

Appendix 1 to Home Fire Safety Visits by Operational Crews

Essex County Fire and Rescue Service
Home Safety Steering Group
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Essex County
Fire & Rescue Service

Purpose	To consider lessons learned from the Home Safety Visit Pilot in the North East, and outline the plan for Operational Personnel to deliver Home Safety Visits across the rest of Essex.
Paper	Stage 2: Home Safety Visits Project
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EXECUTIVE SUMMARY

This paper outlines the lessons that have been learned from the pilot process that was Stage One of the plan to implement operational personnel delivering Home Safety Visits. It then goes on to outline the plan for the delivery of Stage Two of the process.

Overall, the pilot has been a success, and has identified multiple improvements that can be made to the existing process. These improvements are discussed, and recommended actions outlined in section 2 of this paper.

Recommendation(s):

1. That the plan to implement Stage Two is agreed, inclusive of the actions listed throughout this paper, and summarised in section 6.

1. Background

When the Home Safety Steering Group agreed the plan for re-introducing the delivery of Home Safety Visits (HSVs) by operational personnel, it approved a two-stage plan.

Stage One, was the delivery of a six-month pilot in the North East Group, designed to identify the most appropriate processes, training, and communications for operational personnel delivering HSVs.

Stage Two was intended to take the learning and recommendations from Stage One, and use these to enable operational personnel across the rest of Essex to deliver HSVs.

This paper outlines what has been learned from the pilot process through feedback gathered during the pilot, and through a questionnaire emailed to Crew Managers, Watch Managers, and Station Managers at the end of the pilot. It also set out the next steps required to implement Stage Two.

2. Progress Against the Agreed Pilot Activities

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As part of the process to deliver the pilot in the North East, the following actions/activities were agreed to be undertaken (1-9 below). These were originally outlined and agreed in the 'Project Proposal: Operational Personnel Delivering Home Safety Visits' paper, dated 13.03.2019 and agreed by the Home Safety Steering Group.

Progress against each action is outlined below in blue italics, as well as any recommended actions required to progress with Stage Two. Feedback received in during the pilot, and the post pilot questionnaire have been considered in forming the recommended actions below.

1. "Develop a training package (e-learning) for Operational Personnel who will be delivering Home Safety Visits"

A PowerPoint was developed which outlined how to conduct a Home Safety Visit. It was accompanied by a Key Information Fact Sheet, which explained how to complete the administrative elements of the Home Safety Visit and answered some frequently asked questions. These documents were saved in the 'Home Safety HQ' Folder on the W Drive.

Feedback received during the pilot, and in the post-pilot questionnaire (details outlined in section 2 of this paper), has indicated that whilst the PowerPoint was informative and the content was sufficient, some people felt that there was a need for this to be e-learning, whilst others felt that training needed to be available in a face-to-face format.

AP1: *The Home Safety Team to convert the PowerPoint to e-Learning available on ELITE*

AP2: *The Home Safety Team to explore the possibility of face to face delivery of training, possibly utilising capacity in the Community Risk Teams.*

2. "Purchase and provide the equipment needed to complete Home Safety Visits, along with an audit process for equipment"

Full equipment was provided to operational personnel to carry out the visit (list of equipment provided at Appendix A). This consisted of a single HSV kit per station.

Initially, each station was provided with a drill, for use when fitting alarms in properties with concrete ceilings. Challenge was received that operational personnel had not been adequately trained in the use of the drill, and therefore, following consultation with FBU representatives, Health and Safety, and the Group Manager, it was withdrawn from use.

After considerable work by Station Manager Pete Neal, it was agreed that the stepladder required to complete a Home Safety Visit could be stored using the gantry system on top of fire appliances.

Overall, feedback on the equipment provided has been that it was sufficient to carry out the role.

AP3: *The home Safety Team should supply the same equipment to operational personnel in the rest of the county to enable Stage Two to take place, but not the drill.*

AP4: *The Home Safety Team should supply each station with a Carbon Monoxide Alarm and guidance relating to its use.*

3. "Purchase and supply enough smoke detectors to enable visits to take place"

There were no issues with smoke detector supply system and all stations were kept supplied with enough detectors to complete their visits.

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4. “Develop a simple process to ensure that the Home Safety Information Team can allocate some Home Safety Visits to Stations for completion as well as allow Stations to generate their own Home Safety Visits”

Initially, the Home Safety Team allocated as many visits as possible (within the agreed number a month) to each station at the start of each calendar month. The allocated visits were expected to be completed by the end of each calendar month. No visits were to be added at any other time.

The benefits of the monthly allocation process is the ease with which it can be controlled and monitored, however, due to the practicalities of the booking process, it has been agreed that this system is not as efficient or effective as possible. Using the monthly system means that if a referral is received mid-way through the month, which is suitable for operational personnel, it cannot be added to a station’s allocation until the beginning of the next month, thereby slowing down the process and sometimes significantly delaying the date of the visit.

It has since been suggested that a system is developed which enables the Home Safety Information Team to allocate visits to Stations as they are referred to the Home Safety Service. The Information Team would need to maintain a close record of how many visits each station has in their inbox, in order to not exceed the maximum agreed allocable number per month.

AP5: *The Home Safety Team to produce a new process document that outlines how the Home Safety Information Team will allocate visits to Stations as they are referred to the service. This will enable a better service for the public, and a more steady flow of visits for operational personnel.*

5. “Identify a reasonable number of visits that stations can be expected to deliver each month”

In consultation with Station Managers, it was decided that a reasonable number of visits per watch, per month, on a Whole Time or Day Crewed Station was 8. For On-Call Stations, a reasonable number of visits was agreed to be 5 per month.

Anecdotally, and in the post-pilot questionnaire, some operational personnel suggested that more visits could be completed each month, however, there is not enough evidence available to justify changing the allocable visit limit at this stage.

6. “Develop processes and procedures for operational personnel carrying out Home Safety Visits”

Processes were developed throughout the pilot, and were stored in the Home Safety HQ folder, located on the W Drive.

One challenge to the process that is not covered elsewhere in this paper, relates to the process for operational firefighters telephoning a resident, and then detailing the amount of times a call to a resident has been made. At present, there is nowhere on the FB355 for this information to be recorded.

It has been suggested that in order to tighten up this part of the process, a field is added to the FB355, or to a new form, which allows this information to be recorded.

AP6: *The capability to record the details of attempts by operational personnel to book Home Safety Visits should be included at an appropriate point in the process, likely on the form used to record the HSV as having taken place.*

7. “Develop a means of recording Home Safety Visits on CRM that are generated and conducted by stations without having been processed by the Home Safety Information Team first

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- a. This may involve the development of a new, simplified form for use by operational personnel and Volunteers, and the removal of the FB355 from general use
- b. This will need to consider impact on administrative staff and whether or not operational personnel can have some form of direct entry to CRM”

Following consultation with IT and CRM experts, it is not possible to give operational personnel direct access to CRM in order to create their own visits at the current time. Therefore, the most effective means of creating a HSV on the system for teams other than the Safe and Well Team, is still to complete a paper form, and send this to the Community Safety Administration Team for inputting.

The possibility of using a Microsoft Form to create a case in CRM is still being explored, and whilst it may come to fruition, it will not be completed in time for the implementation of Stage Two.

Significant feedback was received during the pilot and in the post-pilot questionnaire, that challenged the need for a single form for all visits undertaken by ECFRS. The current FB355 is used for all ECFRS personnel irrespective of role, and therefore, includes questions that would be addressed by a Safe and Well Officer, but not a firefighter or volunteer.

Feedback from operational personnel stated that they were uncomfortable discussing topics such as fraud, and mental health. Despite reassurances that these topics were not expected to be discussed during a Home Safety Visit, and this guidance being made clear in supporting documentation and the training, this remained a repeated concern throughout the pilot.

It has been suggested that a new form is created which can be used by all ECFRS employees who are not in the Safe and Well Officer Team. This form should only request information relevant to a Home Safety Visit, and omit all information specific to a Safe and Well Visit.

AP7: *The Home Safety Team to issue a new form, specific to operational personnel, which only collects information relevant to a standard Home Safety Visit.*

AP8: *The Home Safety Team to continue to explore the possibility of a digital process for completing a Home Safety Visit*

8. “Develop a monitoring and evaluation method to review the pilot and consider its roll out to the rest of the county”

Operational personnel in the pilot area have been consulted on whether or not they would support some form of evaluation of the visit that they conduct as part of the post-pilot questionnaire. The responses received have been largely favourable, but not entirely.

Whilst it is accepted that evaluation can create a feeling of nervousness or unease for those whose work is being evaluated, it is a key part of understanding the effectiveness of ECFRS prevention activity.

AP9: *The Home Safety Team should amend the Home Safety Booklet to enable a tear out evaluation form to be provided along with a free post envelope. This form can be completed and posted back to ECFRS with feedback on the visit experience if the member of the public wishes to do so.*

9. “Revise the Home Safety Risk Assessment to frame the visits for Fire Service Operational Personnel”

This action was completed and undertaken by the Home Safety Team before the pilot commenced.

3. The Post Pilot Questionnaire

In total, 6 people responded to a post-pilot questionnaire issued as the pilot was drawing to a close. This was sent to all Watch Managers, Crew Managers and Station Managers in the North East Group.

The responses came from three Crew Managers, two Watch Managers and one Station Manager and have been considered and built into the implementation plan for Stage Two, outlined in the next section.

Due to the low level of response, it is challenging to ascertain how representative the feedback provided is of operational personnel across the North East Group. Nevertheless, there is feedback in the questionnaire responses that reflects feedback collated during the pilot.

It is proposed, that this questionnaire is reviewed and repeated on an annual basis and made available to all operational personnel. This frequency will enable the Home Safety Team to continuously review and improve the process of delivering Home Safety Visits.

It also proposed that as a one-off arrangement, this survey is re-issued to all operational personnel six months after the introduction of HSVs to the rest of the county, and then annually thereafter.

A more detailed summary of the feedback can be viewed on request, and a link to a summary of the feedback is provided at Appendix B of this paper.

AP10 – The Home Safety Team to re-issue the feedback questionnaire six months after commencing Stage Two, and annually thereafter.

4. Implementation Plan: Stage Two

1. The Project Team should produce a document outlining the new process for allocating Home Safety Visits to stations and what support the Home Safety Team, and other Community Safety teams will provide to operational personnel.

This document should be presented to Group Managers, and once agreed, used as the basis for introducing Home Safety Visit delivery to the operational personnel across the rest of Essex.

The document should outline how each of the recommended actions outlined in section 5 of this paper have been addressed.

The document should include a communications plan, agreed by and developed with the Communications and Media Team.

Assuming Group Managers and relevant stakeholders are satisfied with the new process and detail in the document, operational personnel should begin delivering Home Safety Visits as soon as possible, and no later than 01.12.2019.

5. Actions Required

Ref	Action	Owner
AP1	The Home Safety Team to convert the PowerPoint to e-Learning available on ELITE	
AP2	The Home Safety Team to explore the possibility of face-to-face delivery of training, possibly utilising capacity in the Community Risk Teams.	

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AP3	The home Safety Team should supply the same equipment to operational personnel in the rest of the county to enable Stage Two to take place, but not the drill.	
AP4	The Home Safety Team should supply each station with a Carbon Monoxide Alarm and guidance relating to its use.	
AP5	The Home Safety Team to produce a new process document that outlines how the Home Safety Information Team will allocate visits to Stations <u>as they are referred to the service</u> . This will enable a better service for the public, and a more steady flow of visits for operational personnel	
AP6	The capability to record the details of attempts by operational personnel to book Home Safety Visits should be include at an appropriate point in the process, likely on the form used to record the HSV as having taken place.	
AP7	The Home Safety Team to issue a new form, specific to operational personnel, which only collects information relevant to a standard Home Safety Visit.	
AP8	The Home Safety Team to continue to explore the possibility of digital process for completing a Home Safety Visit	
AP9	The Home Safety Team should amend the Home Safety Booklet to enable a tear our evaluation form to be provided along with a free post envelope. This form can be completed and posted back to ECFRS with feedback on the visit experience if the member of the public wishes to do so.	
AP10	The Home Safety Team to re-issue the feedback questionnaire six months after commencing Stage 2, and annually thereafter.	
AP11	The Home Safety Team and Project Team (AM, PN and KM) to produce a paper for Group Managers explaining the roll out process and seeking agreement to commence as explained in section 5 of this paper.	

If you have any queries, please contact:	
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Appendix A

Equipment List		
No.	Safe and Well Officer	Firefighter
1	Ryobi Tool Bag	Ryobi Tool Bag
2	Bosch Electric Screwdriver	Bosch Electric Screwdriver

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3	1 x flat-head screwdriver	1 x flat-head screwdriver
4	1 x cross-head screwdriver	1 x cross-head screwdriver
5	1 x bradde	1 x bradde
6	Screwdriver bits	Electric Screwdriver bits
7	Step Ladder (two step)	Ladder (to be determined)
8	Sticky pads (concrete ceilings)	Sticky pads for concrete ceilings
9	Hand sanitiser	Hand sanitiser
10	Hammer Drill (for concrete ceilings)	
11	Safety Glasses	Safety Glasses
12	Ear defenders	Ear Defenders
13	Intellisensor Pro (wire/pipe detector)	Intellisensor Pro (wire/pipe detector)
14	Wearable CO Detector	
15	Dust Mask	Dust Mask
16	Plastic Shoe Covers	Plastic Shoe Covers
17	First Aid Kit	Wearable CO Detector
18	Mobile Phone	
19	Service Ipad	

Appendix B

Link to feedback summary:

<https://forms.office.com/Pages/AnalysisPage.aspx?id=e70068RAF0uCXF3GksGliLStefuXe6dAoxp-7rtj0sJUMVIyTIRPUTNCMDdDODVQnkYxTTNINUG3NS4u&AnalyzerToken=sPxlcumJWO9eQBicixSDOyFXPMXSm01w>