



**Hampshire  
& Isle of Wight**  
FIRE & RESCUE SERVICE

# Mid Year Performance

1<sup>st</sup> April 2021 to 30<sup>th</sup> Sept 2021

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**Together We  
Make Life Safer**

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HAMPSHIRE & ISLE OF WIGHT FIRE & RESCUE SERVICE

# Mid Year Performance 2021/22



This report focuses on our performance within this financial year (1<sup>st</sup> April to 30<sup>th</sup> September 2021) across a number of key areas that broadly align with our Safety Plan priorities. The report also, on slide 8, provides some additional commentary on other crucial Service activities, including progress against our Year 2 Safety Plan improvements. This report presents a shorter, more visually focused summary view of our activity in a dyslexia friendly format.

Whilst we continue to navigate the direct and indirect impacts of the COVID-19 pandemic, the Service remains operationally effective and focused on keeping our communities and our people informed and safe, and also on supporting a wide range of partners.

Our overall incident volumes have been consistent with the same period last year; however the incident profile has changed significantly. For example, we have seen a reduction in fires mainly influenced by a reduction in primary and secondary grass fires, and our 'special service calls' have increased – reflective of the additional activity assisting other agencies, effecting entry/exit, lift release, RTCs (Road Traffic Collisions) and co-responding, as a result of partners needing additional support and there being fewer lockdown restrictions in the 2021 period.

Despite sickness increases and availability decreases, which are discussed in the report, we have been able to maintain our average critical response time at around 7 minutes 30 seconds, with only a one second increase compared to the same period last year. This is testament to our stations and Groups, and the support they have received from the Emergency Staff Cell and from Control. Fatality figures have also remained low and comparable to last year.

Concurrently, reflective of reduced COVID-19 restrictions and our organisational focus on these areas, we have significantly increased the number of Safe and Well visits and Fire Safety Audits that we have undertaken, as well as increasing our business regulation and licensing consultation activity – while maintaining strong performance in this area; as well as exceeding our High-Rise Risk Based Inspection Programme targets.



***DCFO Shantha Dickinson – Director of Policy, Planning and Assurance***

## Mid Year Performance Summary 2021/22


- **Sickness:** staff sickness has increased compared to both the previous six months and the same period (April to September) last year. This was driven partly by the 'pingdemic' impact of COVID-19 self isolations in July and August (though COVID-19 related absences subsequently reduced significantly and remain low). It was also impacted by a significant increase in other sickness absences, particularly musculoskeletal related. See [slide 6](#) for more detail.
- **Availability:** sickness increases and some challenges in qualified drivers being available meant that availability decreased to 96% for whole-time and 64% for on-call during the period April 2021 to September 2021. On-call availability has also been impacted by the easing of restrictions, which had the opposite effect to availability in the early parts of the pandemic (when it increased to very high levels during the initial lockdown and early furlough period).
- **Critical response times:** our average critical response time increased very slightly (by 6 seconds) compared to the previous six months and by only 1 second compared to April to September 2020. This has been achieved despite lower availability and higher levels of sickness as we have managed resources effectively through our Emergency Staffing Cell and Control Management. Furthermore, we have not seen an adverse impact on our communities with 0 fire fatalities (with two pending coroner's reports), comparable to the previous year. The number of casualties did increase but that is to be expected given the greater lockdown conditions in 2020, which meant fewer people were undertaking activities in the community as more people were at home. Furthermore, 2021 has seen significant demand pressures on partners, such as the ambulance service, partly as people are now more forthcoming with medical issues, which also impacts the 2021 increase in special service call casualties. See [slide 5](#) for more detail.
- **Incidents:** incident volumes increased compared to the previous six months - but this is to be expected given the reduction in COVID-19 restrictions which occurred within this reporting period and the fact that incident volumes fluctuate naturally at particular points within the year. A more valuable comparison is to the same period (April to September) in 2020. This comparison shows a stable number of incidents (decrease of 37, -0.3%), owing to a similar pattern last year where the country came out of a national lockdown towards the mid part of the year. There has, though, been a change in our incident profile. The impact of the pandemic on incident volumes can also be seen by comparing to April – September 2019 – with a 12% reduction between 2019 and 2021. See [slide 4](#) for more detail.
- **Safe and Well visits:** the number of visits increased significantly (29%) compared to April – September 2020, while the number of visits where we were refused entry or could not contact the individual reduced by 3% compared to last year. This is owing to continued focus on our prevention activity and because the initial pandemic lockdowns made it harder to visit individuals and reduced their likelihood to engage with our services. See [slide 5](#) for more detail.
- **Fire Safety Audits:** following the easing of COVID-19 restrictions we have been able to increase our protection activity, including fire safety audits - of which we undertook 677 between April and September 2021, significantly up by 251 on the previous six months and by 508 from the same period last year. This delivery of audits means we are on track to be above our target level of 1,332 audits by the end of the year. Similarly, following the easing of lockdown restrictions, we have seen a significant increase in business regulation and licensing consultations - maintaining high levels of performance in this area too. See [slide 5](#) for more detail.

# Incident Summary




10,739 

**Incidents attended** -37 (-0.3%) vs April-September 2020, and -1,500 (-12%) vs the same period in 2019

2,218 

**Fires** -461 (-17%) vs April-September 2020

**Influenced mainly by** a reduction in primary and secondary grass fires, despite a slight increase in primary dwelling fires reflective of less people being at home owing to fewer COVID-19 restrictions being in place in 2021.

3,916 

**False Alarms** +80 (+2%) vs April-September 2020

**Influenced mainly by** an increase in false alarms due to apparatus owing to single occupancy dwellings related to reduced COVID-19 restrictions and education establishments which were not in use to the same extent in 2020.

4,605 

**Special Service Calls (SSC)** (includes RTCs – see further details below) +344 (+8%) vs April-September 2020

**Influenced mainly by** assisting other agencies, effecting entry/exit, lift release, RTCs and co-responding owing to people undertaking more activity due to fewer lockdown restrictions, and additional demand for partners, particularly the ambulance service.

## Fire fatalities & Casualties by all incident types

(fire deaths: confirmation by Coroners report only)

**0 fire fatalities** vs 1 April-September 2020. Awaiting coroner outcome of 2 fatalities (June and September 2021) therefore this figure may rise by 2 (an elderly male, smoking materials and elderly female, electrical fault)

**64 fire casualties** +53% (from 42) vs April to September 2020

60% male, 29% related to cooking  
40% female, 38% related to cooking

**237 RTC casualties** +20% April-September 2020

**130 SSC casualties** +38% vs April-September 2020

Mainly owing to a 104% increase in assisting other agencies (23 to 47)

## Our Communities



**63.9%**



### On-call availability

vs 75.1% October 2020 – March 2021 and 75.6% between April – September 2020. The 2021 position was impacted by sickness and the easing of COVID-19 restrictions, which had the opposite effect to availability in the beginning of the pandemic (when it increased to very high levels due to lockdown restrictions and the early furlough period). Another factor in the reduction was the availability of drivers.

**96.1%**

**Whole-time availability** vs 97.4% October 2020 – March 2021 and 98.0% in the same period (April – September) last year. There has been some declines owing to sickness.

**7 mins  
31 secs**



**Critical response** +1 second vs 7:30 April 2020 – September 2020

Urban **7 mins 19 secs** Rural **10 mins 37 secs**

vs April 2020 – September 2020 Urban 7:15 & Rural 10:43

**678**

+252 (+59%) vs Oct 20 – Mar 21  
+ 509 (+301%) vs Apr – Sept 20

**HIWFRS 79% (534) Fire Safety Audits** completed on time  
vs 73% April – September 2020

**909**

+202 (+29%) vs Oct 20 – Mar 21  
+ 383 (+73%) vs Apr – Sept 20

**HIWFRS 94% (851) Building Regulation Consultations**  
completed on time vs 97% April – September 2020

**377**

+38 (+11%) vs Oct 20 – Mar 21  
+ 132 (+54%) vs Apr - Sept 20

**HIWFRS 94% (356) Licensing Consultations**  
completed on time vs 87% April – September 2020

**3,906**



### HIWFRS S&W visits carried out

vs 3,407 (+499) October 2020 – March 2021  
vs 3,020 (+886) April – September 2020

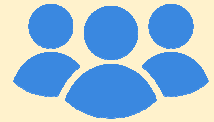
The number of visits increased by **15%** compared to October 2020 – March 2021 and by **29%** compared to April – September 2020. The steady increase is a consequence of post lockdown conditions and significant operational focus on this activity.

**In addition, while increasing the number of visits we have also seen positive declines in refused entry and could not contact figures...**

**613** refused entry down 28% (-244) vs 857 in October 2020 – March 2021, though up 16% (+86) vs 527 in April – September 2020.

**491** could not contact (on multiple occasions) down 18% (-110) vs 601 in October 2020 – March 2021 and down 20% vs 613 in April – September 2020.

# Our People



## Sickness absence

6.12



average shifts/days lost to sickness  
**+1.58 shifts lost (+35%) vs April to September 2020**

Staff sickness increased compared to both the previous six months and the same period (April to September) last year. This was driven partly by the 'pingdemic' impact of COVID-19 self isolations in July and August (though COVID-19 related absences subsequently reduced significantly and remains relatively low). It was also impacted by an increase in other sickness absences, particularly musculoskeletal related, which was the highest cause of shifts lost to sickness for whole-time and on-call staff. This type of absence accounted 34% of total shifts lost from April to September 2021 (compared to 19% of all shifts lost in October 2020 to March 2021; and 21% in April to September 2020). Also 69% of the musculoskeletal related absence from April to September 2021 for whole-time and on-call staff was long-term sickness (over 28 days). The increase is less sharp when compared to 2019, when the average shifts lost was just below 5.

The main cause of sickness for both groups (after musculo-skeletal) is COVID-19 sickness (20%) with most of these owing to individual showing signs of COVID-19.



## Health & Safety

Injuries have increased since returning to normal working practises with more training courses and people in the work place. Through learning we are changing the behaviour and culture of staff resulting in more injuries being reported. It is also important to note that, positively, leading indicators outweigh lagging indicators by 9 cases.

Most injuries happen during training and operational incidents, because of the environment they are more at risk. These mostly involve strains, sprains, slips, trips & falls, manual handling and burns.

There have been 6 injuries reported under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) preventing Fire and Rescue Service (FRS) staff from working 7 days or more, subdivided as follows: slips, lifting/handling, fall from height and another kind of accident. These injuries occurred during attended fire incidents, gym/PT sessions and drill yard/training.

**67**  
+28 vs Apr-Sep 2020

**Leading** (near miss/cause for concern) cases have fluctuated during this period and although higher than the previous 6 months (Oct-Apr) they still exceed the laggings.

**58**  
+19 vs Apr-Sep 2020

**Lagging** (injury) cases have increased in line with more people using the reporting system which in turn allows for learning and improving our training and techniques.

**6**  
-/+ 0 vs Apr-Sep 2020

**RIDDOR** incidents have remained the same when compared to the same period last year.

**18**  
people  
+3 vs Apr-Sep 2020

**Lost Time Injuries** have increased slightly (+3) when compared to the previous the same period in 2020. However, 3 of the 18 were not work related.

# Public Value



In terms of FRS net revenue expenditure by population, the previous year's figures are:



**£37.78**

**2020/21**, Hampshire ranked 13<sup>th</sup> out of 24 Combined Fire Authorities

**£44.81**

**2020/21**, Isle of Wight ranked 9<sup>th</sup> out of the 11 county authorities

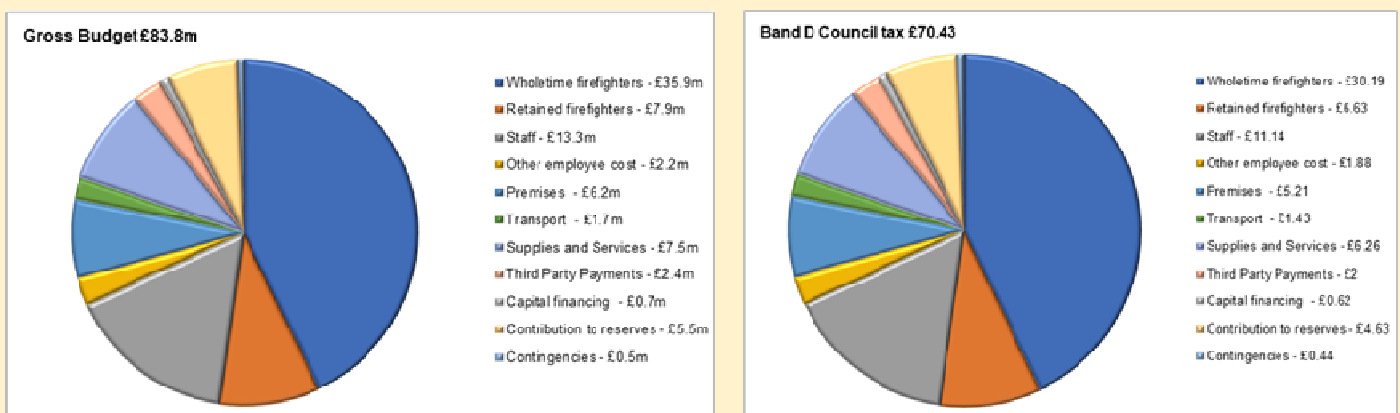
**Source:** CIPFA (Chartered Institute of Public Finance & Accountancy) is an institute and accountancy standards body for public service. Owing to CIPFA publication dates estimated data is currently available for 2020/21.

**£39.86**

**2021/22 HIWFRS cost per population** based on forecast outturn (as at Q1) and Office for National Statistics (ONS) 2020 mid-year population estimates. Increased costs reflect inflation and pay awards. As the first combined cost by population figure reported to the Authority it will provide a baseline strategic finance measure to compare against in future reports.

## Cost breakdown & indicative view of how our communities' council tax is spent

Cost of staff (wholetime firefighters: £35.9 million, retained firefighters: £7.9 million, and other staff: £13.3 million) are the largest spend areas, followed by supplies and services, and premises.



## Additional points of note



- Throughout this reporting period we have continued to **support health partners with additional activities** – including continuing to use Basingstoke Fire Station as a vaccination centre until September while maintaining operational response capability from the station. The centre delivered over 154,000 vaccinations between February and September 2021, saving around an **estimated 200 lives** as a result. Other fire stations (Cosham, Hightown, St. Mary’s, Fareham and Gosport) have also operated as walk-in vaccination clinics, and we have had various staff continue to work as voluntary vaccinators.
- **Safety Plan progress:** this year – the second year of the Safety Plan – we committed to completing 35 improvements. By Safety Plan priority, ‘Our People’ & ‘High Performance’ related (19 activities) are our top two areas of focus. As at the end of September, we had completed seven (20%) of these activities. However, across all activities progress is assessed at 56%, meaning we are on track, with most improvements scheduled to deliver later in the financial year. The activities completed so far include, but are not limited to:
  - Continued alignment of business processes and operating models under new Combined Fire Authority (CFA) arrangements;
  - Development of a new Organisational Development function;
  - Ensuring we embed our values by, for example, developing and launching a ‘Who We Are’ guide to our values and associated behaviours; and
  - Maturing processes to capture and act upon learning across the Service.
- **Fire Standards assurance:** There are currently 8 approved Fire Standards with a further one in consultation. When a new Standard is being developed, we take a proactive approach by engaging with the consultation process. This provides an early opportunity to review the proposed Standard and begin to assess our own organisation to identify any gaps. Once the Standard has been approved, we then take appropriate actions to ensure we are compliant.