

Project: Prevention Improvement Plan (Appendix 1)



Lead Member: Project Sponsor: Project Manager:		Cllr Simon Rouse AC Simon Tuffley Joanne Cook		Project Objectives: Following the Prevention Evaluation, a three-year plan is in place to develop Prevention within the service: Effective prevention strategy, processes and systems in place facilitating effective delivery of preventative information across the community				Overall RAG 	
Strategy, vision and leadership		Intelligence		Management of processes, systems and planning incl. audit		Coordination & communication of operations		Delivery of operations	

Summary – Period dated: June – August 2022

Key Activities

- Incident upload from Vision into PRMS reviewed against all incident types that should pull through. Although assured that all relevant incidents were being received with the exception of ‘small hazmat’, the system upgrade at TVFCS caused an issue with incident pull through that has not been able to be resolved. This has impacted on all follow up activity to incidents since that date, with measures necessary to redress the backlog when it is able to be accessed.
- Recruitment has reduced the vacancies within the Central Prevention team to just one. However, as onboarding to competent takes four to six months, this does not have an immediate impact on delivery numbers.
- Firesetter Intervention Scheme (FIS) delivery model review of scoring and supervision moved to delayed due to this work being undertaken by the NFCC Firesetter Intervention Scheme core group at a national level.
- Scoring review for Home Fire Safety Visit assessment linked to research on risk of fire fatality or serious injury drafted and tested prior to consultation circulation.

Priorities for Next Period: September - November 2022

Progress

- Prevention strategy through the next stages of the consultation process. It is scheduled for final stage of approval 12 October.
- Firesetter intervention scoring review in line with the outcomes of the National Fire Chief’s Council (NFCC) core group.
- Station objectives process to include dashboard reporting capability, evaluation form and service wide objective area.

Complete

- Initial set of Key Performance Indicators (KPIs) for Prevention identified with information summarised for Service KPIs.
- Review of referral processes to increase protection of sensitive information submitted by partner agencies, facilitate external reporting (Home Office/ HMICFRS) and uplift of information to the National Data Hub.

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Summary – Period dated: June - August 2022				
Key Activities (continued)	Key Milestones		Forecast/ Actual	RAG
	Effective system for dealing with referrals implemented, prioritising those with highest level of risk		October 2022	
	Approval of revised Prevention Strategy		October 2022	
	An effective system defining levels of risk in the community		October 2022	
	Evidence in place to support removal of Prevention Cause for Concern		October 2022	
Change Request Log:				
NA		NA		NA

Risk/ Issue	RAG	Description	Mitigating Action	Next Action
Enter top three highest risks to the plan				
Staff capacity		Failure to recruit into vacant roles impacting on ability of Prevention team to conduct core day to day activity as well as progress actions within the Prevention Improvement Plan	Use of operational staff through alternate duties business cases to alleviate capacity issues	1 role readvertised for the fourth time.
Prioritisation of visits by risk level (risk stratification)		Capacity of 3 rd party company (Active Informatics) to make changes to the Prevention side of the Premises Risk Management System whilst the migration to 365 and development of the Site Specific Risk Information (SSRI) area is underway delays ability to progress areas of work required for prevention including the prioritisation of visits by risk level	If scoring within the system can be adjusted, threshold levels (bands) may have to be managed outside of the system Work on recording all visits in PRMS commenced whilst awaiting SSRI completion but delivery date is dependent on Active's ability to provide development time	Once migration of PRMS to 365 is complete, development time is needed to enable risk stratification to be applied within the system.
Collaborative working – staff capacity		Staff retention in key departments and conflicting priorities within the organisation impacting upon Prevention team's ability to deliver against the recommendations	Regular liaison with relevant department leads to ensure early warning of issues that may impact upon progress against the cause for concern areas or the wider prevention improvement plan	Continue regular liaison with other dept leads

Appendix 2: Prevention Improvement Plan dashboard update – July 2022



Prevention Improvement Plan - Progress Dashboard

	Total recommendation	Complete	On track	On hold/delayed	Not started
Intelligence	15	2	8	5	0
Management of processes, systems and planning, including audit	15	0	13	1	1
Coordination and communication of operations	13	0	11	1	1
Delivery of operations	10	3	7	0	0
Grand totals	60	7	39	12	2

Appendix 3: Prevention Improvement Plan dashboard update – August 2022



Prevention Improvement Plan - Progress Dashboard

	Total recommendations	Complete	On track	On hold/delayed	Not started
Intelligence	15	2	7	6	0
Management of processes, systems and planning, including audit	15	0	11	3	1
Coordination and communication of operations	13	0	9	3	1
Delivery of operations	10	3	6	1	0
Grand totals	60	7	33	18	2