of the LRF during the pandemic. The service told us that the LRF's arrangements enabled the service to fully participate in the multi-agency response. The LRF told us that the service's contribution to the multi-agency response was over and above what was expected of them.

55. As part of the LRF's response to COVID-19, the service's deputy chief fire officer chaired the LRF. It was a member of the following working groups: PPE, shielding and vulnerable people, transport recovery, mortality management, and test, track and trace which it co-chaired with the NHS. The service was able to allocate suitably qualified staff to participate in these groups without affecting its core duties.

#### **Use of resources**

56. The service's financial position hasn't yet been significantly affected by the pandemic.

57. The service has made robust and realistic calculations of the extra costs it has faced during the pandemic. At the time of our inspection, its main extra costs were related to voluntary additional shifts, PPE and wellbeing support. The service fully understands the effect that the

period of April to June 2020 has had on its previously agreed budget and anticipated savings, although it is unclear what effect any future costs will have on its budget this financial year. Where possible, it has exploited opportunities to make savings during this period (for example the BP free fuel offer for emergency services and extensive use of digital working) and used them to mitigate the financial risks it has identified.

58. The service received £2.8m of extra government funding to support its response. At the time of our inspection, it spent this money on extra staffing costs, PPE, information and communications technology (ICT) and building alterations. It has shown how it used this income efficiently, and that it mitigated against the financial risks that arose during this period.

59. The service didn't use any of its reserves to meet the extra costs that arose during this period.

60. When used, voluntary additional shifts were managed appropriately. The service made sure that staff who worked voluntary additional shifts had enough rest between shifts.

#### *Ways of working*

61. The service changed how it operates during the pandemic. For example, it moved its control room to an isolated area, carried out core competency training and station quality assurance visits remotely, and had staff working from home where possible. It had the ICT to support remote working.

62. The service was able to quickly implement changes to how it operates. This allowed its staff to work flexibly and efficiently during the pandemic. The service plans to consider how to adapt its flexible working arrangements to make sure it has the right provisions in place to support a modern workforce.

63. The senior leaders have had positive feedback from staff on how they were engaged with during the pandemic. As a result, the service plans to adopt these changes in its usual procedures and consider how they can be developed further to help promote a sustainable change to its working culture.

64. The service made good use of the resources and guidance available from the NFCC to support its workforce planning and help with its work under the tripartite agreement.

#### *Staffing*

65. The service had enough resources available to respond to the level of demand during the COVID-19 pandemic, and to reallocate resources where necessary to support the work of its partner organisations.

66. Arrangements put in place to monitor staff performance across the service were effective. This meant the service could be sure its staff were making the best contribution that they



reasonably could during this period. Extra capacity was identified and reassigned to support other areas of the service and other organisations

67. As well as performing their statutory functions, wholetime firefighters and non-operational staff volunteered for extra activities, including those under the tripartite agreement.

### **Governance of the service's response**

68. Each fire and rescue service is overseen by a fire and rescue authority. There are several different governance arrangements in place across England, and the size of the authority varies between services. Each authority ultimately has the same function: to set the service's priorities and budget, and to make sure the budget is spent wisely.

69. West Midlands Fire Authority was actively engaged in discussions with the chief fire officer and the service on the service's ability to discharge its statutory functions during the pandemic. Members of the fire and rescue authority and the service maintained a constructive relationship throughout the pandemic response to date.

70. Arrangements were put in place to give authority members relevant and regular information about how the service responded to the pandemic. The authority made use of technology and held meetings virtually.

71. During the pandemic, the fire and rescue authority maintained some oversight of the service, including its decision-making process. The authority reduced its oversight because it recognised the critical nature of this incident, and the need for the chief fire officer to be able to quickly adapt the service's response to effectively support its staff and communities.

72. The authority maintained regular communication with the chief fire officer and received the service's written briefings. The process for decisions that had previously needed full fire authority approval was changed to a 'matters of urgency' delegated process by the authority. This enabled the chief fire officer to make most decisions in consultation with three authority members, including the chair of the authority. The full authority carried out retrospective scrutiny during its weekly briefing.

### **Looking to the future**

73. During the pandemic, services were able to adapt quickly to new ways of working. This meant they could respond to emergencies and take on a greater role in the community by supporting other blue light services and partner agencies. It is now essential that services use their experiences during COVID-19 as a platform for lasting reform and modernisation.

74. West Midlands Fire Service has used digital technology well for engaging with its workforce, fire authority and local community. It told us that it had made more progress than it anticipated on its digital transformation and will look to continue this. By working more closely with other local organisations, it has also increased the information it holds on those people who could

be considered vulnerable to fire. This new information will be considered as part of the service's risk management process. The improvements in communication have had a positive effect on culture and engagement, including removing barriers between operational and non-operational staff, which it intends to continue. The service was also effective at contributing to the development of guidance through the NFCC.

75. Good practice and what worked was shared with other services through the NFCC, LRF and partners. This included working with University Hospitals Birmingham NHS Foundation Trust on the development of the Nightingale hospital. The service also worked to identify appropriate face coverings when entering the property of a deceased person and shared this information with the NFCC. It was able to develop guidance on areas of work under the tripartite agreement relating to prevention activity which it shared with the NFCC. It collaborated effectively with the police through the LRF.

### **Next steps**

76. This letter will be published on our website. We propose to restart our second round of effectiveness and efficiency fire and rescue inspections in spring 2021, when we will follow up on our findings.

Yours sincerely,



**Wendy Williams**

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