



NOTTINGHAMSHIRE
Fire & Rescue Service
Creating Safer Communities

Nottinghamshire and City of Nottingham
Fire and Rescue Authority
Community Safety Committee

SAFE AND WELL VISIT REVIEW OUTCOMES

Report of the Chief Fire Officer

Date: 11 June 2021

Purpose of Report:

To inform Members of the process to improve the effectiveness and efficiency of Safe & Well Visits and ensure that the Service has an inclusive approach to supporting those in greatest need.

Recommendations:

That Members note the contents of this report.

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1. BACKGROUND

- 1.1 In response to the National Fire Chiefs Council's recognition that Fire and Rescue Services could work more closely with partner organisations to identify wider vulnerabilities and embrace the 'Making Every Contact Count' approach to behaviour change, Nottinghamshire Fire and Rescue Service (NFRS) fully introduced its Safe & Well Visit (SWV) in October 2018.
- 1.2 The SWV broadened the scope of the Service's traditional Home Safety Check by introducing an analysis of additional factors that affect a person's health and make them more vulnerable to fire. It also introduced automated onward referral pathways to organisations that can provide additional support to recipients that will further reduce their risk of fire and improve their wellbeing.
- 1.3 Since October 2018 NFRS has delivered more than 15,000 SWVs. This report reflects on achievements to date and considers improvements that can be made to improve effectiveness and efficiency and ensure that the Service has an inclusive approach to supporting those in greatest need.

2. REPORT

- 2.1 During its 2019 inspection, Her Majesty's Inspectorate of Constabularies and Fire & Rescue Services (HMICFRS) concluded that in 2017/18 NFRS completed 3.3 per SWV's per 1,000 of the population, with a national average of 10 per 1,000 population.
- 2.2 The Service set a target to complete 6,000 SWVs for 2019/20, however it actually completed 7,754 (6.7 per 1,000 population). This represented an 84% increase in productivity when compared to 2018/19.
- 2.3 In 2020/21 the Service set a target of 9000 SWV's, however, due to Covid restrictions being in place the Service were only able to complete 5890. The Service now expects to deliver 12,000 SWV's for 2021-22, equating to 10.3 per 1,000 population, with further ambitions to increase this figure during the next Strategic Plan for 2022.
- 2.4 In the Safer Communities Strategy (2019-2022) the Service made a commitment to deliver SWVs to the most vulnerable in our communities and has set a target of delivering 80% to those who are identified as being at least at medium risk of fire. To achieve this quality measure, the mechanisms by which the Service identifies SWVs (Partner Referral, Public Referral and Direct Engagement) will also be reviewed.
- 2.5 Service resources will continue to support and upskill referral partner's knowledge of the Service's risk profile have included the introduction of the CHARLIE risk assessment matrix (see Appendix A) and accompanying e-learning package, the development of the online Partner Referral System

- 2.6 Since April 2020, the 80% quality target for SWVs referred by partners has been monitored as part of the Services approach to its performance framework
- 2.7 Data-led SWV's are targeted at individual households that are identified as being at an elevated risk via the Service's Household Risk Stratification Index (HRSI). Triangulating information from the Service database, partner organisations and the Incident Reporting System alongside local knowledge and the HRSI to identify higher risk localities for a sustained period of SWV activity.
- 2.8 Whilst work to improve Direct Engagement SWV targeting is ongoing, the Service is currently working to validate that 80% are being delivered to those at medium risk or above as risk levels are only captured post-intervention. During 2021/22 the Service will investigate whether a means of capturing a pre-intervention risk level can be introduced for Direct Engagement SWVs so that it can be confident that the most vulnerable are being reached.
- 2.9 At the heart of the Service's ability to identify vulnerable persons and target SWVs is the CHARLIE Profile. Since its development in 2016, the profile has been regularly reviewed internally to assess its continuing relevance when applied to persons involved in significant or fatal fires. It has also been expanded into the Risk Assessment Matrix (Appendix A) which is completed by referring partners and delivery teams to facilitate quality referrals and appropriate intervention.
- 2.10 To ensure the continued relevance of the CHARLIE Profile, Nottingham Trent University, as part of a wider project to assess the social and economic value of the Service's SWVs, is undertaking a peer-reviewed assessment of its validity in identifying those who are most at risk of death or serious injury from fire.
- 2.11 Whilst 96% of respondents to the 2020 SWV Customer Survey did not think the quality of the service they received could have been improved, there are a number of relatively 'quick wins' that will be introduced in 2021/22:
- Further development of Quality Assurance processes to ensure that there is consistency of delivery and record-keeping across all delivery teams.
 - A review of the '3-strikes' process to ensure that every effort is being made by all delivery teams to complete referred SWVs on every occasion.
 - The development of a suite of mandatory e-learning packages (e.g. CHARLIE risk awareness, communication skills, report writing etc.) to upskill delivery teams.
 - The introduction of more robust KPIs related to the time it takes to deliver a SWV once a referral is received.

- Development of the Services database to have a dedicated section to support the High-Risk Review Group that has been established to review, evaluate and assure all High-Risk cases.
 - The embedding of Prevention, Protection and Fire Investigation Case Clinics to provide a platform where the unmet needs of service-users can be identified, and appropriate interventions can be planned at a multi-agency level.
- 2.12 A lesson from measures put in place during COVID-19 restrictions relates to the number of SWV questions that can be asked prior to the visit taking place. Introducing Pre-visit questions as part of the SWV process in 2021/22 will reduce the time it takes a delivery team to complete a physical visit.
- 2.13 The Service budgets £100k for smoke alarms and £52k for safety equipment each year. In 2019/20 the Service spent £95,475 on smoke alarms and £53,735 on safety equipment (this represented increases of 32.5% and 15.4% respectively when compared to 2018/19).
- 2.14 The delivery of more SWV's will drive the Services spend on smoke alarms and safety equipment, the Service therefore predicts that the target of 12,000 SWVs in 2021/22 is likely to increase spending on smoke alarms to approximately £130k and safety equipment to approximately £65k (based on increases in spending between 2018/19 and 2019/20).
- 2.15 In 2019/20 54.25% of SWVs delivered by the Service were received by over 65s (despite only 18.3% of the City and County's population being within this age grouping). In the same year, 32.7% of SWVs delivered by the Service were to those that considered themselves to have a disability, this compared favourably to the national average of 29%.
- 2.16 A revised Equality Impact Assessment (EIA) has been completed to reconsider both the SWV procedure and its application having now been in place for 2 years (See Appendix B).
- 2.17 The revised EIA found the Service's SWV delivery to have Positive (Age and Disability), Neutral (Marriage & Civil Partnership, Race, Sex and Pregnancy & Maternity) and Unknown (Gender Reassignment, Sexual Orientation and Religion & Belief) affects overall. Whilst it is encouraging that none of the protected characteristics were found to be being negatively affected, there are areas where improvements can be made.
- 2.18 An improvement Action Plan for the Revised SWV EIA can be seen in Appendix C. Areas for improvement include better targeting of specific communities, the provision of the Safe & Well Guide in more accessible formats, alignment of profiling categories with census data and amendment to promotional material.

3. FINANCIAL IMPLICATIONS

- 3.1 There are a number of financial implications highlighted within this report, driven from the planned increases in productivity and delivery of SWV's to address risk in communities. The future demands will be presented as part of the Services existing business and budget planning framework and revised Safer Communities Strategy 2022/25.
- 3.2 The monitoring of the financial implications will continue to be presented for scrutiny by Members of the Finance and Resources Committee.

4. HUMAN RESOURCES AND LEARNING AND DEVELOPMENT IMPLICATIONS

There are some implications for the L&D e-learning team resulting from the recommendation to create a suite of mandatory training packages to upskill Safe and Well Visit delivery teams (as explained in 2.11 and the EIA Action Plan in Appendix C).

5. EQUALITIES IMPLICATIONS

An Equality Impact Assessment has been undertaken and the implications can be seen in Appendix B.

6. CRIME AND DISORDER IMPLICATIONS

There are no crime and disorder implications resulting from this review.

7. LEGAL IMPLICATIONS

There are no legal implications resulting from this review.

8. RISK MANAGEMENT IMPLICATIONS

There are no risk management implications resulting from this review.

9. COLLABORATION IMPLICATIONS

The Safe and Well Visit process involves collaboration with numerous Referral Partners.

10. RECOMMENDATIONS

That Members note the contents of this report

11. BACKGROUND PAPERS FOR INSPECTION (OTHER THAN PUBLISHED DOCUMENTS)

None.

John Buckley
CHIEF FIRE OFFICER

APPENDIX A

CHARLIE Risk Assessment Matrix

Prem ID (if known) Or Address:	Circle as appropriate for each CHARLIE P descriptor. Add the score and place total in bottom box. Please scan and send to Admin for addition to CFRMIS if not completed on tablet.	Date: Service No: Stn No: Job No:				
Score	Score	1	2	4	8	10
	Descriptor	Rare	Unlikely	Possible	Likely	Almost certain
C	Care and support needs	No care or support needs	In receipt of comprehensive care and support package	Support in place but not deemed adequate	No support in place but concerns for health and welfare	No support in place but significant concerns for health and welfare
	Cooking	No concerns	Meal/drink preparation completed by others	Prepares own food and drink but concerns identified by others or regularly uses hot oil	Preparing own food and drink but repeated episodes regarding safety	Actual incident requiring support of others prior to safe and well visit
H	Hoarding	1-2 CIR	3 CIR	4-5 CIR	6-7 CIR	8+ CIR
A	Alcohol use	Not used	Signs of alcohol use no concerns	Signs of alcohol use some concerns	Signs of alcohol being used Query dependency?	Concerns alcohol use may impact upon fire safety, including escape
R	Reduced mobility	Independently mobile	Walks with support	Requires mobility aid or history of falls e.g. stick or frame	Unable to walk e.g. wheelchair user	Cared for in bed
L	Lives alone	Lives with others	Lives alone but fully independent	Lives alone with daily support	Lives alone with occasional visitors or social contact	Lives alone – no visitors or social contact
I	Inappropriate smoking	Non-smoker	Occasional smoker aware of safety	Regular smoker aware of safety	Occasional smoker unaware of safety	Regular smoker – unsafe smoking practices
E	Elderly	Under 40	41-50	51-64	65-79	80+
	Electrical	No concerns	Some risks identified but resolved during visit	Risks identified, client to resolve	Risks identified and client would need assistance to resolve	Poor understanding and dangerous use of electrics
P	Previous signs of fire	No signs	Evidence of historic burn marks	Evidence of recent near miss fires – would respond to alarm	Evidence of recent near miss fires – would not respond to alarm	Previous fire within the last 12 months

Score 1-20: LOW RISK	Score 21-34: MEDIUM RISK	Score 35+: HIGH RISK	TOTAL SCORE:
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Safe & Well Visit Revised Initial Equality Impact Assessment (Feb 21)

Title of policy, function, theme or service: Safe & Well Procedure (PROC 2137). This is a revised EIA to re-consider the SWV procedure and its application now that we have passed the two-year anniversary of the SWV service being fully launched in October 2018.	
Name of employee(s) completing assessment: GM Andy Macey, DEPOs Jag Hayer & Sally Savage, CM Alastair Bramley-Little	Department and section: Prevention, Protection & Fire Investigation - Prevention
1. State the purpose and aims of the policy or service and who will be responsible for implementing it.	
<p>The Safe & Well Procedure (PROC 2137) sets out the fundamental principles behind an effective Safe & Well Visit (SWV). An effective SWV aims to:</p> <ul style="list-style-type: none"> • Reduce the number of fire related casualties • Reduce the number of accidental dwelling fires • Direct resources to where and when they are most needed, in the most effective and efficient way • Utilise the Making Every Contact Count (MECC) approach by streamlining internal referral and signposting pathways to ensure standardisation throughout the Service • Contribute to the wider health prevention agenda to reduce the pressure on acute services and associated budgets • Signpost to specialist advice and support to further reduce the underlying risks contributing to making a household at risk of fire. <p>SWVs are delivered by Response Crews and specialist members of the Prevention Team. AM Prevention, Protection and Fire Investigation (PPFI) is ultimately responsible for the effective application of the SWV Procedure</p>	

2. Please indicate below if the affect of the policy, function, theme or service will be positive, negative, neutral or unknown.

	Age	Disability	Marriage and civil partnership	Gender Reassignment	Race	Sexual Orientation	Religion and Belief	Sex	Pregnancy and Maternity
Employees	Neutral	Neutral	Neutral	Neutral	Neutral	Neutral	Neutral	Neutral	Neutral
Public	Positive	Positive	Neutral	Unknown	Neutral	Unknown	Unknown	Neutral	Neutral

3. Please explain the impact you have identified.

For Employees impacts for each of the protected characteristics highlighted above are Neutral.

Members of the public who are recipients of a SWV are identified through partner referral, self-referral and intelligence-led initiatives. A target under the Service Delivery Evaluation & Quality Assurance Group (SDEAG) Framework is that at least 80% of SWVs are received by those who are assessed to be at least at Medium Risk of fire and therefore amongst the most vulnerable members of our communities. An individual's 'risk of fire' is assessed against the 10 characteristics of the Service's CHARLIE profile risk matrix:

- Care and Support needs
- Cooking
- Hoarding
- Alcohol Use
- Reduced mobility
- Lives alone
- Inappropriate Smoking
- Elderly

- Electrical
- Previous Signs of fire

The detailed risk matrix can be seen in Appendix A. It is accepted that it is proportionate for the Service to discriminate by not providing a SWV to members of the public who are not assessed as being at least at Medium Risk of fire.

Age (Positive Impact):

Since October 2018, NFRS has delivered in excess of 15,000 SWVs. Of these 53.8% have been delivered to over 65s. This is a result of the CHARLIE profile identifying 'elderly' as one of its risk characteristics. Across the City and County 18.3% of the population are over 65 (*source: www.nottinghamshireinsight.org.uk and www.nottinghaminsight.org.uk*) so delivery in this area is very favourable.

Nationally in 2019/20, 55.2% of 'home fire safety checks' were delivered to over 65s (*source: Home Office Statistical Bulletin 24/20*). Under the SDEAG framework, the national average is our target and our performance (54.25% in the comparable 2019/20) is well within tolerable levels.

Disability (Positive Impact):

Since October 2018, 37.6% of SWVs have been delivered to members of the public with a disability. This is a direct result of the CHARLIE profile identifying 'care & support needs' and 'reduced mobility' as key risk characteristics. In Nottinghamshire approximately 12.6% of adults (18+) identify as having a moderate to severe physical or learning disability (*source: Nottinghamshire JSNA: The People of Nottinghamshire 2017*). In Nottingham City, 9.1% of the population have a long-term health problem or disability which limits their daily activities a lot and a further 9.1% are limited a little (*source: Nottingham City Council, Census 2011 – Disability, Health and Carers*).

Nationally in 2019/20, 29% of 'home fire safety checks' were delivered to persons with a disability (*source: Home Office Statistical Bulletin 24/20*). NFRS outperformed the national average with 32.7% in the same year and this is an area that was praised during our February 2019 HMICFRS inspection. Our performance in this area continues to improve with 47.8% of SWVs so far completed in 2020/21 being received by members of the public that identify as having a disability.

Marriage & Civil Partnership (Unknown Impact):

Profiling data relating to this area is not collected but there is no indication that there would be a significant impact on access to, and delivery of, SWVs for any persons within this group.

Gender Reassignment and Sexual Orientation (Unknown Impacts):

At present we do not collect data to show if the delivery of SWVs for those within these groups is positive, negative or neutral. However, although there is no research specific to fire and rescue services, Stonewall’s Unhealthy Attitudes report into the treatment of persons who identify as LGTBQ+ within health and social care shows that they are more likely to face discrimination and lack of understanding of their needs when accessing services.

Race (Neutral Impact):

When consideration is given to the race of the recipients of SWVs since their full introduction in October 2018, it is important to recognise that the ethnic make-up of Nottinghamshire and Nottingham City varies significantly. It is therefore important to separate the two to ascertain if there are any barriers to the application of the SWV Procedure.

In Nottinghamshire delivery of SWVs has been compared to Broad Ethnic Groups:

Broad Ethnic Group	White	Mixed/Multiple Ethnic background	Asian/Asian British	Black African & Caribbean / Black British	Other Ethnic Group
Nottinghamshire *	95.5%	1.36%	2.18%	0.68%	0.26%
% of SWVs	96.69%	0.35%	0.97%	0.66%	1.35%
Differential	1.2%	118.1%	76.8%	3.0%	135.4%

* (Source: 2011 Census, Office for National Statistics as presented in JSNA: The People of Nottinghamshire 2017)

Due to the increased ethnic diversity within the City (34.6% being from a BAME background), it is worth comparing SWVs that have been delivered with Detailed Ethnic Groups:

Broad Ethnic Group	Detailed Ethnic Group	% of Population**	% of SWVs	
White	White (English/Welsh/Scottish/Northern Irish/British)	65.4%	77.52%	16.9%
	White Irish	0.9%	1.49%	49.4%
	White Gypsy or Irish Traveller	0.1%	0%	n/a
	White Other	5.1%	-	n/a
Mixed/Multiple Ethnic	White & Black Caribbean	4.0%	1.65%	83.2%
	White & Black African	0.7%	0.56%	22.2%
	White & Asian	1.1%	0.21%	135.9%
	Other Mixed	0.9%	-	n/a
Asian / Asian British	Indian	3.2%	2.79%	13.7%
	Pakistani	5.5%	3.80%	36.6%
	Bangladeshi	0.3%	0.37%	20.9%
	Chinese	2.0%	0.32%	144.8%
	Other Asian	2.1%	-	n/a
Black/African/ Caribbean/ Black British	African	3.2%	3.59%	11.5%
	Caribbean	3.1%	4.02%	25.8%
	Other Black	1.0%	-	n/a
Other Ethnic Group	Arab	0.8%	0.32%	85.7%
	Other Background	0.7%	3.35%	130.9%

* (Source: Nottingham City Council, 2011 Census Nottingham City Ward Headlines – Ethnicity)

For Nottinghamshire it is fair to say that the delivery of SWVs is fairly representative for the Broad Ethnic Groups of White, and Black African & Caribbean / Black British where the proportion of SWVs delivered virtually mirrors the population. For Mixed/Multiple Ethnic Background and Asian/Asian British SWV delivery appears to not be as representative. However, a contributory factor for this may be that some detailed ethnic backgrounds captured on the Census data (e.g. Other Mixed and Other Asian) are not captured on the SWV profiling. In their place is the general option of 'Other Background' (1.29% of SWV recipients). It is also worth noting that for 2.64% of SWV recipients in Nottinghamshire an ethnicity was not recorded, it can be assumed that a fair proportion of these may well have been from a BAME background.

Comparison in the City is also a little hampered by the Census and SWV profiling categories not aligning. Again, the more general

'Other Background' appears to have been used in place of Detailed Ethnic Groups such as Other Mixed and Other Asian. In the City, there is a noticeable over-provision of SWVs to White British, White Irish, Bangladeshi, Black African and Black Caribbean. The most significant under-provision is amongst the Chinese population although a reason for this may be because of the large Chinese student population in the City that would not necessarily be deemed as 'at risk' under the CHARLIE profile. There is also a significant under-provision to all Mixed/Multiple Ethnic categories and the Pakistani and Indian communities. It is worth noting that an even larger proportion of SWV recipients in the City (5.26%) had no ethnicity recorded and, again, it can be assumed that a fair proportion of these may have been from a BAME background.

Religion & Beliefs (Unknown Impacts):

Profiling data relating to this area is not collected so impacts are currently unknown. However, historically, the Service has found it challenging to engage with certain religious and faith groups due to their lack of understanding of the fire service's proactive prevention role.

Sex (Unknown Impacts):

Currently SWVs are delivered per 'household' rather than 'individual'. We do not therefore have an accurate picture of where the service has been accessed by a male or female.

Pregnancy & Maternity (Unknown Impacts):

Profiling data relating to this area is not collected but there is no indication that there would be a significant impact on access to, and delivery of, SWVs for any persons within this group.

3a) Please explain any steps you have taken or may take to address the impact you have identified.

Age (Positive Impact):

We will continue to work with partner organisations to educate them about CHARLIE characteristics and the fire risks associated with being elderly. We will continue to utilise the Exeter System (NHS database of all over 65s registered with a GP) as a primary data source for our risk stratification index and intelligence-led SWVs. We will continue to monitor performance in this area against local and national statistics.

Disability (Positive Impact):

Whilst we perform well in reaching members of the public with a disability, improvements can be made to ensure effective SWV delivery for all service-users. We will ensure the safety booklet that is provided during a SWV is accessible to all (large print, audio format, pictorial etc.); pre-visit we will seek to identify where a service-user has reduced cognitive capacity to enable joint visits to take place (e.g. SWV Delivery Team + NFRS's Occupational Therapist + Carer/Support worker); we will research alternative safety equipment that could be provided to reduce risk (e.g. accessible alarms); we will help to develop Delivery Teams that are competent in understanding the needs of people within this group; we will train members of the Prevention Team to become specialists in delivery to those within this group (e.g. British Sign Language qualification); and we will ensure that on-line self-referral pathways are compatible with the various website readers used by those within this group. In addition, we will continue to monitor performance in this area against local and national statistics.

Marriage & Civil Partnership (Unknown Impact):

No impacts identified to address.

Gender Reassignment and Sexual Orientation (Unknown Impacts):

Through the PFI Inclusion Group, and with support from the Service's OD & Inclusion Team, we will seek to further develop links with LGBTQ+ community groups and seek additional referral partners who engage regularly with this community. We will again consider the arguments for and against the collection of profiling data relating to these groups.

Race (Neutral Impacts):

To ensure that future comparison of population statistics and SWV delivery data is accurate we will align the SWV ethnicity profiling categories to those of Census data. Through the PFFI Inclusion Group, and with support from the Service's OD & Inclusion Team, we will seek to further develop links with the Detailed Ethnic Groups that are currently under-represented in terms of SWV delivery and seek additional referral partners who engage regularly with these communities. To remove any potential barriers that exist we will redesign the CHARLIE promotional material to remove the depiction of only a white male; we will ensure the safety information that is left post SWV is accessible to those where English may not be their first-language by producing it in a pictorial format option; we will increase efforts to promote SWVs directly to under-represented BAME communities (e.g. via a regular slot on Radio Dawn) and ensure that the online self-referral pathway is available in multiple languages; we will train Delivery Teams in the use of the telephone interpretation service and will develop a register of 'in-house' volunteers whose language skills could be utilised for SWV delivery. In addition, we will refresh the data for this area once 2021 Census data becomes available.

Religion & Beliefs (Unknown Impact):

Through the PFFI Inclusion Group, and with support from the Service's OD & Inclusion Team, we will seek to further develop links with places of faith and religious leaders to uncover additional referral partners. We will help to develop culturally competent SWV Delivery Teams who understand the needs of service-users from different faiths and any additional fire risks that their associated traditions create (e.g. cooking, candles, celebrations etc.).

Sex (Unknown Impact):

Whilst no significant impact regarding access and delivery has been identified, one potential barrier is that the CHARLIE profile promotional material that is used to educate referral partners, depicts an elderly male within his home. We will have the promotional material re-designed so that neither a male or female character is identifiable. From April 2021 we will introduce the 'Vulnerable Person's Module' which will move SWV delivery to being person-centred rather than household. This will enable us to develop an accurate picture of when the service has been accessed by males or females in 2021/22, and uncover any barriers there may be.

Pregnancy & Maternity (Unknown Impact):

No impacts identified to address.

4. Identify the individuals and organisations that are likely to have an interest in, or be affected by the policy, function, theme or service. *This should identify the persons/organisations who may need to be consulted about the policy or service and its impact.*

Internal and External stakeholder events were undertaken during the development of the SWV process in 2016/17. Regular liaison with internal stakeholders (Trade Unions, ICT, Information & Governance Officer, Performance & Systems administrators, etc.) and key external stakeholders (providers of referral pathways to falls prevention, warmer homes, drug & alcohol services, and smoking cessation) take place on a regular basis.

Other organisations that retain an interest in the Service's SWV process include Local Authorities, Social Care providers, Health Care providers, Disability Support Groups, Health Support Groups, Community Centres/Groups, Places of Faith/support groups, NHS bodies, Clinical Commissioning Groups, GP surgeries, Asylum seeker centres and Women's Aid.

5. Has consultation (with the public, managers, employees, TUs etc) on the policy, function, theme or service been undertaken?

Yes

5a. Please provide details for your answer including information regarding when consultation will take place if you have ticked yes.

Consultation took place in 2016/17 through internal and external stakeholder events.

6. Has the OD and Inclusion Team been contacted?

Yes

If Yes please outline below the outcomes/concerns highlighted in the discussion.

OD and Inclusion Team have supported the creation of this revised EIA.

If No please ensure that the Equality and Diversity Officer is contacted. Please record here the date the OD and Inclusion Officer was contacted regarding this revised EIA.

Date: Various dates between Nov 2020 and Feb 2021.

7. Has monitoring been undertaken?

Yes

8. What does this monitoring show?

Monitoring has been undertaken through analysis of SWV data collected between October 2018 and February 2021. This has been compared to local population demographic data and national fire and rescue service SWV statistics. What monitoring shows is captured in Section 3.

<p>9. If you have answered no to question 7 can a monitoring system be established to check for impact on the protected characteristics?</p>	<p>n/a</p>	
<p>10. Please describe how monitoring can be undertaken and identify this monitoring system as an objective when completing the action plan below.</p> <p>Statistics relating to SWVs are monitored as part of the SDEAG framework.</p>		
<p>11. If a monitoring system cannot be established please explain why this is.</p> <p>n/a</p>		
<p>12. Did the Equality and Diversity Officer advise to proceed with a full EIA? Please provide full details of the decision.</p> <p>This is a revision to the initial EIA that was conducted during the development of the Service's SWV in 2016/17. It has been used to identify improvements that will be made to the process over the coming months. These are detailed in Section 3a and the following Action Plan.</p>		
<p>13. Proceed to full Equality Impact Assessment?</p>	<p>No</p>	

APPENDIX C

Safe & Well Visit Revised Initial Equality Impact Assessment Action Plan (Feb 21–April 22)

Equality Objective Reference	Protected Characteristic	Action	Person Responsible	Deadline	Interdependencies
1	AGE	Provide refresher training and CPD to existing Referral Partners to ensure CHARLIE Profile is understood. Monitor the performance of Referral Partners to target training where required.	WM PART	31 March 2022	Corporate Support (Power-Bi team)
2	AGE	Ensure latest Exeter System is utilised in risk stratification index for intelligence led SWVs.	SM DISTRICT PREVENTION	01 April 2021	Corporate Support (GIS Team)
3	AGE DISABILITY RACE	Monitor performance against national statistics on a Quarterly basis (Age and Disability). Monitor performance against updated local statistics once 2021 Census data is available.	GM PREVENTION	31 March 2022	n/a
4	DISABILITY RACE	Ensure SWV Guide is accessible (large print, audio format, pictorial version etc.).	CHAIR - PPFI RESOURCE GROUP	01 June 2021	External Designers Procurement Comms Team (print budget holder)
5	DISABILITY	Refresh process for gathering profiling information pre-visit.	WM PART	01 April 2021	CFRMIS Support
6	DISABILITY	Review suitability of current safety equipment that is provided and research alternative items.	CHAIR – PPFI RESOURCE GROUP	01 June 2021	Procurement
7	DISABILITY RELIGION & BELIEF	Develop Delivery Teams knowledge and competence in understanding associated risks and delivering to these groups.	CHAIR – PPFI INCLUSION GROUP	31 March 2022	L&D (E-learning Team) Occupational Therapist

8	DISABILITY	Develop Specialist Skills within the Prevention Team to inform / support delivery to this group.	GM PREVENTION	31 March 2022	External training providers
9	DISABILITY RACE	Ensure on-line self-referral pathways are compatible with various website readers and available in multiple language formats.	CHAIR – PPFI WEBSITE GROUP	tbc.	ICT
10	GENDER REASSIGNMENT SEXUAL ORIENTATION RACE RELIGION & BELIEF	Develop further links with these communities and recruit additional targeted Referral Partners.	CHAIR – PPFI INCLUSION GROUP	31 March 2022	OD & Inclusion Team
11	GENDER REASSIGNMENT SEXUAL ORIENTATION	Look again at the decision not to include profiling information relating to these groups	GM PREVENTION	30 Sep 2021	OD & Inclusion Team CFRMIS Team FBU
12	RACE	Align SWV Profiling categories with those of the Census data.	WM PART	01 April 2021	CFRMIS Team
13	RACE SEX	Remove depiction of White Elderly Male from CHARLIE promotional material.	CHAIR – PPFI RESOURCE GROUP	01 June 2021	External Designers
14	RACE	Increase efforts to promote SWVs directly to under-represented communities.	CHAIR – PPFI INCLUSION GROUP	31 March 2022	Corporate Comms OD & Inclusion Team
15	RACE DISABILITY	Train Delivery Teams in the use of the Telephone Interpretation Service and develop a register of in-house volunteers with language skills that could be utilised during SWV delivery (to include BSL).	CHAIR – PPFI INCLUSION GROUP	01 June 2021	OD & Inclusion Team L&D (E-learning Team)
16	SEX	Introduce Vulnerable Persons Module to make SWVs person-centric	GM PREVENTION	01 April 2021	ICT CFRMIS Team