

Sent by email:

Gavin Ellis
Chief Fire Officer
Devon and Somerset Fire and Rescue Service

6 March 2026

Dear Gavin,

Devon and Somerset Fire and Rescue Service revisit

Between November and December 2024, we inspected Devon and Somerset Fire and Rescue Service. During our inspection, we identified the below [cause of concern](#) and made six recommendations.

Between 19 and 21 January 2026, we revisited the service. We have kept all six recommendations and the cause of concern open.

Cause of concern

The executive board recognises it needs to do more in prevention. But not enough progress has been made since our last inspection to make prevention a sufficiently high priority for the service. The service should implement a robust and consistent method of prioritising its [home safety visits](#) to those most at risk and make sure there are clear timescales in place for the different risk levels.

Recommendations

The service should develop an action plan to:

- make sure its supporting systems provide an accurate picture of prevention-related community risk, so that staff can prioritise the most [vulnerable](#) people;
- create and maintain clear time frames relative to risk;
- make sure it quality assures its prevention activity, so staff (including [wholetime](#) firefighters) carry out home safety visits to an appropriate standard;
- review whether wholetime firefighters can offer more capacity to prevention and complete higher-risk home safety visits;
- make sure there is a clear process for post-incident prevention activity; and
- evaluate its prevention work (particularly home safety visits), so it understands the benefits better.

On 15 April 2025, you submitted an action plan setting out how you would address the cause of concern and our recommendations.

During our revisit we reviewed progress against the action plan. We interviewed staff who were responsible for developing this plan, including you as chief fire officer. We also interviewed managers and staff with responsibility for cause of concern actions, together with colleagues from their teams.

On 3 February 2026, we shared our initial findings with you. This letter provides an update on our findings.

Governance

We found appropriate governance arrangements in place to monitor progress of your action plan.

The service holds monthly professional standards board meetings that heads of department and executive board members attend. At these meetings, the people accountable and responsible for the cause of concern actions provide updates on them.

The chief fire officer and deputy chief fire officer receive further progress reports from the prevention team area manager and the external advisor, which helps to quality assure prevention improvement work. And the service provides quarterly updates to the community safety committee and the [fire and rescue authority](#).

The service could improve the robustness of these governance arrangements. For example, some of the reports to the fire and rescue authority provide only a narrative update. To improve the authority's oversight, the service should give more clarity on progress against actions and how it is performing against the timescales it has set itself for closing cause of concern recommendations.

Action plan

The service has set out an agreed series of actions to meet the recommendations associated with the cause of concern in an action plan. In the plan, the service identifies the people accountable and responsible for each action and states expected completion dates.

The service co-ordinates the plan using an electronic tool that records progress against each of the actions. Before our revisit inspection, an external advisor reviewed the action plan. This led the service to amend several actions and develop others, which has resulted in a lack of continuity in some areas.

The service gave us an overview of its action plan, which showed how much of the work it had carried out. Of the 16 actions in total, the service had recorded 13 as 'completed', and the remaining 3 as 'in progress'. However, in our review of the electronic recording tool we found that the service hadn't recorded any of the 16 actions as 'closed'.

The service considers a recommendation 'closed' when it has completed and assured all associated actions. Despite a number of actions being completed, due to the timing of the revisit, the service had not undertaken the assurance required to close the associated recommendations.

The service recognises that it needs to do more work to close the recommendations. It is unclear when this will be complete.

Progress against cause of concern

Recommendation 1: make sure its supporting systems provide an accurate picture of prevention-related community risk, so that staff can prioritise the most vulnerable people

The service's prevention management information systems severely limit the effectiveness and efficiency of its work. Despite this, staff are doing all they can with the existing systems. The service has prioritised work according to risk. One of the completed actions is the development and use of a new risk stratification process.

There is strong strategic backing for procuring a new prevention management information system. The service is confident it can get the necessary funding approvals for the 2026/27 financial year.

The service's digital, data and technology department collaborates effectively with its prevention team. This includes taking a co-ordinated approach to establishing system users' requirements. This helps make sure that the service will include improvements in effectiveness and efficiency in the specification for a replacement system.

The service still has work to do in this area, specifically in relation to its management information systems, and we are therefore keeping this recommendation open.

Recommendation 2: create and maintain clear time frames relative to risk

In the months before our revisit, the service reduced the backlog of people referred from partner organisations, such as the South Western Ambulance NHS Foundation Trust and the National Grid, for home fire safety visits (HFSVs).

On 14 November 2025, the total number of people waiting to have appointments booked was 2,051. During our inspection, we found that the service had put measures in place to improve monitoring and deal more efficiently with the backlog, which it has now reduced.

To make sure its prevention technicians have a continuous flow of appointments, the service aims to have between 500 and 1,200 cases awaiting allocation. The service told us that on 16 January 2026, the number awaiting allocation was 1,293. The service should make sure it maintains an efficient caseload amount for a sustained period, and that it doesn't allow a backlog of people waiting for HFSVs to build up.

During our revisit inspection, the service also told us about new key performance indicators it had developed for different risk categories of HFSVs. It hadn't yet put these key performance indicators in place. We look forward to reviewing the service's performance against them in future.

The service still has work to do in implementing and sustaining these performance measures and making sure staff adopt them. Therefore, we are keeping this recommendation open.

Recommendation 3: make sure it quality assures its prevention activity, so staff (including wholetime firefighters) carry out home safety visits to an appropriate standard

The service has made some progress against this recommendation. It has developed additional online HFSV training for wholetime and [on-call](#) firefighters. We found that staff completion rates for this training were very high.

The service has also improved its quality assurance processes for HFSVs. We found that there are robust arrangements in place for quality assuring technicians. The service plans to use a similar approach for quality assuring wholetime crews when it introduces this to stations (see recommendation 4).

The service has more work to do in quality assuring the prevention activity of wholetime firefighters. We are therefore keeping this recommendation open.

Recommendation 4: review whether wholetime firefighters can offer more capacity to prevention and complete higher-risk home safety visits

We found that firefighters were generally receptive to the need to carry out higher-risk visits referred to the service. This approach is more effective than door knocking at houses in certain areas, as the service was doing when we inspected it in November and December 2024.

At the time of our revisit, the service was carrying out a pilot scheme at two wholetime stations involving firefighters carrying out higher-risk visits. It planned to expand this approach across the remaining ten wholetime stations by 1 April 2026.

While it is positive that the pilot is underway and that the service is evaluating its success, we identified some inaccurate risk labelling of HFSVs in our review. The service had incorrectly classified some referrals as low risk, when clearly the referral was for a high-risk vulnerable person. The service has now carried out HFSVs for these cases. It has reviewed both the data given to the two pilot stations and the system issues that caused these anomalies. And it has taken steps to prevent such mistakes happening again.

There are some measures in place for the pilot stations to give their views on the scheme's effectiveness. The service should make sure that appropriate systems are in place to consider and address this feedback before it expands the scheme to other stations. The service has set itself challenging time frames for introducing the

changes to other [watches](#) and stations. And there is potentially limited capacity to respond to the feedback it receives.

The service still has work to do in relation to increasing its prevention capacity, and we are therefore keeping this recommendation open.

Recommendation 5: make sure there is a clear process for post-incident prevention activity

The service has made good progress with this recommendation and has completed several actions, including:

- carrying out a review (going back to January 2024) of [dwelling fires](#) and home safety activity carried out after these incidents;
- updating the incident recording system to require further detail on post-incident prevention activities;
- communicating these changes to staff and reinforcing the importance of post-incident prevention activities; and
- introducing performance management measures to monitor and ensure compliance.

The service carried out most of this work in December 2025. It needs to put further supervision and monitoring in place to evaluate the changes.

The service still has work to do in sustaining post-incident prevention activity and making sure staff understand its importance. We are therefore keeping this recommendation open.

Recommendation 6: evaluate its prevention work (particularly home fire safety visits), so it understands the benefits better

The service has completed several actions within this recommendation. These include setting up a framework to measure the effectiveness of HFSVs. The service uses text messaging to gather feedback from people who have received an HFSV. This provides insight into how people who receive the visits change their behaviour.

Every quarter, the service reports internally on the findings of its HFSV evaluation. To date, seven percent of people invited to take part in the survey have given feedback. The service's evaluation report for September to December 2025 included some positive findings. For example, following an HFSV:

- Ninety-six percent of respondents (506 out of 528) either agreed or strongly agreed that they felt safer in their home.
- Seventy-one percent of respondents (373 out of 528) made changes within their homes.
- Ninety-one percent of respondents (474 out of 528) were very satisfied with their visit, with a further seven percent (39 out of 528) saying they were satisfied with their visit.

In addition, the service has commissioned an external advisor to assess its home fire safety processes. In their report of 29 December 2025, the advisor evaluated aspects such as national data comparisons, quality of HFSVs, productivity and post-incident prevention activity. They also set out a series of recommendations for the service to consider alongside its cause of concern action plan.

The service still has further work to carry out against this recommendation, and we are therefore keeping it open.

Conclusion

Despite making good progress against the cause of concern recommendations, the service still has more work to do. The service recognises that it is too early to fully close any of the recommendations.

The service concluded a lot of activity shortly before our revisit. The service will need to evaluate these actions, and make sure it is effectively managing and mitigating the risk to those most vulnerable from fire. It also needs to make sure that all staff accept and understand the changes and that it can sustain these over the longer term.

We will return to Devon and Somerset Fire and Rescue Service to assess whether the service has made satisfactory progress against its action plan and if the service provided to the public has improved.

We will publish this letter on our website.

Yours sincerely,

A handwritten signature in black ink, appearing to be 'K. Stone', written in a cursive style.

Kathryn Stone OBE

His Majesty's Inspector of Constabulary

His Majesty's Inspector of Fire & Rescue Services