

# Performance dashboard – Surrey Fire and Rescue Service

### **Executive Director Summary**

• Our Community Risk Management Plan (CRMP) will be going to Cabinet for approval on 28 January 2025. The CRMP is a 5-year iterative plan that will be delivered in stages, with each stage being reviewed and evaluated. The key objectives of the CRMP will be delivered by the end of 2030.

#### **Key Points**

His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) have indicated that the next round of inspections, due to commence in August 2025, will have a
focus on governance throughout, leadership at all levels of the service, and how services are resourcing to risk. The team continue to meet with the HMICFRS Service Liaison Officer
regularly and planning for the inspection is underway.

#### What's Working Well



- Additional focus on performance conversations and resources allocated to support managers improved completion rate.
- Face to face Service Leadership Team (SLT) engagement ongoing, feedback gathered and 'You said, we did' provided bi-monthly.
- 360-degree feedback has been rolled out to all Strategic and Middle Managers. The next group of staff began the 360-degree process in December 2024.
- Achieving response standard and focus on improving productivity.
- Improving water, wildfire and road capabilities Prevention and Response.
- Delivery of Human Resources (HR) soundbites to managers on key people processes.
- 'Banter' training with staff delivered.

#### **Challenges**

- There is a risk that the focus on recruiting into fixed term roles as part of the recruitment controls will result in a reduction of applications from more skilled applicants due to lack of perceived security of roles.
- Trade Union challenges in relation to CRMP regarding closure of Banstead Fire Station and other proposals affecting named fire stations could influence public perception of the service.
- Potential industrial relations impact due to implementation of Marauding Terrorist Attack processes.
- Ongoing reputational challenges within the sector further to continued examples of poor culture and behaviours.
- There remains gaps and uncertainties within the pension scheme arrangements, which pose challenges to operating remedy for McCloud and Matthews.
- There is a risk that national pay agreements may propose an increase above what is currently budgeted for.



#### **Progress Since Last Quarter**

- We have begun development of a new tableau cultural dashboard with the Information Lab
- Undertaken a restructure of roles within our Service Leadership Team to enable a more effective focus on response strategy and community resilience. This is a key focus as we
  move forward with the CRMP.
- VIVIDA 'In Your Shoes' EDI training has been rolled out to all staff.

#### **Plan for Next Quarter**

- · Commence Reigate and Lingfield Fire Station rebuilds.
- · Revised Risk Based Inspection Programme to assist in the targeted delivery of fire safety interactions.
- Introduction of Operational Risk post to ensure the link between, risk data, Protection and Response is maintained with risks correctly identified.
- 31Ten cultural assessment report to be published and action plan to address recommendations drafted.



# **Operational Efficiency - KPIs**

KPI	Good to be	Latest result	Target	Trend
OE1: % of schools with which the Service has successfully engaged	High	93 schools visited with 189 education lessons taught. (Sep 23 to Jul 24)	New KPI no target set	No change
OE4: Average time between receipt of emergency call by JFC and station end activation (assigned to station)	Low to Mid	Green 1m 31s (Apr 24 to Dec 24)	< 2m	Worsened
OE5: Front line appliance availability (based on average OC appliance availability)	High	Green 22 Days 18 Nights (Apr 24 to Dec 24)	=> 20 Days 16 Nights	No change
OE6: Operational Premises Surveys and Tactical Consideration Records completed	Completing all premises identified at the beginning of the year which are high or very high risk.	640 (Apr 24 to Dec 24)	=> 375	Improved



## **Customer Outcomes - KPIs**

KPI	Good to be	Latest result	Target YTD	Trend
CO1: Number of Safe and Well Visits (SAVWs) completed or submitted for audit (combination of Safe and Well and Home Fire Safety Checks	High	Red 4,949 (Apr to Dec 24)	=> 5,689	Improved
CO2: % of SAWVs to vulnerable people	High	83% (Apr to Dec 24)	=> 70%	No change
CO4: Number of Business Safe and Well Visits completed or submitted for audit	High	Green 1,479 (Apr to Dec 24)	=> 975	Improved
CO9: Response to FOI requests - % within timescale	High	Red 74% (Apr to Nov 24)	=> 90%	Worsened
CO10: Response to complaints - % within timescale	High	Red 71% (Apr to Dec 24)	=> 90%	Improved

KPI	Good to be	Latest result	Target YTD	Trend
CO11: Number of Business Safety Audits (short and standard) completed	High	Red 1,154 (Apr to Dec 24)	=> 1,670	Improved
CO12: % of accidental dwelling fires confined to room of origin	High	89 (Apr to Oct 24)	N/A	No change
CO13: % of dwelling fires where no working smoke alarm was present	Low	21 (Apr to Oct 24)	N/A	No change



# **Demand & Supply / Finance - KPIs**

KPIs	Good to be	Latest result	Target YTD	Trend
DS1: Average time of first appliance to critical incidents	Low	Green 7m 28s (Apr to Dec 24)	=<10m	No change
DS2: Average time of second appliance to critical incidents where applicable	Low	Green 11m 53s (Apr to Dec 24)	=<15m	Improved
DS3: Average time of response to other emergencies	Low	Green 7m 35s (Apr to Dec 24)	=<16m	Worsened
DS5: Number of Fire incidents attended	Low	1,330 (Apr to Dec 24)	Count only	Improved
DS6: Number of Special Service incidents attended	Low	2,883 (Apr to Dec 24)	Count only	Worsened

Good to be

Low

Low

Latest result

3,278

(Apr to Dec 24)

1,715

(Apr to Dec 24)

Target YTD

Count only

Count only

Trend	
	No change

KPIs



## **Enablers - KPIs**

	KPIs	Good to be	Latest result	Latest YTD	Trend
D	E2: Actual staff establishment versus budget	Matched	Amber 90% (Aug 24)	100%	Worsened
75 75	E4: % of declared workforce underrepresented groups (Sep 24): 17-35 age	Near FRS average for NFCC Family Group (2023)	Amber 34.0%	34.9%	No change
	E4: % of declared workforce underrepresented groups (Sep 24): Ethnic Minority	Near FRS average for NFCC Family Group (2023)	Amber 3.9%	4.1%	Improved



KPIs	Good to be	Latest result	Latest YTD	Trend
E4: % of declared workforce underrepresented groups (Sep 24): Disabled	Near FRS average for NFCC Family Group (2023)	Red 5.2%	6.1%	No change
E4: % of declared workforce underrepresented groups (Sep 24): Female	Near FRS average for NFCC Family Group (2023)	Red 17.2%	21.2 %	Worsened
E4: % of declared workforce underrepresented groups (Sep 24): L/G/B/T/Q+	Near FRS average for NFCC Family Group (2023)	Red 3.9%	4.0%	No change
E4: % of declared workforce underrepresented groups (Sep 24): Days/shifts lost to sickness absence – Year to date	Low	Amber 7.3 (Apr to Nov 24)	=<7.00	Worsened



KPIs	Good to be	Latest result	Latest YTD	Trend
E6: Days lost to sickness absence – 12 month rolling year	Low	Amber 11.4 (Dec23 to Nov 24)	=<10.5	Worsened
E7: Near-misses as a % of all workplace incidents	High	Green 79% (Apr 24 to Nov 24)	>76%	No change
E8: Days lost to injury (operational personnel)	Low	Green 38 (Apr to Nov 24)	=<122	Worsened
E9: Fitness assessments in date	High	Green 100% (Nov 24)	100%	Worsened
E10: 3 yearly medical assessments in date – attendances as % of due	High	Amber 95% (Jan to Nov 24)	100%	Worsened
E11: 8 core competencies in date	High	Green 8 out of 8 achieved target (Nov 24)	=>95%	No change

KPIs	Good to be	Latest result	Latest YTD	Trend
E12: Performance Conversation completed – whole time	High	Red 91% (Oct to Dec 24)	=100%	No change

# **Data Appendix**

	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
Page 79	CO1: Number of Safe and Well Visits completed or submitted for audit	Red 4,028 (Apr 23 to Dec 23)	Red 3,333 (Apr 24 to Sep 24)	Red 4,949 (Apr 24 to Dec 24)	Currently targeting 593 per month, England average is 579 (Home Office Fire Stats 22/23).
	CO2: % of SAWVs to vulnerable people	Green 85% (Apr 23 to Dec 23)	Green 83% (Apr 24 to Sep 24)	Geen 83% (Apr 24 to Dec 24)	No direct comparison as local definition of vulnerable. However, against national definition England average is 78% and Surrey is 92% (Home Office Fire Stats 22/23).
	CO4: Number of Business Safe and Well Visits completed or submitted for audit	Green 1,103 (Apr 23 to Dec 23)	Green 1,071 (Apr 24 to Sep 24)	Green 1,479 (Apr 24 to Dec 24)	Not comparable as other Fre and Rescue Services do not provide this service.

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	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
Page	CO6: Response to FOI requests - % within timescale	Amber 86% (Apr 23 to Nov 23)	Red 78% (Apr 24 to Aug 24)	Red 74% (Apr 24 to Nov 24)	SCC, 92% had a response within timescale (SCC FOI database 23/24).
ge 80	CO7: Response to complaints - % within timescale	Amber 83% (Apr 23 to Dec 23)	Red 67% (Apr 24 to Sep 24)	Red 71% (Apr 24 to Dec 24)	SCC, 63% of stage 1 complaints had a response within timescale (Customer Relations Snapshot 22/23).
	OE1: % of schools with which the Service has successfully engaged	61% (Sep 22 to Jul 23)	69% (Sep 23 to Jul 24)	69% (Sep 23 to Jul 24)	Not comparable.

	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
Page 81	OE4: Average time between receipt of emergency call by JFC and station end activation	Green 1m 31s (Apr 23 to Dec 23)	Green 1m 28s (Apr 24 to Sep 24)	Green 1m 31s (Apr 24 to Dec 24)	The NFCC Family Group average call handling time for dwelling fires was 1m 12s (Home Office Fire Stats 23/24). This is not directly comparable as the Surrey measure includes all 'Critical' and 'Other Emergency' mobilisations.
	OE5a: Frontline appliance availability – average Day standard achieved	Green 21 (Apr 23 to Dec 23)	Green 22 (Apr 24 to Sep 24)	Green 22 (Apr 24 to Dec 24)	Not direct comparison available.
	OE5b: Frontline appliance availability - average Night standard achieved	Green 18 (Apr 23 to Dec 23)	Green 18 (Apr 24 to Sep 24)	Green 18 (Apr 24 to Dec 24)	

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Benchmark
The target is based on the number of risk premises in Surrey so no benchmarking data available.
Not comparable.
The National Fire Chiefs

	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
Page 82	OE7: Operational Premises Surveys and Tactical Consideration Records completed	Red 754 (Apr 23 to Dec 23)	Green 421 (Apr 24 to Sep 24	Green 640 (Apr 24 to Dec 24)	The target is based on the number of risk premises in Surrey so no benchmarking data available.
	CO11: Number of Business Safety Audits (short and standard) completed	677 (Apr 23 to Dec 23)	762 (Apr 24 to Sep 24	1,154 (Apr 24 to Dec 24)	Not comparable.
	DS1: Average time of first appliance to critical incidents	Green 7m 39s (Apr 23 to Dec 23)	Green 7m 26s (Apr 24 to Sep 24)	Green 7m 28s (Apr 24 to Dec 24)	The National Fire Chiefs Council (NFCC) Family Group average response time (turnout plus drive time) for dwelling fires was 7m 49s (Home Office Fire Stats 23/24).  Note – response standards are set by individual

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	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
Page					services, there is no sector standard.
ge 83	DS2: Average time of second appliance to critical incidents where applicable	Green 13m 05s (Apr 23 to Dec 23)	Green 11m 40s (Apr 24 to Sep 24)	Green 11m 53s (Apr 24 to Dec 24)	Not comparable.
	DS3: Average time of response to other emergencies	Green 7m 40s (Apr 23 to Dec 23)	7m 33s (Apr 24 to Sep 24)	7m 35s (Apr 24 to Dec 24)	Not comparable.

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	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
84	DS5: Number of fire incidents	1,530 (Apr 23 to Dec 23)	934 (Apr 24 to Sep 24)	1,330 (Apr 24 to Dec 24)	NFCC Family Group average of 2,115 per million people and Surrey average of 1,601 (Home Office Fire Stats 23/24).
	DS6: Number of Special Service incidents	2,784 (Apr 23 to Dec 23)	1,938 (Apr 24 to Sep 24)	2,883 (Apr 24 to Dec 24)	NFCC Family Group average of 2,860 per million people and Surrey average of 3,197 (Home Office Fire Stats 23/24).
	DS7: Number of Automatic False Alarms	3,392 (Apr 23 to Dec 23)	2,193 (Apr 24 to Sep 24)	3,278 (Apr 24 to Dec 24)	NFCC Family Group average of 2,465 per million people and Surrey average of 2,555 (Home Office Fire Stats 23/24).

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	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
Pa	CO12: % of accidental dwelling fires confined to room of origin	87 (Apr 23 to Oct 23)	89 (Apr 24 to Sep 24)	89 (Apr 24 to Oct 24)	Not comparable.
Page 85	CO13: % of dwelling fires where no working smoke alarm was present	18 (Apr 23 to Oct 23)	18 (Apr 24 to Sep 24)	21 (Apr 24 to Oct 24)	Not comparable.

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	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
Page 86	DS1: Average time of first appliance to critical incidents	Green 7m 39s (Apr 23 to Dec 23)	Green 7m 26s (Apr 24 to Sep 24)	Green 7m 28s (Apr 24 to Dec 24)	The NFCC Family Group average response time (turnout plus drive time) for dwelling fires was 7m 49s (Home Office Fire Stats 23/24).  Note – response standards are set by individual services, there is no sector standard.
	DS2: Average time of second appliance to critical incidents where applicable	13m 05s (Apr 23 to Dec 23)	11m 40s (Apr 24 to Sep 24)	11m 53s (Apr 24 to Dec 24)	Not comparable.
	DS3: Average time of response to other emergencies	Green 7m 40s (Apr 23 to Dec 23)	Green 7m 33s (Apr 24 to Sep 24)	Green 7m 35s (Apr 24 to Dec 24)	Not comparable.

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	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
	DS5: Number of fire incidents	1,530 (Apr 23 to Dec 23)	934 (Apr 24 to Sep 24)	1,330 (Apr 24 to Dec 24)	NFCC Family Group average of 2,115 per million people and Surrey average of 1,601 (Home Office Fire Stats 23/24).
Page 87	DS6: Number of Special Service incidents	2,784 (Apr 23 to Dec 23)	1,938 (Apr 24 to Sep 24)	2,883 (Apr 24 to Dec 24)	NFCC Family Group average of 2,860 per million people and Surrey average of 3,197 (Home Office Fire Stats 23/24).
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	CO12: % of accidental dwelling fires confined to room of origin	87 (Apr 23 to Oct 23)	89 (Apr 24 to Sep 24)	89 (Apr 24 to Oct 24)	Not comparable.
Page 88	CO13: % of dwelling fires where no working smoke alarm was present	18 (Apr 23 to Oct 23)	18 (Apr 24 to Sep 24)	21 (Apr 24 to Oct 24)	Not comparable.



	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
	E4: % of declared workforce from underrepresented groups - Disabled	Green 5.9% (Sep 23)	Green 5.2% (Sep 24)	Green 5.2% (Sep 24)	23//24 NFCC Family Group Fire and Rescue Service Average = 21.2%
Page 90	E4: % of declared workforce from underrepresented groups - Female	Red 18.1% (Sep 23)	Red 17.2% (Sep 24)	Red 17.2% (Sep 24)	23//24 English Fire and Rescue Service Average = 4.9% (NFCC not available)
	E4: % of declared workforce from underrepresented groups - L/G/B/T/Q+	Red 3.3% (Sep 23)	Red 3.9% (Sep 24)	Red 3.9% (Sep 24)	



KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
E5: Days/shifts lost to sickness absence – Year to date	Red 7.8 (Apr 23 to Nov 23)	Green 5.2 (Apr 24 to Sep 24)	Amber 7.3 (Apr 24 to Nov 24)	England average was 11.7, and Surrey 11.8 (Cleveland NHR 23/24).
E6: Days lost to sickness absence – 12 month rolling year	Amber 12.6 (Dec 22 to Nov 23)	Amber 11.1 (Oct 23 to Sep 24)	Amber 11.4 (Dec 23 to Nov 24)	England average was 11.7, and Surrey 11.8 (Cleveland NHR 23/24).
E7: Near-misses as a % of all workplace incidents	Amber 74% (Apr 23 to Nov 23)	Green 79% (Apr 24 to Sep 24)	Green 79% (Apr 24 to Nov 24)	There is no direct benchmark. The Inspectorate provide benchmarking on RIDDOR injuries per 100 FTE. In 2022/23 Surrey was in the highest quartile.



	KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
	E8: Days lost to injury (operational personnel)	Red 30 (Apr 23 to Nov 23)	Green 0 (Apr 24 to Sep 24)	Green 38 (Apr 24 to Nov 24)	There is no direct benchmark. The Inspectorate provide benchmarking on RIDDOR injuries per 100 FTE. In 2022/23 Surrey was in the highest quartile.
D 20 00	E9: Fitness assessments in date	Amber 97% (Nov 23)	Amber 97% (Sep 24)	Green 100% (Nov 24)	Surrey was in the second-best quartile for fitness tests completed (HMICFRS Data Analysis 22/23).
	E10: 3 yearly medical assessments in date – attendances as % of those due	Amber 93% (Jan 23 to Nov 23)	Amber 99% (Jan 24 to Sep 24)	Amber 95% (Jan 24 to Nov 24)	Not comparable.
	E11: 8 core competencies in date	Green 8 out of 8 achieved target (Nov 23)	Green 8 out of 8 achieved target (Sep 24)	Green 8 out of 8 achieved target (Nov 24)	Not comparable.

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KPIs	Q3 23/24 or equivalent of Latest Data	Q2 24/25	Q3 24/25 or Latest Data	Benchmark
E12: Performance Conversations completed – whole time	Red 91% (Jul – Sep 23)	N/A	Red 91% (Oct - Dec 24)	

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