



Promoting improvements
in policing and fire & rescue
services to make everyone safer

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Her Majesty's Inspector of Constabulary
Her Majesty's Inspector of Fire & Rescue Services

Dr Sabrina Cohen-Hatton
Chief Fire Officer
West Sussex Fire & Rescue Service
Service Headquarters, County Hall
Chichester
West Sussex PO19 1RQ

19 February 2020

Dear Sabrina,

WEST SUSSEX FIRE AND RESCUE SERVICE REVISIT

We conducted our second revisit to West Sussex Fire and Rescue Service (FRS) on 20–22 January 2020 to review progress against your action plan.

Background

2. The focus of the revisit was the causes of concern we established after our inspection of West Sussex FRS in the week of 26 November 2018:

(a) West Sussex FRS lacks clear management and oversight of the safe and well visit (SWV) process. As a result, between 400 and 500 high-risk checks hadn't been completed. The team also highlighted concerns about the way in which information was managed through a paper-based SWV process.

(b) West Sussex FRS doesn't have an effective risk-based inspection programme (RBIP) and the database being used to manage this work is unreliable. The service couldn't show how it prioritises its protection work to target the premises of highest risk. We couldn't see how the capacity within the protection team would meet the demands of the service's RBIP and, therefore, how it would meet the priorities set in the service's integrated risk management plan (IRMP).

3. I wrote to the then Chief Fire Officer (CFO), Gavin Watts, and West Sussex County Council (WSCC) on 10 January 2019, setting out these causes of concern. The service provided an action plan later that month detailing how it proposed to make improvements.

4. We also established two other causes of concern about the service not acting in line with its values and how it engages with staff. We will monitor progress against these as part of our continuing inspection programme.

5. During the revisit, we interviewed staff who were responsible for implementing your action plans. This included you as the CFO. We spoke to Councillor Duncan Crow, the WSCC Cabinet Member for Fire & Rescue and Communities. We also spoke to managers and staff with responsibility for prevention and protection work and visited operational teams at stations. We concluded the revisit by giving feedback on our findings to you, Councillor Crow and other members of your senior leadership team.

Governance

6. The Cabinet member attends monthly meetings with you and other service staff, where he monitors progress against the action plan, referred to as the inspection improvement plan. The proposals for improvement are also subject to overview and scrutiny through a WSCC select committee.

7. WSCC governance and scrutiny arrangements are changing to become more effective. Some of these new arrangements have only recently been introduced and others are due to start imminently.

8. WSCC has identified a need to improve member understanding of the FRS and their statutory duties. A development programme for members is being created. A training day for all WSCC members has been scheduled for 26 February 2020.

9. Supporting improvements in West Sussex FRS is one of two service area priorities for WSCC. In July 2019, WSCC approved an extra £5.1m in funding to support improvements over the next three years.

10. Changes within WSCC have led to you now reporting direct to the Chief Executive. Both you and the Chief Executive find this helpful in making the improvements and accessing support from other WSCC services.

11. The service sought support from the National Fire Chiefs Council (NFCC). As a result, an independent advisory board has been established to provide advice and assurance to the service in making the improvements. The board consists of NFCC and Local Government Association representatives. Although the board has met once in December 2019, we see its formation as providing the opportunity for challenge and scrutiny of the improvement plan. Both the Cabinet member and the Chief Executive propose to attend future meetings.

12. The service's progress against the inspection improvement plan is also being monitored by a board, chaired by you. Progress and risks are also reviewed every month at a meeting of the senior leadership team executive board.

Action plan

13. The service has an action plan covering the causes of concern. The inspection improvement plan has senior responsible owners, deadlines and people responsible for specific actions. The plan includes updates on actions.
14. The service has developed specific action plans for prioritising and completing SWVs, creating an RBIP, and introducing a replacement IT system to record and monitor prevention and protection work.
15. The amount of improvement work and change within the service is significant. You have said that capacity and capability might affect the service's ability to make the improvements. An additional assistant chief officer post has been established to provide more senior operational capacity and a resource to support improvement activities.
16. You have recently identified the need to introduce more programme management skills to co-ordinate and prioritise the improvements. We found this is needed to support the sequencing of activities and measure improvements. We are pleased to see that, since November 2019, WSCC has provided a programme manager with the right skills to address this need. Senior staff have recognised the value this role has already added to managing and co-ordinating the improvements and providing better scrutiny.
17. We found that progress against some of the actions has been slow: for example, the appointment of extra staff in both the prevention and protection teams, and the training of operational crews in SWVs. This is disappointing. However, since October 2019, improvement work has quickened with better programme management.

Safe and well visits

18. A large proportion of SWVs originate from Telecare provider referrals. The people to be visited have been assessed by social care providers to be at higher risk. The service recognises that it needs to use other methods to identify people at high risk; for example, better profiling of local risk. It has plans to develop and introduce local risk management plans in April 2020.
19. The service has introduced an interim recording and monitoring system to manage the allocation and completion of all SWVs. Central prevention staff now book visits and finalise these on the service systems. We found this has improved the process.
20. The service established a performance dashboard in August 2019, which provides some data for managers to monitor the timeliness of visits. The service recognises that it needs better performance information. The new IT system should provide this.
21. The backlog of SWVs was cleared in March 2019.
22. The service published a new prevention strategy on 30 August 2019 and revised standard operational procedures (SOP) for conducting safe and well visits on 31 September 2019. The SOP details the process for arranging and prioritising SWVs, what action community fire

safety officers (CFsOs) and operational crews are to carry out during visits and the timescales for these to take place based on risk factors.

23. Three more CFsOs have been appointed. This will increase the capacity of the service to carry out SWVs for those people assessed to be of highest risk. These extra staff were appointed between October 2019 and January 2020, and all are still in development to become fully competent in their role. The benefit of these additional staff will take some time to emerge.

24. We found that some operational staff lack understanding of certain elements of SWVs and aren't completing parts of the process as per the SOP. Crews received a briefing when the new SWV booklet was introduced. Due to the limitations of the current IT systems, crews are given minimal risk information relating to the referrals.

25. Two prevention trainers were appointed in November 2019. These staff are responsible for training operational staff in conducting SWVs in line with the SOP. They are due to start providing this training in February 2020.

26. Operational crews are carrying out a large proportion of the SWVs to people assessed to be high risk. The service should make sure it can measure the benefits from the investment in training for operational staff.

27. We found limited quality assurance for SWVs carried out by both specialist prevention staff and operational crews. The service should consider how it can address this.

28. Specialist prevention staff felt that the service was supportive. They have noticed faster progress over the last four months with the publication of revised processes, the appointment of new staff and the decision to procure a replacement IT system. Some staff expressed frustration about how long it had taken to appoint the extra CFsOs and the prevention trainers.

Risk-based inspection programme

29. A draft fire safety enforcement strategy has been written and is awaiting final approval by senior officers. This draft strategy identifies the risk criteria to prioritise audits.

30. Since November 2019, the service has been using the revised criteria to prioritise fire safety audits.

31. An interim recording and allocation system generates a list of premises to be audited based on risk factors. This enables audits to be better targeted at premises with the highest risk.

32. Since November 2019, targets have been set for the number of high-risk premises audits to be completed each month. Targets have also been set for the number of thematic fire safety visits to be completed. The thematic visits are based on identified high risk factors such as sleeping risk above fast food premises.

33. The service recognised that it needed to make greater use of the enforcement powers available in appropriate cases. We found evidence that this is now happening. According to

data provided by the service, several enforcement and prohibition notices have been issued since 1 April 2019, and there has been one prosecution, with four other cases pending.

34. The backlog of fire safety audits was cleared in November 2019.

35. There is a quality assurance process for fire safety audits. The service has recently started to use this, with targets to conduct three assessments of each inspecting officer per year.

36. Funding for seven more staff within the protection team was approved in July 2019. Currently, of the 12 inspecting officer posts, 10.5 of these are filled. Three of these are in development to become fully competent in their role. The benefit of these additional staff will take some time to emerge.

37. An extra £100,000 of funding is now available every year to support the training and development of protection staff.

38. The service is in the process of recruiting for four other new posts. Two of these are managers within the protection team and two are business safety trainers.

39. Protection staff feel that the service is supportive. They have noticed faster progress over the last four months with the appointment of new staff and a greater focus on high-risk premises. Some staff expressed frustration about how long it had taken to appoint the additional inspecting officers.

40. The service commissioned a peer review of its protection services. This was conducted in December 2019. The service is awaiting the results of this review.

Replacement IT system

41. In our initial inspection, we found that the service's IT system creates problems and didn't provide accurate information to allocate and monitor SWVs and fire safety audits. This continues to make it difficult for managers to monitor performance effectively.

42. The service has introduced interim measures to improve how prevention and protection work is allocated and managed. These have been well received by managers providing them with better information to task work and monitor its completion.

43. WSCC has approved funding for a new system. The service has chosen a replacement system and started procurement. The new system allows for mobile access to data for both specialist staff and operational crews. Specialist staff from prevention and protection have appreciated being involved in setting the user requirements for the new system.

44. The phased introduction of this system is scheduled to start in April/May 2020. You recognise the importance of this new system to support improvement work within both prevention and protection. Programme management resources are being used to support the implementation to make sure it takes place against the deadlines set.

Conclusion

45. The service has an action plan with senior responsible owners, deadlines and specific people responsible for actions. You chair an Improvement Board that oversees progress and monitors risk.
46. In July 2019, WSCC approved £5.1m more funding to support improvements to address the causes of concern over the next three years.
47. The amount of improvement work and change within the service is significant. You have said that capacity and capability could affect the service's ability to make the improvements. The allocation of an appropriately skilled and dedicated programme manager has added benefit to implementation with the prioritisation and co-ordination of action.
48. WSCC governance and scrutiny arrangements are changing to become more effective. Some of these new arrangements have only recently been introduced and others are due to start imminently.
49. The recent establishment of an independent advisory group provides assurance and challenge.
50. We found that progress against some of the actions has been slow. This is disappointing. The service has cleared the backlogs in SWVs and fire safety audits. This is positive, although it was only completed in November 2019. Additional CFSOs, inspecting officers and prevention trainers have only been appointed in the last four months.
51. Since October 2019, improvement work has moved faster, with new staff being appointed and better programme management. Staff felt supported and welcomed the increased speed of the improvements.
52. Interim measures have been introduced to mitigate the risks of the current IT system. WSCC has approved funding for a replacement system and the service has begun procurement, with a rollout due to start in April/May 2020. This is important as it will not only help specialist staff and operational crews provide a better service but will also yield better management information to monitor performance.
53. The service should make sure it can measure the benefits from the investment in training for operational staff.
54. The service should consider how it could better quality assure the visits being carried out by both CFSOs and operational crews.
55. The service is now using revised criteria to prioritise fire safety audits in line with its draft RBIP. This is providing greater clarity for staff on the order they are to carry out audits. The service is better targeting risk.

56. During this revisit we found a clear commitment from you and the WSCC to make the improvements the service needs. You recognise that more action is necessary, but we have seen tangible improvements, especially within the last four months, in mitigating the risks to public safety we identified.

57. We will continue to monitor progress through updates from the service and data returns. When we next inspect the service in 2021, we will further assess progress against these recommendations.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Dru Sharpling', written in a cursive style.

Dru Sharpling

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