



Classification	Official		
Meeting	Service Leadership Team	Agenda no.	6a
	Performance and Resources Board		8
Meeting Date	30 April 2024		
	20 May 2024		
Report Authors	Tim Bartlett – Performance Analyst Lucy Clayton – Performance, Policy and Business Planning Mgr		
Presented By	Moira Bruin		
Subject	Performance Framework and Target Setting 2024-25		
Type of Report	Decision		
Action Point No.		For Publication	Yes

RECOMMENDATION(S)

1. Review the Performance Framework
2. Note the methodology used to create targets set out in the paper.
3. Agree the targets set out in this paper.

EXECUTIVE SUMMARY

This report sets out the Performance Framework with proposed targets to be used for the Service’s performance measures for 2024-25. The performance measures and targets have been developed by the Performance and Analytics team, in conjunction with the Extended Leadership Team.

The performance framework has been created to ensure that the service is delivering against the key service strategies, targets tolerances have then been set to drive continuous improvement throughout the service. This allows for the service to have robust performance conversations whilst ensuring that resources are in the right place to deliver them.

This report also details the methodology used to develop and set the targets for the services performance measures as identified within the Performance Framework. The Performance Framework aligns to the Fire and Rescue Plan.

Unless explicitly identified within either the Fire and Rescue Plan and the Integrated Risk Management Plan, targets have been agreed with the business owner and are to be signed off by the Service Leadership Team.

BACKGROUND

The Service's Performance Framework and Targets are reviewed on an annual basis.

Working with the Service we have identified several measures which are now obsolete from the framework due to changing priorities within the Service's key strategies. These will be replaced by new measures which allow us to track performance more efficiently.

OPTIONS AND ANALYSIS

Performance Framework

Working with conjunction to the Extended Leadership Team the following Performance Framework metrics and targets have been proposed:

Targets

Performance Measure	Target Owner	Red	Amber	Green	Blue
Rate of primary fire injuries per 1,000 fires	Ian Adams	46+	27-45	18-26	0-17
		Rate per month			
Number of primary fire injuries	Ian Adams	8+	5-7	2-4	0-1
		Number per month			
Rate of Accidental Dwelling Fire Injuries per 1,000 fires	Ian Adams	69+	36-68	20-35	0-19
		Rate per month			
Number of Accidental Dwelling Fire Injuries	Ian Adams	6+	4-5	2-4	0-1
		Number per month			
Number of Deliberate Fires	Ian Adams	115+	99-114	40 - 98	0 - 39
		Number per month			
Number of Accidental Dwelling Fires	Ian Adams	68+	61-66	43-60	0 - 42
		Number per month			
Number of fires in Non-Residential Properties	Ian Adams	40+	34 - 39	12 - 33	0 - 11
		Number per month			
Reduction in the number of Unwanted Fire Signals	Ian Adams	114+	101 - 113	72 - 100	0 - 71
		Number per month			
Number of Audits against the High Risk Premises in RBIP	Ian Adams	0-62	63-73	74-83	84+
		Variable target to be adjusted monthly. Targets set as of Feb 2024			
Number of Audits against the V High Risk Premises in RBIP	Ian Adams	0-15	16-25	26-35	36+
		Variable target to be adjusted monthly. Targets set as of Feb 2024			

Performance Measure	Target Owner	Target
Fire Cover at Strategic Locations	James Palmer	97%
		Monthly
Service wide first pump availability	James Palmer	80%
		Monthly
To get our first attendance to a potentially life-threatening incident within an average of 10 minutes	James Palmer	10 Minute Average
		Monthly
Percentage of incidents attended within 15 minutes	James Palmer	90%
		Monthly
Number of Home Fire Safety Visits Delivered	Ian Adams	604
		Variable target to be adjusted monthly
Number of Home Fire Safety Visits by operation staff	James Palmer	438
		Monthly
Freedom Of Information Response Rates	Karl Edwards	90%
Complaint Response Rates	Karl Edwards	90%
Percentage of working time lost per person per employee	Colette Black	Below national average
		Monthly

Protection and Prevention – Dynamic/Variable targets.

It is proposed that ECFRS moves towards a more flexible and dynamic method of monitoring audit and Prevention visits.

Currently the targets are generated at the start of the reporting period, by dividing the total number of targeted visits by the number of months in the reporting period. This creates a fixed number of visits that require to be completed each month, and performance is measured against this static target. However, it is acknowledged that this static approach doesn't accurately reflect output.

The new variable targets will be based on the cumulative number of visits completed, distributing them across the remaining months of the reporting period. Staffing levels and potential reductions in working days due to holiday periods will also be factored in.

The Prevention management team will review the forecasts each month prior to the publication of the Performance Report, providing narrative to explain the performance of the team against the variable target.

We anticipate that this approach will provide a better assessment of the department's performance and set more realistic and achievable targets. Additionally, this method will allow for targets to reflect the performance over the preceding months, and account for potential adjustments to future staffing levels.

This approach is also proposed to be used for the Protection arena and the reporting of Audit visits.

Table 1 illustrates the current static target measures. In this example, the target is for 12,000 visits to be completed over a 12-month period. This equates to a static target of 1,000 visits a month.

Table 2 illustrates the variable target. As can be seen, the target fluctuates depending on the previous number of visits completed. The higher the number of visits, the lower the target. In April, where the number of visits were below the target, the target to the following month has increased. If the visits then exceed the new target, then the target for the next month is decreased.

Charts 1 illustrates how the variable targets will increase if the expected number of visits are not completed. Chart 2 illustrates how this appears over the RBIP cycle for Very High audits. As shown, the number expected visits are set to increase over time as more officers become qualified and therefore more audits are expected to be completed. This is based on a number of factors, including the number of audits completed per FTE, the fact that available FTE may decline during holiday periods, and the length of time that officers take to complete their relevant qualifications. **Therefore, the performance will be measured against what has been competed versus what was expected.**

Month	Target Visits	Actual Visits
April	1,000	550
May	1,000	1,020
June	1,000	1,100
July	1,000	1,200
August	1,000	850

Table 1: Static Target

Month	Target Visits	Actual Visits
April	1,000	550
May	1,043	1,020
June	1,037	1,100
July	1,016	1,200
August	1,040	850

Table 2: Variable Target

Missed visits are added "back into the pot" and adjusts future targets

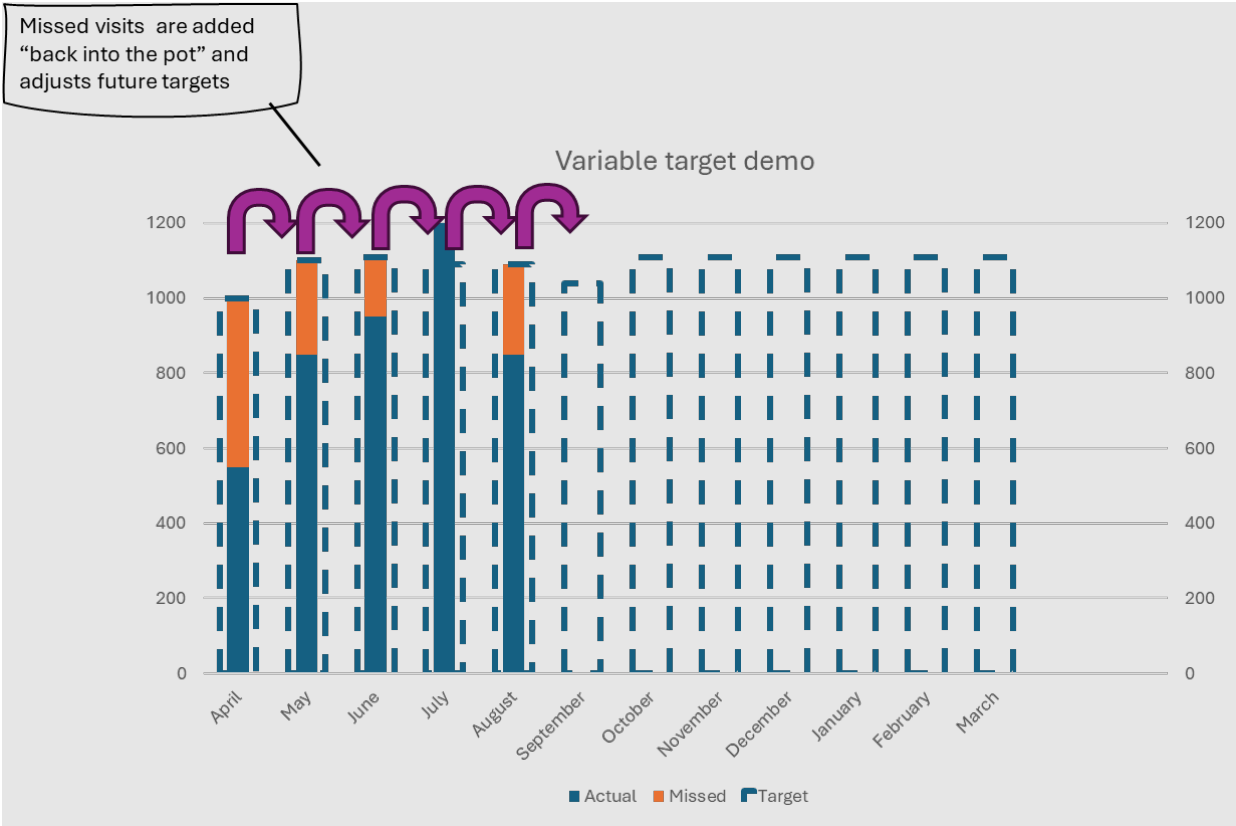


Chart 1: Visual representation of variable target with pseudo data

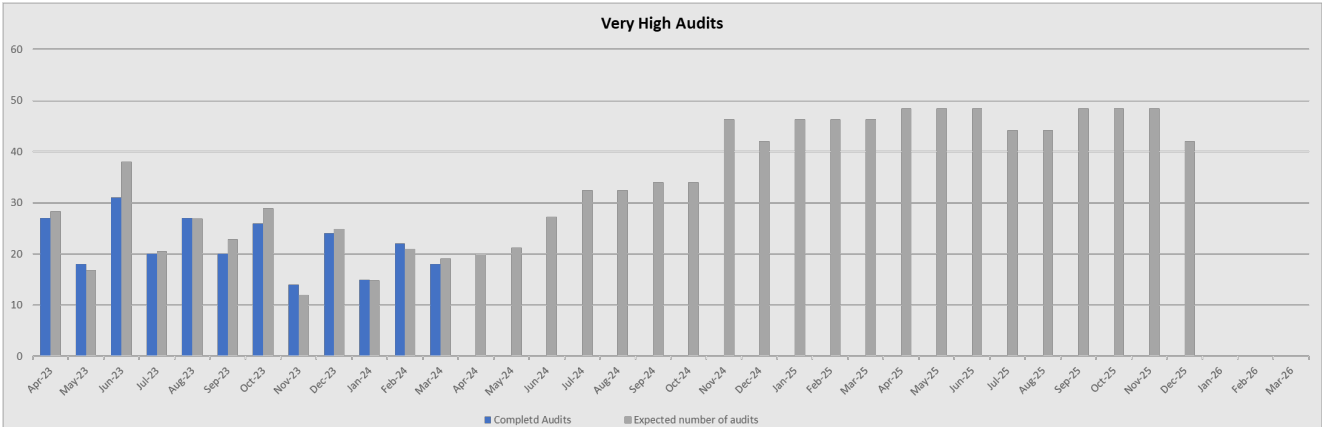
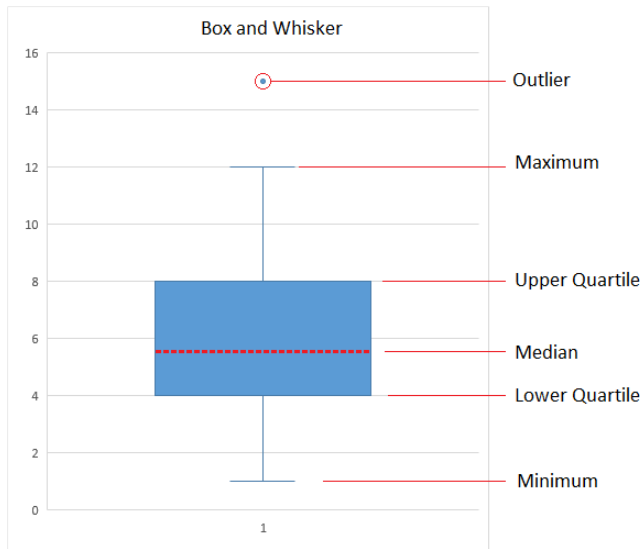


Chart 2: Expected/planned audits vs Actual audits

Identifying the tolerance

When a performance metric has met its target consistently over the course of a year it is important to reset the target to make it challenging target so that positive performance against it ensures continuous improvement.

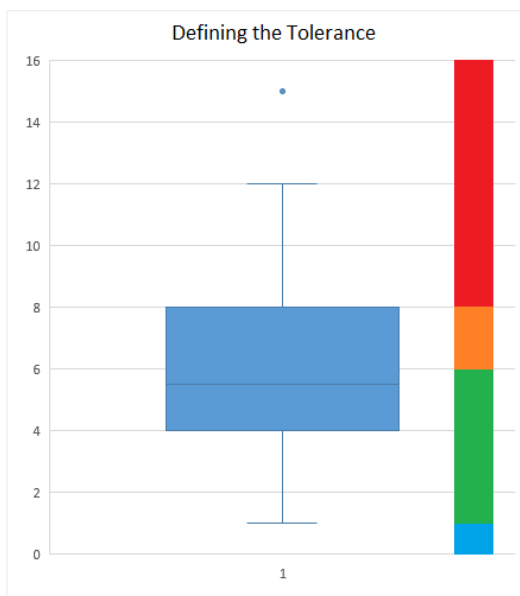


To identify the tolerance for a measure we looked back at three years' work of performance data and plot it in **Box and Whisker Chart**.

This is a standard statistical way of displaying the data set. This then establishes:

- Outliers
- Maximum: the largest number excluding any outliers
- Minimum: the smallest number excluding any outliers
- Median: The middle value of the dataset
- Upper Quartile and Lower Quartiles (based on the distribution of the data excluding outliers)

From this we can establish performance tolerances.



Red performance: Any performance that falls above the Upper Quartile

Amber performance: Any performance that falls above the Median and within the upper quartile.

Green performance: Any performance that falls below the Median and above the Minimum.

Blue Performance: Any performance that falls below the minimum.

RISKS AND MITIGATIONS

None in relation to this report

LINKS TO FIRE AND RESCUE PLAN

None in relation to this report

FINANCIAL IMPLICATIONS

None in relation to this report

LEGAL IMPLICATIONS

None in relation to this report

STAFFING IMPLICATIONS

None in relation to this report

EQUALITY AND DIVERSITY IMPLICATIONS

The actions being taken will not have a disproportionate impact on individuals with protected characteristics (as defined within the Equality Act 2010), when compared to all other individuals and will not disadvantage people with protected characteristics.

Race	N	Religion or belief	N
Sex	N	Gender reassignment	N
Age	N	Pregnancy & maternity	N
Disability	N	Marriage and Civil Partnership	N
Sexual orientation	N		

The Core Code of Ethics Fire Standard has been fully considered and incorporated into the proposals outlined in this paper.

HEALTH AND SAFETY IMPLICATIONS

None in relation to this report

CONSULTATION AND ENGAGEMENT

Performance and Analytics have worked closely with the Extended Leadership Team, Continuous Improvement Board and the Office of the Police Fire and Crime Commissioner in the creation of these targets.

FUTURE PLANS

To be reviewed on an annual basis

LIST OF BACKGROUND PAPERS AND APPENDICES

Appendix A: Performance framework