

**Freedom of Information request reference number:** 6982.1

**Date of response:** 29 November 2022

**Request:** Could you please send me the following: Information request 1: Internal policies, procedures and guidance documents for Fire Safety Inspectors in relation to post-fire inspections (e-copies) being GNs, FSIGNs or published documents Information request 2: Internal policies, procedures and guidance documents for Fire Safety Inspectors in relation to complaints (e-copies) being GNs or FSIGNs or other published documents. If this request is too wide or unclear, I would be grateful if you could contact me as I understand that under the Act, you are required to advise and assist requesters. If any of this information is already in the public domain, please can you direct me to it, with page references and URLs if necessary. If the release of any of this information is prohibited on the grounds of breach of confidence, I ask that you supply me with copies of the confidentiality agreement.

**Response:**

We have attached a copy of Fire Safety Information & Guidance Note (FSIGN) 206: Post Fire Audits and Post Fire Reviews to this response.

You will see that we have redacted a form on pages 08 of 12 of the '*FSIGN206: Post Fire Audits and Post Fire Reviews*' document. We do not typically provide copies of LFB forms under the FOI act as, if they are made public, there could be a risk of them being used in some element of criminal activity. Therefore this information is exempt from disclosure under the FOI act under [section 31\(1\)\(a\) - Law enforcement](#). Section 31 is a qualified exemption and I must consider the public interests for and against disclosure. By disclosing this information there is a risk that it could make the LFB more vulnerable to crime. For example, it may be possible to print and use the LFB branded forms to impersonate a Firefighter which could, in turn, put other people at risk. I am therefore of the view that it is in the public interest not to disclose this section of the policy you have requested.

Any complaints received by the LFB (including fire safety complaints) are handled under the LFB external compliments and complaints procedure policy (policy number 639). We have attached a copy of this policy to this response.

In addition, the Fire Safety Regulation team have a '*FSRP800: Audit & Performance Policy*' which also includes information about customer care standards. We have attached a copy of this policy note to this response.

We have dealt with your request under the Freedom of Information Act 2000. For more information about this process please see the guidance we publish about making a request on our website: <https://www.london-fire.gov.uk/about-us/transparency/request-information-from-us/>

## **Post Fire Audits and Post Fire Reviews**

# **FSIGN 206**

*Old Inst.: FSR:C015:a4*

*Issue date: Aug 2010*

*200 Series: Audit Process*

### **Summary**

The London Fire Commissioner (the Commissioner) is the fire and rescue authority for London. The Commissioner is responsible for enforcing the Regulatory Reform (Fire Safety) Order 2005 (The Order) (as amended) in London.

This Note is intended for internal use, providing information and guidance on when and how a Post Fire Audit and/or Post Fire Review should be carried out, when to notify/involve other authorities, and subsequent actions.

This Note is one of a series produced by Fire Safety Regulation HQ Policy Groups to provide additional advice and guidance to officers and Fire Safety Teams on various subjects related to their role.

Where appropriate this Note should be used for learning and staff development purposes.

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# 1 Introduction

- 1.1 Reducing primary fires and their impact is a major part of the London Safety Plan, particularly fire related deaths and injuries. It is essential therefore that Fire Safety Regulation (FSR) gathers and records primary fire information, and takes appropriate enforcement action. Post Fire Audits and subsequent actions are essential in supporting these objectives.
- 1.2 This note provides information and guidance on when a Post Fire Audit should be carried out and any subsequent actions required. Fires in simple premises without casualties or other complicating factors require a Post Fire Audit only as outlined in section 2 below.
- 1.3 Fires involving casualties and/or other factors will require both an audit and the additional scrutiny of the Post Fire Review, as outlined in Section 8 below.

## 2 Post Fire Audits

- 2.1 A Post Fire Audit should be considered following every primary fire within premises where the Regulatory Reform (Fire Safety) Order 2005 (as amended) (hereafter referenced as 'The Order') applies or partly applies and must be undertaken where a fire related fatality, injury or rescue has occurred. A Post Fire Audit may not be required in certain circumstances for example where the incident is small in nature and does not reflect badly on the fire safety management of the premises e.g. small fire contained within a flat of a purpose built block, which has been assessed as broadly compliant within the past 12 months.
- 2.2 These audits should be given priority due to the high profile nature of such incidents and the potential outcome. They should be carried out the next working day if possible and normally within 5 working days.
- 2.3 The more serious the incident, the shorter the timescales to ensure evidence is gathered in a timely manner from all sources e.g. witness statements, photographic evidence etc.

## 3 Identifying Post Fire Audits

- 3.1 At the start of each working day all teams should run a "MOB-IS" daily summary report to identify the primary fires that have occurred within their area in the past 24 hours or since the report was last run. This report also identifies additional incidents that may warrant a Post Fire Audit including those relating to unwanted fire signals, dangerous substances, secondary fires etc.
- 3.2 Additional sources of information to be considered include:
  - Team mailboxes should be checked at the start of each working day by the Team Leader (TL) or designated officer.
  - Brigade Control Daily Information Bulletin.
  - Senior Fire Safety Officer Reports (FSIGN208\_01).
  - FIT Notifiable Fire Reports (FIT5).
  - Each working day FSR Policy run an IMS report for all primary fires for the past 14 days. This report is placed in the Post Incident Report folder within the FSR "Shared" area of SharePoint and will act as a "back-up" to the daily reports.
  - Information from attending crews

## 4 Pre-Audits checks

- 4.1 The TL, or Deputy TL is responsible for deciding which incidents require a Post Fire Audit and for ensuring that an audit is undertaken. When it is determined that a post fire audit is not required, a reason must be recorded on the post fire audit spreadsheet (FSIGN206\_01a).
- 4.2 When deciding whether or not a post fire audit is required the following actions should be undertaken as a minimum:
- Fire Safety database interrogated to ascertain all previous FSR interventions, including previous audits, approvals and advice provided.
  - Review previous audits to consider any previous or ongoing enforcement activity.
  - Review all incidents attended by the Brigade over the previous 3 years (as a minimum). The Repeat Incident Tool within IMS should be used for this purpose.
  - The nature and type of these incidents will be a key influence, particularly where rescues have been carried out, unusual fire spread, type of premises etc.

## 5 Recording Post Fire Audits

- 5.1 The form "FSIGN206\_01a Post fire audit spreadsheet" should be compiled each month and an entry made for each primary fire identified. These monthly records should be kept locally for a minimum of 3 years, but may be required to be submitted centrally at any stage.

## 6 Post fire audit not carried out

- 6.1 There will be occasions when an audit is started, but for some reason cannot be completed. For example, the premises may be vacant, too severely damaged to enter safely, secured as a crime scene, or boarded up etc.
- 6.2 Where an audit of a premises cannot be carried out, Form FS\_GEN\_01 should be completed and uploaded to the premises file. This should explain the reasons for the non-completion of the audit and record details of the incident number, address and reasons why the Post Fire Audit had been allocated.

## 7 Primary Authority partnerships

- 7.1 Before any enforcement action is taken (enforcement notice or notification of deficiencies), it is essential that the Inspecting Officer determines if the business being audited is included in the Primary Authority Partnership scheme. The Primary Authority Register on the BEIS website contains details of all Primary Authority partnerships. See FSIGN 610 for further information.

## 8 Transport Properties

- 8.1 Before any audits take place, it is essential that the Inspecting Officer determines if the property being audited is part of the transport infrastructure. These properties include:, airport/Heliport terminals and buildings within the airport/Heliport boundary, Underground Stations, London Underground Control Centres, London Underground/National Rail Power Supply properties, DLR, Trams, National Rail Stations, National Rail depots, National Rail control centres, Cross Rail Stations, Cross Rail Depots, Cross Rail. Control centres, shops on station concourses, bus stations, bus garages, bus depots, passenger River Bus piers. If it is determined that the incident has occurred on any one of the properties listed, pass the review to Transport Fire Safety Team so that they can action it where necessary.

## 9 Post Fire Review

- 9.1 A Post Fire Review is an extra level of scrutiny applied to more significant Post Fire Audits. The purpose of the review is to develop a greater understanding of the contributory factors of an incident to prevent similar incidents occurring. These outcomes will influence future FSR and Community Safety (CS) activities.
- 9.2 A Post Fire Review should be conducted following a fire, if one or more of the following occurs or is present at a premises to which The Order applies.
- Fatality
  - Rescue (not including flat of origin).
  - Serious injury to a member of public requiring hospitalisation (not including flat of origin).
  - Serious Firefighter injury.
  - Fire Survival Guidance provided.
  - Care or support for vulnerable persons – including Care Homes, Sheltered Housing, Hostels, Supported Living.
  - History of repeated fire incidents (more than one in 12 months).
  - Structural building elements have contributed to fire development and/or spread.
  - Failure of firefighting installations, such as smoke ventilation systems, firefighting lifts, wet/dry riser mains or other Engineered Solution has contributed to fire development and/or spread.
  - Water suppression systems have actuated or failed to actuate.

## 10 Completing the review

- 10.1 Where an incident triggers one of the occurrences that requires a review (as detailed in the section 'Post Fire Review'), but is very minor in nature, the Area Fire Safety Manager (AFSM) has authority to decide a review is not necessary. This decision should be recorded by the TL on Form FS\_GEN\_01 and uploaded to the premises file. The AFSM also has authority to generate a Post Fire Review for any reason that supports the objectives of this guidance note (as detailed in the section 'Post Fire Review').
- 10.2 The local TL should lead on the Post Fire Review and designate an Inspecting Officer (IO) to perform the Post Fire Audit and gather sufficient information to commence the Post Fire Review.
- 10.3 It may only become apparent during a Post Fire Audit that the Post Fire Review criteria is met. At this point the IO should gather all relevant information to support the review (as detailed in the section 'Post Fire Review') and subsequently inform the TL that the criteria has been met.
- 10.4 The IO will complete the Post Fire Audit as normal and also complete the form FSIGN206\_02a as much as possible and send to the TL. An example of the completed form is provided in Appendix 1.

## 11 Responsibility for undertaking the review

- 11.1 The TL is responsible for gathering all relevant information to complete the report. They should always consider the previous 3 years of activity as a minimum.
- 11.2 The report will form the basis of the Post Fire Review chaired by the AFSM. The report should be completed by the TL and sent to the AFSM prior to the review, which should be undertaken as soon as practical after the incident. The review and submission of the final report must be completed within 28 days of the incident.

- 11.3 Liaison with the Borough and Station Commander is required to avoid duplicating work performed under the Accidental Dwelling Fires and Fatal Fire Review policies.
- 11.4 Review outcomes provide AFSMs with an accurate account of the circumstances surrounding an incident or collection of incidents. They also detail both the immediate and longer term actions either taken or required, to prevent or reduce the likelihood of similar incidents occurring again.
- 11.5 The AFSM will use the review outcomes to consider implications for the local plan and Area plan held on the Performance Monitoring Framework (PMF).

## 12 Review collation

- 12.1 Post Fire Review Reports should be sent to the FSR Policy Group mailbox, where the Policy Group will collate and produce a thematic report which is presented to the Assistant Commissioner FSR, on a quarterly basis. An annual report is also produced by the Policy Group for the Assistant Commissioner FSR to report to the Departmental Management Board (DMB). This will enable a more strategic overview to be achieved, and to consider alternative FSR and CS interventions where appropriate.

## 13 Fatal fire

- 13.1 Fatal fire reviews are an integral part of the learning and development strategy for the Brigade and its personnel. PN 668 applies.
- 13.2 The reviews examine in detail the circumstances leading to a fatality to ensure any lessons are learnt. FSR are represented at these reviews by the relevant AFSM.
- 13.3 Forms to support the process are to be found as follows:
  - [Post fatal PFD flowchart](#) (Document Location: New Office Documents/Templates/Forms (Service Delivery)/Forms (Departments)/Operations)
  - [Post fatal PFD aide memoire](#) (Document Location: New Office Documents/Templates/Forms (Service Delivery)/Forms (Departments)/Operations)
- 13.4 It is the responsibility of the AFSM to ensure the collation of information for the review. The FSR Post Fire Review process will assist with this information and the Form FSIGN206\_02a should be utilised by the AFSM.
- 13.5 Due to the high profile nature of fatal fires, the AFSM is required additionally to report to Fire Investigation within two working days of a fatal fire (send to mailbox "@FCS FI FS Legal". This report should be in simple format, using lay person terminology and cover 3 clear areas in relation to the premises:
  - FSR intervention prior to the fire.
  - FSR intervention at the fire, including SFSO findings and Post Fire Audit.
  - FSR intervention and actions post fire.
- 13.6 Where the relevant AFSMs is absent, the FSR Policy Group will notify an alternative AFSM to enable the investigation and reporting process to commence without delay (prioritising on NE/SE and NW/SW basis).
- 13.7 FSR Fatal fire reports (FSIGN206\_02a) should be sent in the first instance to the FSR DACs within 28 days, and no later than 7 days prior to the scheduled fatal fire review. The report is should then be forwarded to the Chair of the fatal fire review, in readiness for the review.

- 13.8 The AFSM should task the staff under their command to collate all the information that will be required at the review.

## 14 Structural fire safety failures

- 14.1 Where structural fire safety failures have occurred (normally reported in FIT 5 or SFSO report), the additional scrutiny of a Post Fire Review is required.
- 14.2 In these circumstances, liaison with members of respective Borough Building Control Departments should take place to ensure that a joint site visit is undertaken as soon as possible to ascertain the reasons for the structural fire safety failure.

## 15 Houses in Multiple Occupation

- 15.1 Fires within Houses in Multiple Occupation will also be of interest to the relevant local authority housing department as the primary enforcement authority for this type of premises. In these circumstances, liaison with members of respective Borough Housing Departments is also required to ensure that a joint site visit is undertaken as soon as possible to determine any subsequent actions.

## 16 Water Suppression Systems

- 16.1 A primary fire in any premises where a sprinkler system, water suppression system, water mist or drencher, has actuated or failed to actuate should always be subject to a Post Fire Audit and Review.
- 16.2 Details of the actuation should be recorded on the electronic version of form **FSIGN529\_01** (Automatic Water Fire Suppression System post fire report form) and forwarded to the [sprinkler mailbox](#) in addition to the Post Fire Audit and Review (when completed). If necessary, the auditing officer may need to liaise with the Incident Commander, Fire Investigation or occupier to gather information regarding the final extent of damage in the premises, and the percentage of the premises saved from damage due to the suppression actuating.
- 16.3 This information is required as part of the Brigade's sprinkler and other water suppression systems Communication Strategy (see FSIGN 529 "Water Suppression Systems").




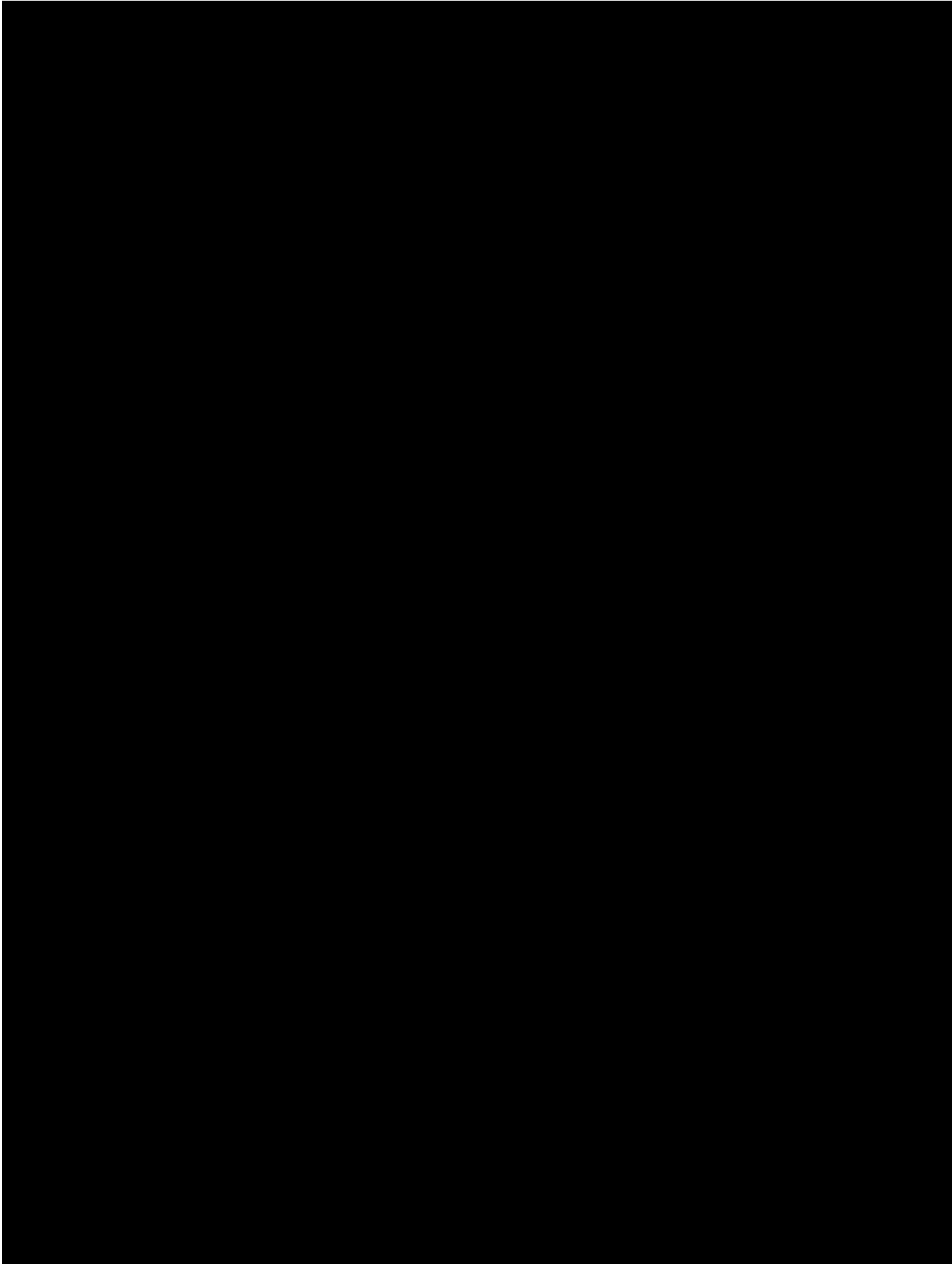
# Appendix 1 - FSIGN206\_02a - Example

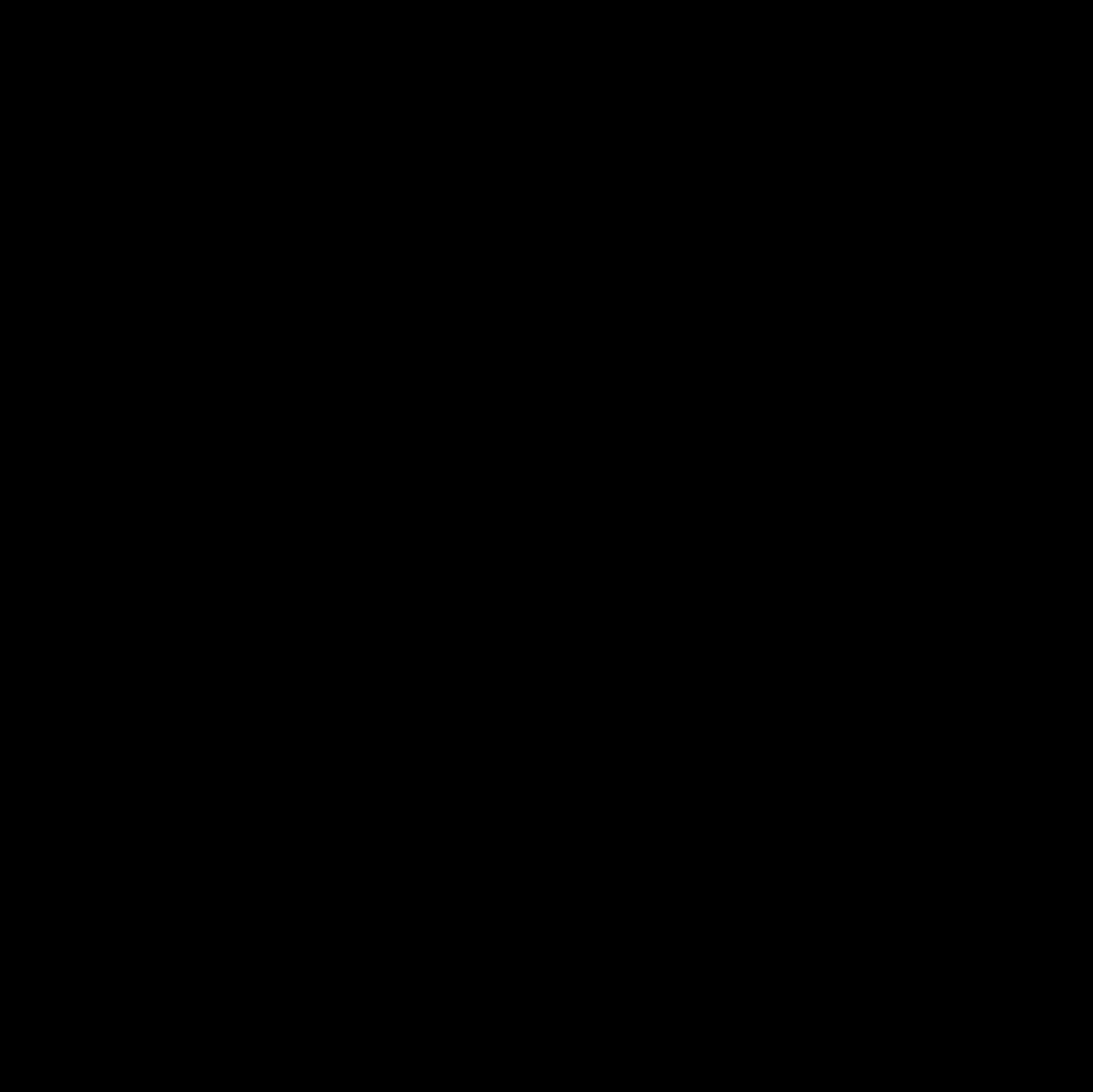
(This form is available in New Office Documents)

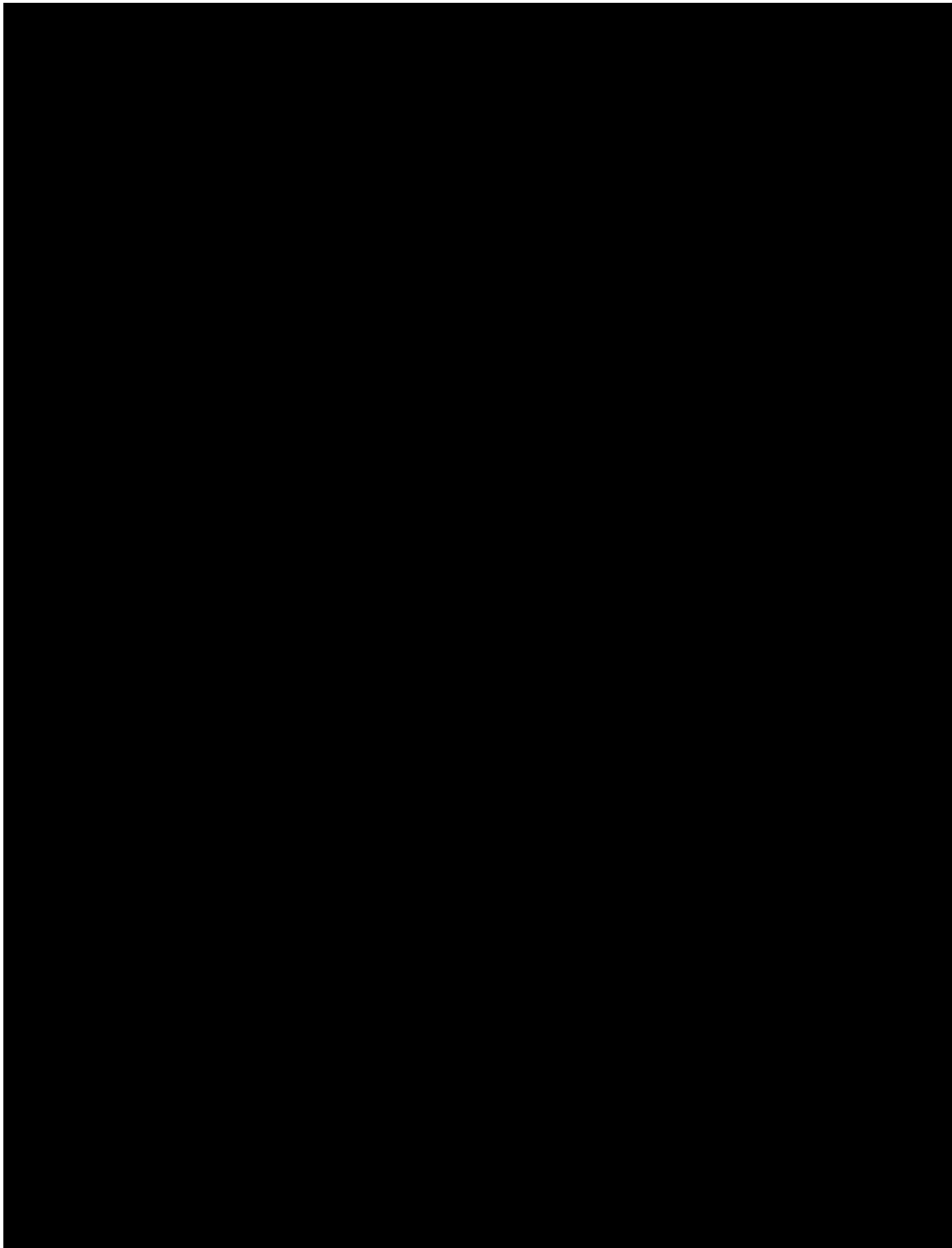
## Post Fire Review Report "Example only"

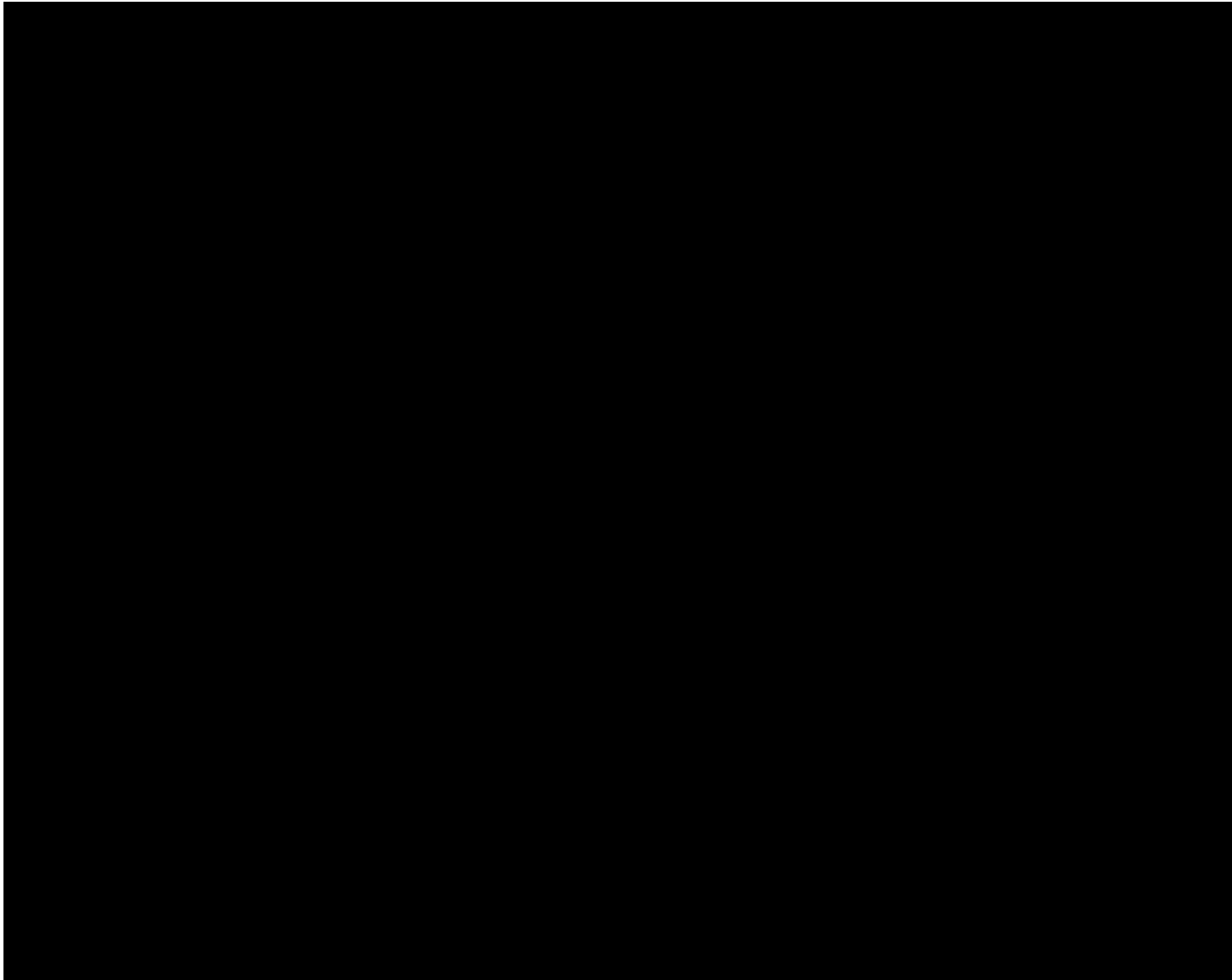
This information is exempt from disclosure under the FOI act under section 31(1)(a) - Law enforcement.











# Document History

## Impact assessments

An Equality or Sustainability Impact Assessment was completed on:

Equality Impact Assessment	xx/mm/yyyy	Sustainability Impact Assessment	xx/mm/yyyy
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## Audit trail

Listed below is a brief audit trail, detailing amendments made to this policy/procedure.

Page/para nos.	Brief description of change	Date
Sections 1, 2 & 3	General clarification of process. No major changes	16/6/2011
5.1	Mailbox update to FSR Policy	31/03/2011
3.1-3.3	Revised IMS procedure	26/08/2010
3.2	Revised location for saving spreadsheet	27/09/2010
5.1	Mailbox updated to FSR Enforcement	27/09/2010
3.2 – 3.4	New paragraphs and table added	16/11/2010
3.7	Additional guidance added	16/11/2010
3.10	New paragraph	16/11/2010
All	FSIGN Format	28/02/2012
2.2, 2.4-2.6, 3.7, 5.1, 6.2	Minor changes regarding Teams and TLs doing work at source. New paragraphs 3.11 and 3.12.	15/5/2012
All	Added paragraphs and complete review	25/07/2013
All	Added paragraphs, complete review and title change	01/05/2014
All	Comprehensive rewrite	19/01/2015
Section 15	Removed reference to sprinkler form and added email hyperlink. Updated appendix to current FSIGN206_02a form.	08/03/2016
Section 15	Updated to take into account introduction of FSIGN529_01 (Automatic Water Fire Suppression System post fire report form)	06/10/17
All	Changed to support LFC governance	01/04/2018
8	Updated with new section for Transport properties	09/01/2019
13.3	Hyperlinks added to support forms for fatal fire reviews	26/10/2020
All	Updated to recognise the RR(FS)O is amended	01/05/2022

# External compliments and complaints procedure

New policy number: **639**  
 Old instruction number:  
 Issue date: **11 November 2008**  
 Reviewed as current: **7 July 2015**  
 Owner: **Assistant Director, Communications**  
 Responsible work team: **Support Services Manager Operations Directorate**

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# 1 Introduction

- 1.1 We want to provide high quality services and deliver these services right first time. Where we fail to do so its expected that officers take ownership and seek to resolve any issues. There may be times however, when people feel we have let them down and wish to complain. It may also be the case that members of the public wish to formally acknowledge high quality service.
- 1.2 This policy sets out the principles for handling compliments and complaints from the public about our services so that we can deal with, and resolve issues that arise promptly, effectively and fairly. Following this procedure across the whole organisation provides for overall coordination and consistency, including clear monitoring and reporting.
- 1.3 This policy is not to be used for staff grievances, nor in isolation where the complainant indicates any kind of legal dispute with the London Fire Commissioner, for example, a road traffic claim, property damage claim or personal injury claim. In all such cases the matter must be referred to the appropriate department and, where appropriate, to the General Counsel to the Commissioner immediately. The complainant must be informed at the earliest opportunity that their concerns do not fall, or fall only partly, within the scope/remit of the compliments and complaints procedure and should be directed to the appropriate contact who will deal with the matter or parts of the matter which cannot be responded to under the complaints policy.
- 1.4 Complaints that relate to, or could result in, disciplinary action should be recorded and acknowledged with advice then sought from Employee and Industrial Relations in Human Resources and Development who will inform the appropriate manager. If it becomes a discipline matter it can be recorded as such and closed as a complaint with the complainant informed. Where the matter remains a complaint it should follow the set procedure.
- 1.5 This policy only applies to Freedom of Information Access where the compliment or complaint is in regard to the level of service. Where the compliment or complaint relates to the information provided or permission to reuse information, in response to a request, the relevant information access policy applies.

## 2 What is a compliment/complaint?

- 2.1 For the purpose of this policy, a compliment is defined as:
  - An expression of satisfaction by one or more members of the public about the standards of service or the actions of London Fire Brigade staff.
- 2.2 For the purpose of this policy, a complaint is defined as:
  - An expression of dissatisfaction by one or more members of the public about the standard of service, actions or lack of actions of London Fire Brigade staff.<sup>1</sup>

## 3 Why do we need a compliments and complaints procedure

- 3.1 It is important that the public are able to feed back their views to us on any aspect of our activities. We need to ensure that systems are in place for those members of the public who wish to make a compliment or to complain about our services. The compliments and complaints procedure is designed to help us to learn from what people are telling us – to build on our successes and learn from service failures.

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<sup>1</sup> Definition drawn from 'Running a Complaints System – Guidance on Good Practice', Local Government Ombudsman.



- 3.2 Whether a complaint appears justified, or not, we have a duty to investigate thoroughly and respond. People making complaints often feel strongly about the issue that they wish to bring to our attention. We need, therefore, to resolve complaints quickly, courteously and effectively and ensure that investigations are carried out impartially and that an explanation of our actions is provided.
- 3.3 It is a requirement of the Local Government Act 1974, that where a citizen is unable to resolve their complaint with an authority, they have redress via the Local Government Ombudsman. This policy seeks to implement a system that resolves complaints, to the satisfaction of both parties, in order to avoid referral to the Local Government Ombudsman.
- 3.4 Complaint investigations may reveal areas where Brigade policies, procedures, equipment or actions of staff could be improved. In such cases, and particularly in the case of all upheld complaints, the investigating officer (IO) should record the learning outcomes and make recommendations for improvement to avoid the issue which caused the complaint arising again. All identified outcomes must be pursued as an action by the responsible head of service. Actions to be taken as result of upheld complaints will be monitored by the corporate compliments and complaints manager (CCM) and reported to Corporate Management Board.

## 4 Time limits for dealing with complaints

- 4.1 The Brigade needs to show that it takes complaints seriously, not only to the complainant but to staff. The maximum time limits for dealing with complaints are:
- All complaints are to be acknowledged within 2 working days.
  - A full response should be provided within 28 calendar days for each of the two stages.
- 4.2 The 28 day limit allows time for any investigations to fit in with operational watch patterns. A full response should be provided sooner where possible. If it takes longer, then an interim response should be sent to the complainant explaining the reasons. The complainant must be kept informed of the stage within which their complaint is being dealt and informed of the action they may take if they remain dissatisfied.
- 4.3 **The complaint should be made in time** – we will not normally consider a complaint that is made more than 12 months after the individual first became aware of the issue they want to complain about. This is in line with good practice as operated by the LGO. There are exceptions to this where the Brigade would accept that such a delay was reasonable.

## 5 Who will deal with compliments and complaints?

- 5.1 Dealing with compliments and complaints should not be seen as the responsibility of one or two people only. As any member of staff could potentially receive compliments or complaints from the public, it is important that all members of staff familiarise themselves with this policy. Departments will be responsible for making sure that all staff are fully aware of the procedure to be followed when receiving a compliment or complaint.
- 5.2 Each relevant head of service will designate one or more (in larger departments) compliments and complaints officer/s (CCO) who will need to familiarise themselves with current guidance and policy in how to deal with the processing of compliments and complaints.
- 5.3 Staff with specific responsibilities for compliments and complaints will have relevant access to the compliments and complaints database system. The database is used for effective management of compliments and complaints at a departmental/borough level and for monitoring at corporate level. Compliments and Compliment officers (CCO's) for departments and areas can be found on the C and C page on Hotwire, and can provide advice and guidance.

- 5.4 Within each stage of the complaints procedure, appropriate action must be taken by staff with the following roles. Full details of the roles and different responsibilities for those holding these responsibilities is shown in Appendix 1.

### **Roles in compliments and complaints process <sup>2</sup>**

- **Logging officer (LO)** – departmental staff who are trained and responsible for logging compliments/complaints on the corporate compliments and complaints database.
- **Compliments and complaints officer (CCO)** – each department will have a designated CCO who will coordinate the complaints process in their department from start to finish. CCOs also act as the point of contact with members of the public while complaints are being investigated.
- **Investigating officer (IO)** – investigates a complaint and produces a conclusive report
- **Borough commanders and team/section managers** – signatory for the stage 1 reply letter.
- **Assistant Commissioner/Assistant Director (AC/AD)** – overall responsibility for ensuring the compliment and complaint process is functioning in their department based on this policy and for overseeing the implementation of service improvements. Responsible for overseeing the complaints process at stage 2 and signatory for the stage 2 reply letter which is the final response on behalf of the Brigade.
- **Corporate compliments and complaints manager (CCM)** – assists CCOs in the collation of data and information, act as point of contact for database assistance and general queries, corporately manages the overall process with specific attention to stage 2 replies.

## **6 Dealing with complaints**

- 6.1 The process for dealing with complaints follows two stages which are incorporated into the compliments and complaints database. Each area/departmental CCO will be responsible for ensuring the stages are followed and that they maintain compliments and complaints arrangements using the database.
- 6.2 All complaint investigations must be completed within the 28 calendar day response period and allow sufficient time for correspondence to be drafted and, where necessary, advice from Legal Services sought. When a complaint is received, the departmental CCO will ensure that an IO is appointed. An IO should not be below grade FRS D/station commander level.
- **Stage 1:** At this stage, the complaint must be logged and acknowledged by the department/area CCO. An investigation must be undertaken by an appropriate person nominated by the HoS or delegated officer in conjunction with the CCO. Following the investigation, a letter will be drafted in conjunction with the CCO from the Borough Commander or head of section and sent to the complainant. None of these individuals can be the subject of the complaint. The CCO must be involved at every stage of the complaints handling process to enable consistency of approach and the quality of correspondence to be maintained. If escalated to stage 2 the department CCO must inform the CCM.
  - **Stage 2:** If following the stage 1 response the complainant remains dissatisfied, further investigation by a more senior manager than appointed at stage 1 will need to be coordinated by the CCM. The HoS/ Assistant Commissioner (or delegated officer) will review action taken at stage 1, with any further (investigation carried out by officers of a higher role/grade than stage 1 to ensure that all substantive issues have been fully addressed, and to assess the extent to which the original outcome is correct. The HoS/AC will sign the letter sent to the

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<sup>2</sup> See Appendix 1 for detailed role overview

complainant at this stage, informing them of the outcome. This is the final stage of the internal complaints process. Complainants who remain dissatisfied should be referred to the LGO (ref in 3.3) which must be made clear in this final response.

- 6.3 Any correspondence or request for information from the LGO following completion of stage 2 will be managed by the CCM.

## 7 Complaint investigation

- 7.1 If for any reason an investigation cannot be undertaken within the 28 day period the complainant must be informed in writing of the delay as soon as possible.
- 7.2 When investigating complaints, the IO should consider who else might need to be informed, for example, General Counsel to the Commissioner, Corporate Portfolio and Corporate Services. This further action, if considered necessary, will usually be taken in consultation with the CCO. Due regard must be taken of any information that may result in action under the Brigade's discipline procedures.
- 7.3 Individuals must be told about any complaint involving them, and be given an opportunity to give an account of their actions. They must be kept fully informed of progress and the result of the investigation.
- 7.4 The complaint report should be objective, and contain (as a minimum) a summary of the complaint, or event, and a record of action taken (including statements), together with recommendations as to whether the complaint is justified. The IO's conclusions and recommendations must be based on the evidence before them.
- 7.5 Whether or not the IO reaches the conclusion that the complaint is justified, their investigation may reveal areas where Brigade policies, procedures, equipment or actions of staff could be improved. In all such cases the IO should include learning outputs and make recommendations for improvements that could be made. It is important that all learning outcomes are identified, communicated to the complainant, the relevant HoS and that outcomes are followed up.
- 7.6 **The purpose of stage 1 investigations is to satisfy the complainant that their complaint has been taken seriously and to resolve the matter effectively, avoiding escalation to stage 2. It must, therefore, be sufficiently thorough and robust to support the response to the complainant.**
- 7.7 Where complaints are escalated to stage 2, investigations should be equally thorough to respond to the complainants concerns. Upon escalation to stage 2, the CCM should be notified to ensure that this policy has been complied with.

## 8 Outcomes and replies

- 8.1 The IO investigation report will be used, by the departmental CCO, to determine the complaint output category (see Appendix 2). The complaint category (type), see Appendix 2, and output category will be recorded by the CCO for management information purposes. This information will be reported departmentally, at a frequency to be determined by the head of service, and captured quarterly and annually, by the CCM, for corporate reporting. Where possible, compliment and complaint management information should be considered alongside other user feedback data and performance management information.
- 8.2 Where a complaint covers more than one category, the main/principal issue of the complaint should be recorded but all points addressed. Where issues need to be investigated separately each should be recorded in the appropriate category.

- 8.3 A stage 1 standard outcome letter has been provided through the database to enable CCOs to draft this for borough commander/section manager. The Stage 2 letter will be tailored to respond to the individual complainant by the head of service.
- 8.4 In all cases, the correspondence must set out:
- (a) The original complaint.
  - (b) The substance of the investigation.
  - (c) The reason for the decision reached.
- 8.5 Correspondence must be consistent with what the public would expect from a responsive and accountable local authority. It must be non confrontational, whilst clearly setting out the facts of the case. If an apology is necessary, it should be freely given without any caveat or mitigating circumstances. Replies should not infer things that cannot be substantiated or delivered.

## 9 Recording and monitoring

- 9.1 All compliments and complaints must be logged on to the compliments and complaints database as soon as they have been received; guidelines on database procedures have been provided to each departmental CCO who will ensure that, as a minimum, individuals cases on the database include a copy of:
- Initial complaint (letter/email/note).
  - Acknowledgement letter(s).
  - Investigation report(s).
  - Outcome letter(s).
  - Recommended service improvements to be implemented as a result of complaints.

### Document management

- 9.2 Should a complaint be investigated by the Ombudsman, it is important that these records are available. The LGO may investigate a complaint made to them by a complainant up to three years after the original complaint was lodged with the local authority concerned. It is important, therefore, that CCOs maintain records up to and including three years from the current date.

### Processing personal information

- 9.3 All data must be handled as set out in [policy number 351](#) - Data protection privacy policy.
- When logging the enquirer's details (name, address, telephone number etc), you should make sure that their information is:
    - recorded as accurately as possible,
    - not excessive (e.g. only record the information needed to process the request),
    - not duplicated (e.g. by tearing up or shredding hand-written notes made).
  - Then make sure that the information is:
    - kept in a secure place (e.g. locked drawer/filing cabinet),
    - kept secure at all times and not disclosed to anyone unless it is within their job function to see that information.

### Using personal information for other purposes

- 9.4 You must not use the enquirer's personal information for anything other than administering their compliment or complaint.

## **Requests from individuals to see information we hold about them**

- 9.5 Individuals have a right under the Data Protection Law to see personal information we hold about them (e.g. emails between staff where they or their complaint were discussed). If you receive such a request, you should refer this to Information Access immediately. For further information, see policies on data protection or contact Information Access extension 30401/30086. Email: [infoaccess@london-fire.gov.uk](mailto:infoaccess@london-fire.gov.uk)

## **10 Dealing with compliments**

### **An expression of satisfaction by one or more members of the public, about the standards of service or the actions of London Fire Brigade staff.**

- 10.1 Compliments are as valuable to us as complaints in measuring our performance and customer satisfaction. The public should have the opportunity to offer comments and suggestions when they have identified positive aspects of our service. As part of our aim to increase the quality of service provided, it is essential we learn from compliments as they can indicate what we are doing right.
- 10.2 The CCO must make local arrangements for all compliments to be acknowledged, categorised (using Appendix 2) and recorded for corporate reporting purposes.
- 10.3 Feedback should be given to staff on what they are doing well, as soon as possible. Individuals should be informed of the compliment received and, where relevant, congratulated by their line manager/HoS. It may be appropriate to put a copy of the compliment on the employee's personal record file and for the matter to be publicised more widely (with their agreement).

## **11 Policies affected**

- 11.1 Policy Number 264 - Complaints and compliments procedure dated 23 December 1999 is hereby cancelled.

## Appendix 1 – Staff roles in compliments and complaints

### All Staff

As any member of staff could potentially receive compliments or complaints from the public, Departments are responsible for making sure that all staff are fully aware of the procedure to be followed when receiving a compliment or complaint. Including taking details of the complaint, explain how compliments process works and forwarding the detail to the appropriate CCO.

### Logging officer (LO)

Logging officers are nominated members of staff who will have access to log information regarding the compliment/complaint on the database. The duties of the LO include logging the complaint, assigning the relevant CCO and sending out the acknowledgment letter. In smaller departments the CCO can perform the role of LO and in mitigating circumstances the LO can substitute for a CCO in a coordinating role if the CCO is absent.

### Compliments and complaints officer (CCO)

Compliments and complaints officers (CCOs), are defined as the member of staff, nominated by their HoS, to record, monitor and track the progress and quality of compliments and complaints handling. They must ensure that complaints are fully and professionally investigated and that all complainants receive a professional, quality assured response in accordance with this policy. All such officers will be centrally located within each department and their role may be delegated for periods of absence (leave, sickness). The role of CCO must be performed by a member of staff who is suitably capable of fulfilling the responsibilities laid out in this policy, and to meet the needs of their department. A list of all current CCOs will be maintained by the CCM.

Specifically complaints and compliments officers will:

- Maintain local arrangements for handling compliments and complaints.
- Make sure that all members of staff within their department/location are aware of what to do when receiving a complaint or compliment.
- Act as liaison points for their department/location making sure complaints are investigated and replied to.
- Compile reply letters making sure standards of reply are adhered to.
- Implement the required monitoring and reporting arrangements.
- Make sure that the required information is forwarded to the CCM as required.
- Provided HoS/AC with regular updates and management information about all complaints and compliments within their department.

### Investigating officers

Investigating officers (IOs) will be assigned complaint investigations by their departmental CCO. For each individual complaint they will compile a report summarising the nature of the complaint, recording the actions they have taken, together with their considered outcome, recommendations and service improvements. Their report must cover all substantive aspects of the complaint and be sufficient for the purposes of drafting a response. They will, therefore, work closely with the CCO of their department. IOs at stage 1 will be grade FRS D/station commander or above.

### **Borough commanders and team/section managers (as line managers)**

All borough commanders and section managers must be alerted to all compliments and complaints concerning their area of responsibility, in order to monitor the level of compliment and complaint activity and address any issues it raises in terms of both managing performance and service delivery. Suggestions for service improvements should be passed on to their HoS. For the purposes of this policy, team/section managers may be required to undertake investigations at stages 1 and 2 of the procedure – in which case they will perform the role of IO. They must not interfere, or seek to influence, the independent investigations of the IO as line managers.

### **Assistant commissioner/Head of service**

Heads of department/assistant commissioners must be informed, by their CCO, of all complaints within their department. The IO and CCO will draft an appropriate response for the HoS to sign at stage 2. In approving this response HoS/AC must be confident of its robustness as it represents the final response to a complaint prior to referring them to the LOG who may choose to independently investigate the complaint. HoS/AC should expect to be provided with regular updates and management information about all complaints within their department, to enable them to monitor the quality of the response and make improvements where necessary as a result of any complaints.

### **The Corporate compliments and complaints manager (Corporate CCM)**

The corporate CCM based in Operations Directorate Support performs the following strategic responsibilities:

- Monitors performance information, producing reports and providing recommendations.
- Acts as point of contact for all general enquiries regarding the compliments and complaints procedure and provides assistance for staff with database queries.
- Provides training for CCOs and other staff where needed.
- To review and update the Compliment and Complaint Policy in the light of changes to legislation or as a result of best practice.
- Maintain and develop an appropriate computerised system for the corporate recording and management of complaints, and the provision of comprehensive management information.
- Use corporate processing systems to regularly monitor the quality of compliment and complaint handling (in terms of investigations, correspondence and outcomes).
- Facilitate the work of CCOs through the creation of a network/forum to share best practice and identify training needs.
- Produce an annual report for CB
- Offer advice, to CCOs or heads of department, at either stages 1 and 2 or in relation to local management arrangements.
- Manage, coordinate responses to 'unreasonably persistent complainants.'
- Liaise with the Local Government Ombudsman (as necessary).

## Appendix 2 – Complaints types and outcomes and compliment categories

The following are categories which are applied to every case using the database so reporting and monitoring data can be produced.

### Complaint outcome categories

Ref.	Category designation	Examples
01	Ongoing Investigation	Investigation incomplete at time of report
02	Upheld	Enough evidence gathered to justify complaint
03	Partly upheld	Enough evidence gathered to justify part of the complaint
04	Not upheld	Enough evidence gathered to show that the complaint is not justified
05	Outside jurisdiction	Beyond the control or outside the boundaries of the Brigade
06	Inconclusive	Insufficient evidence gathered to draw a fair conclusion
07	Withdrawn	Complaint subsequently withdrawn

### Compliments categories

Ref.	Category designation	Examples
P1	Outstanding performance	Providing extra service and support beyond the effective delivery of a satisfactory service expected by all service users (e.g. actions above and beyond the call of duty, such as risking life).
P2	Attitude/actions of Personnel	Providing support and understanding, empathy and compassion.
P3	Response times	Speed of arrival at an incident, speed of reply to other communications from the public, e.g. letters, visits, phone calls, inspections, certificates, applications, information.
P4	Professionalism	Skill, providing explanations for actions, positive use of Brigade, providing correct advice or information. Politeness, treating the public with respect, kindness, patience, consideration.
P5	Home Fire Safety Visit	Compliments received for HFSV carried out by stations can be recorded here.
P6	Station Led Community Safety Activates	Station open days, attendance at community events.



### Complaint type categories

Ref.	Category designation	Examples
C1	Abusive behaviour	Insulting, coarse or offensive language or gestures; aggressive or threatening behaviour; discriminatory behaviour
C2	Unprofessional conduct	Failure to treat service users, stakeholders and citizens with respect, consideration and courtesy; abuse of brigade; providing incorrect information or advice
C3	Failure in, or inadequate service delivery	Failure to extinguish fire; inadequate searches; failure to carry out a proper risk assessment; failure to implement health and safety procedures; failure to adequately secure premises; failure to preserve evidence; failure to salvage items of value; failure to meet response times
C4	Poor quality in professional services	Failure to respond to correspondence; poor quality of fire safety reports; conflict of fire safety advice, failure to provide an explanation for actions, or lack of actions
C5	Issues associated with or arising from the use of Brigade vehicles <b>(Only where not subject to a vehicle accident, personal injury or other claims procedure)</b>	Dangerous or careless driving, damage to vehicles or property, erratic driving causing public concern or injury, parking issues, highway code violations
C6	Noise disturbance	On station; leaving station; noise of sirens
C7	Issues associated with HFSVs (non behavioural)	Smoke alarm fitting, damage caused, misinformation, policy
C8	Damage caused by the Brigade <b>including Environmental damage</b>	To property (including forced entry). Complaints linked to Environmental damage should be highlighted to the Environment Advisor (ext. 31217).
C9	Policy issues	Fire cover (including attendance times); charging; youth engagement (inc. initiatives); older people
C10	Selection process issues (External candidates only)	Failure to be short listed; difficulty with selection tests
C11	Accessibility issues	To information (press, fire safety, general); disability access; access to buildings (in general)
C12	Criminal allegations/actions	Fraud; theft; assault ( For record only)

## Document history

### Assessments

An equality, sustainability or health, safety and welfare impact assessment and/or a risk assessment was last completed on:

EIA	11/10/2008	SDIA	23/11/2011	HSWIA		RA	
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### Audit trail

Listed below is a brief audit trail, detailing amendments made to this policy/procedure.

Page/para nos.	Brief description of change	Date
Page 14	Updated contact details from Legal and Democratic Services to Information Access.	23/05/2011
Throughout	Department names updated to reflect the Top Management Review.	19/10/2011
Throughout	Policy reviewed as current. Paragraph 1.6 added. Changes made to paragraph 3.1 and 9.5. Minor changes made to Appendix 3. Please read these sections to familiarise yourself with the content.	23/11/2011
Page 14	SIA date added.	07/02/2014
Page 1	Owner details changed from Head of Communications to Head of Media and Internal Communications.	13/02/2014
Page 14	'Subject list' table - template updated.	29/01/2015
Page 11	Policy Reviewed as current. Mention of state three response as the process has been reduced to two stages with changes to final sign off by HoS/AC to LGO stage. Removal of mention of Corporate Complaints and Compliments Officer. Owner changed from Head of Media and Internal Communications. to Head of Communications. Changes to CCM role following deletion of Corporate Complaints and Compliments Officer. Requirement to produce annual CB report.	07/07/2015
Throughout	Changes have been made to reflect the abolition of the London Fire and Emergency emergency which has now been replaced with the London Fire Commissioner.	19/07/2018
Throughout	Changes have been made to team and department names to reflect the abolition of the London Fire and Emergency Planning Authority which has now been replaced with the London Fire Commissioner.	07/11/2018
Throughout	General terminology updates made due to changes over the last couple of years throughout the Brigade.	23/07/2020

## Subject list

You can find this policy under the following subjects.

Compliments and complaints	

## Freedom of Information Act exemptions

This policy/procedure has been securely marked due to:

<b>Considered by:</b> (responsible work team)	<b>FOIA exemption</b>	<b>Security marking classification</b>

# FSRP800: Audit & Performance Policy

## Fire Safety Regulation Policy: Audit & Quality Assurance

New policy number: **FSRP800**  
 Old instruction number: **N/A (Various)**  
 Issue date: **Feb 2012**  
 Reviewed as current: **10 September 2015**  
 Owner: **Fire Safety Regulation**  
 Responsible work team: **Audit & Performance**

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# 1 Introduction

- 1.1 The Audit & Performance group provide strategic level support for the FSR Leadership team in terms of reviewing performance and identifying development needs for fire safety staff. The group is responsible for ensuring that the Authority meets its responsibilities in monitoring and identifying action points on individual staff performance in carrying out the fire safety regulation function.
- 1.2 This is achieved through the preparation and review of associated policy, the management of a team of performance review officers and preparing and reporting appropriate action plans based on findings.
- 1.3 This document also introduces the 800 series of FSIGN's – the guidance and information documents that provide a supporting framework with the detail enabling consistency of policy interpretation and application of the detailed elements of the staff role in fulfilling the Authority's fire safety regulation performance review functions.

## 2 Vetting of FSR work

### Vetting of IOs work

- 2.1 Where performance issues are identified under the vetting process, these are to be dealt with through the Performance Review and Development System (PRDS) process.
- 2.2 TL's are to vet the workload of each IO in their team on a minimum monthly basis.
- 2.3 At least one joint visit per year is to take place with each IO.
- 2.4 Any disagreement between the IO and the TL over the vetting process is to be referred to the AFSM /FSR Group Head/HoP.
- 2.5 Copies of completed vetting forms are to be kept for at least three years in a secure location.
- 2.6 Vetting records relating to an IO are to be forwarded to the new TL in the event the IO moves teams.

### Vetting of Admin Work

- 2.7 On a monthly basis the fire safety administrative officers (FRS C) are to carry out a check of all FS03 & FS08 jobs and a minimum of 10% of all other jobs the fire safety Inspecting Officers have cleared.
- 2.8 Using Vetting Pro-forma (Administrative Work) a record of the findings is to be made.
- 2.9 When areas causing concern are identified, the pro-forma is to be passed to the Administrative Team Leader (FRS D) to action.
- 2.10 Records are to be kept for at least one year, in a secure place, to aid the monitoring of quality.
- 2.11 The Admin Officer and/or the Administrative support TL may provide direction on the other areas of vetting that would aid quality and data management.

### Vetting Data on Farynor

- 2.12 The fire safety administrative support team will carry out the routine data checks. Where discrepancies occur they are to be corrected or referred to their line manager as appropriate.

- 2.13 The Audit and Performance Group (APT) in the FSR Department, will programme structured checks of the system during the year. Where considered necessary, APG will prepare and submit a report to Admin Manager (FRS E) identifying any concerns and trends arising from these checks.
- 2.14 In addition they will carry out a number of on-site and 'desktop' audits to verify the quality of data on the system. The outcomes of these checks will be passed to the Admin Manager (FRS E) for information and appropriate action.

### **Validating the Vetting Process**

- 2.15 The AFSM, Admin Manager (FRS E), and FSR Group Head will validate the vetting process applicable to their particular area of responsibility. This is to assist them in their overall assessment of quality.
- 2.16 Where appropriate, the validation of the vetting process shall involve both office and site evaluation. Random validation should be carried out at the discretion of the senior manager to meet the needs of the fire safety team they have responsibility for. The AFSM will carry out a minimum of one joint visit per TL per year. The vetting form is to be signed by the senior manager on completion of the validation.
- 2.17 Consideration must be taken of the size of the team workload, the job types, work complexity and knowledge and experience of the team members. Any validation programmes must take into consideration the competency of the fire safety team members and reflect the fire safety team annual plan and Corporate needs.

## **3 Auditing the fire safety function**

- 3.1 FSR Leadership Team in conjunction/consultation with the APG will determine which work systems, elements or processes, within the workplace, require auditing.
- 3.2 The auditing of the statutory fire safety function will be co-ordinated by the APG under direction of the Assistance Commissioner (Fire Safety). APG will be responsible for carrying out the audits and reporting the findings.
- 3.3 Audits, targeting specific work systems or processes, will be programmed on a regular basis with an annual plan being agreed by FSR Leadership Team departments for the proceeding year.
- 3.4 In addition to the above, supplementary audits may be requested at any time by the AC (Fire Safety) and/or the Director of Operations in order to target specific areas of the fire safety function. Any such requests may also be instigated by AFSM/FSR Group Heads via their respective line manager. Requests should be made in writing for consideration. In these circumstances the required period of notice to the auditee may be waived.
- 3.5 The workplace specific report and the final audit report are to be structured in the same manner. The reports will contain the following sections:
- A title and audit number
  - Audit dates, location, team members and workplace representatives
  - Audit scope and objective
  - Summary of findings (Good and bad)
  - Observations, recommendations and conclusions
  - Name and signature of report author
  - Appendices listing supporting documentation

- 3.6 After the audit, the local management team is responsible for ensuring that any necessary corrective and preventive action identified and recorded within the workplace audit is carried out.
- 3.7 Audit and Performance Group has the responsibility to independently check that the action(s) have been taken and are effective
- 3.8 It is essential to maintain internal audit records. These will predominantly consist of audit reports, non-conformity reports, audit checklists and schedule of auditors. The Audit and Performance Group has responsibility for this function. All records will be kept in a secure manner due to the confidential nature of some of the information.

## **4 Customer Care Standards**

- 4.1 Fire safety regulation staff will uphold the standards and expectations of the Authority in regard to individual conduct in all the various aspects of fire safety regulation work. Guidance is provided to fire safety regulation staff on the expected level of performance of the individual and the standards they should aim to achieve when carrying out their work functions. The guidance contains advice on standards relating to customer care, which covers areas including behaviour, confidentiality, timeliness of response and actions, consideration and officer best practice.

## **5 Performance Indicators**

- 5.1 Responsibility for producing the information for these indicators rests primarily with APG. Information Management (IM) provide the figures for comment by responsible departments prior to their quarterly submission to Members.
- 5.2 All the performance indicators for FSR are stored securely and when produced appropriate managers are notified.

## **6 The FSIGN's supporting FSRP800**

- 6.1 The 800 series FSIGN's contain the following documents which will support the Authority's obligations and objectives in respect of the performance review function in fire safety regulation, whether for applicable legislative requirements, internal audit and data collection or reporting (internal and external bodies and government).
- 801 Vetting of FSR work
  - 802 Auditing the FSR Function
  - 803 Customer survey questionnaire
  - 804 Customer care standards
  - 805 FSR performance indicators

## Document History

### Impact assessments

An Equality or Sustainability Impact Assessment was completed on:

Equality Impact Assessment	23/05/2012	Sustainability Impact Assessment	30/03/2015
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### Audit trail

Listed below is a brief audit trail, detailing amendments made to this policy/procedure.

Page/para nos.	Brief description of change	Date
All	Application of 'FSRP' to Policy name and associated referencing	19/11/2014
All	To reflect re-introduction of FSIGN801 to 806 docs and forms	10/09/2015