

Strategic Performance Report



Quarter 1 2018/19



We will ensure appropriate fire safety standards in buildings



We will seek opportunities to contribute to a broader safety, health and wellbeing agenda



We will educate people on how to prevent fires and other emergencies, and what to do when they happen



We will ensure that Royal Berkshire Fire and Rescue Service provides good value for money



We will ensure a swift and effective response when called to emergencies



We will work with Central Government to ensure a fair deal for Royal Berkshire

ROYAL BERKSHIRE
FIRE AND RESCUE SERVICE

Enabling people to lead safe and fulfilling lives



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This version of the report was last updated on 23/10/2018

Introduction

This Strategic Performance Board Quarterly Report retrospectively presents information from the Performance Management Framework and Corporate Measures and Targets for 2018-19, with the exception of Corporate Risks, which are current at the time of publishing. The purpose of RBFRS' Performance Management Framework is to provide structure and governance that enables us to measure, monitor and manage outputs and outcomes in a timely manner; allowing us to respond and make informed decisions to ensure that our statutory obligations and the Fire Authority's Strategic Commitments are successfully delivered.









This report contains performance across four Quadrants:

Quadrant One: Service Provision	Quadrant Two: Corporate Health
This section groups together all data, information and measures from across the organisation, which allows members to monitor how RBFRS is performing against its statutory obligations and any internal services provided between teams, departments and functions	This section groups together all data, information and measures from across the organisation, which allows members to monitor how RBFRS are managing key resources e.g. People and Finance.
Quadrant Three: Priority Programmes	Quadrant Four: Corporate Risk
This section groups together all data, information and measures that allow members to monitor progress of work designed to deliver a defined outcome, which is different to, or improves on current working practices, policies and procedures in support of delivering against the strategic commitments and Vision 2019.	This section groups together all data and information from across the organisation that provides an assessment of corporate risks that may impact on service delivery. This section also includes data and information from audit monitoring.

The aim of this report is to share with you how RBFRS has performed over the previous three months, and capture how performance contributes cumulatively to the year-end performance outcomes, offer explanation, analysis and mitigation for target outcomes, and to suggest positive means of carrying effective performance into the future.

This report has been reviewed by the Strategic Performance Board chaired by CFO Trevor Ferguson, to ensure issues and corrective actions are discussed and owned by Heads of Service. This report has also been reviewed and discussed at Senior Leadership Team (SLT) to ensure any strategic issues are addressed. Summaries for each Quadrant can be found at the beginning of each section, and any supporting documentation, charts and closed off information can now be found in the appendices.

Key to Icons and Colours

	Target exceeded by more than 10%
	Target met or exceeded by up to 10%
	Target missed by up to 10%
	Target missed by more than 10%
	NA or data accuracy issues affect confidence in reporting
	Improvement in performance
	Maintenance of performance
	Decline in performance

Key Highlights

Context

Key Data – April – June 2018

	Quarter 1 2018/19	Year to date 2018/19 (to end of Q4)	Quarter 1 last year (2017/18)	Year to date last year – 2017/18 (to end of Q1)
Emergency incidents responded to	2026	2026	2004	2004
Primary Fires	273	273	252	252
Secondary Fires	308	308	371	371
Special Services (RTC)	116	116	104	104
Special Services (other)	351	351	322	322

IRMP Progress

- Prevention Commitment 1: To reduce the number of vulnerable people dying due to accidental fires in the home by conducting 35,000 Home Fire Safety Checks / Safe and Well visits over the next 5 years and 14,000 within the first two years.
Since April 2017, we have completed 7,990 Home Fire Safety/ Safe and Well checks.
- Prevention Commitment 2: To reduce the volume of fires occurring in homes and injuries that result from them by conducting 12,500 Home Fire Safety Checks/ Safe and Well visits over the next 5 years.
Since April 2017, we have conducted 3,788 Home Fire Safety/ Safe and Well checks.
- Protection Commitment 1: Carry out 1,400 full fire safety audits per year in places where people are most at risk and where necessary standards are not being met.
Since April 2017, we have concluded 1,135 audits. A further 292 audits have been completed and the service is still open, awaiting further actions to be completed.

Successes

All safeguarding referrals were made to the relevant authority within the 24 hours target. The safeguarding children level 1 training has been rolled out across the organisation and there is an increase in the number of referrals being received by the Safeguarding Coordinator.

There has been a significant reduction in the number of deliberate secondary fires compared to the same period last year (76 vs 130). The weather and prevention activities have influenced this reduction.

The number of Safe and Well visits to those at risk of being injured in a fire has exceeded the target of 625, with 739 visits. We have achieved the highest number of Safe and Well visits to those at risk of dying in a fire, 1971, compared to previous quarters and are significantly closer to the target of 2050 per quarter.

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Key Highlights

Nine referrals were received from partners for individuals who had been threatened with or experienced an arson attack. A home safety visit was conducted within 24-hours of RBFRS being notified for all these individuals.

There has been a 12 percentage point increase in the proportion of fire safety audits completed on higher risk premises, which have found to be unsatisfactory, as agreed in the IRMP (April 2017) compared to the previous year (33.2% to 45.2%). The amount of formal and informal activity conducted following a fire safety audit has also increased.

Six wholetime recruits completed their training during quarter one and are now working on stations.

100% of those responding (62) to the customer feedback surveys were satisfied with the service they received either following a fire or a fire safety audit.

The proportion of occasions where wholetime crews turnout within 90 seconds has improved by 13.3 percentage points in the last 12 months from 76% to 89.3%.

The percentage of spend subject to competition continues to improve and has exceeded the target by 23.1 percentage points.

In this quarter we have seen a decrease in the percentage of working time lost to sickness per employee. This decrease of 1.2% on the previous quarter is due to both short and long term absence reducing. However, this still remains above target at 3.4%.

The total days lost to sickness this quarter has decreased by 29% compared to Q4 (915 in Q1 and 1284 in Q4) and 24% lower than Q1 last year (1204 in 2017/18)

The number of long-term sickness days lost has reduced by 16.5% to 637 and short term by 41% to 383.

Mental health absence has increased this quarter by 15 days, but remains lower than the same period last year.

Musculoskeletal (MSK) remains the top cause of sickness absence equating to 27% of days lost however compared to last quarter the number of days lost has reduced by 114 days (24.4%). Although the number of days has reduced the number of episodes remains consistent, this suggests that individuals are returning to the workplace quicker.

99.3% of the 405 individuals undertaking their fitness test have met the fitness standard.

The percentage of eligible staff (556) where a PDI meeting has taken place is 54.5% (53% Q1 last year), as recorded on FireWatch.

The percentage of eligible operational staff in qualification has shown an improvement of 4.5% compared to the same quarter last year, and now stands at 99.5%.

The proportion of employees from a BME background has increased by 0.4% from last quarter due to three BME employees joining the service and one employee leaving. Overall, the percentage of employees from a BME background stands at 6.9%, exceeding the current target of 5%.

The number of female employees has increased this quarter. This is due to nine new female employees joining the Service. However, percentage of female firefighters has decreased by 0.1% to 4.3% as 17 male Firefighters also joined the Service. Although there has been a slight decrease we have still exceeded our target of 4%

The percentage of staff employed with a disability has increased from 5.3% in Q4 to 5.7% in Q1.

Concerns and plans for improvement

There has been a significant increase in the number of casualties during the first quarter (15). However, one third of these (5) occurred during one incident. This is being investigated to see what lessons can be learnt and actions taken for future prevention.

The total number of fire safety audits completed, 250, is still below the target of 350. As more higher risk premises are inspected, the amount of time to bring each premise to a satisfactory standard increases. Work continues to train the new fire safety inspecting officers. This has drawn on existing resources, but as they become more competent this will increase capacity to deliver fire safety audits.

The proportions of incidents where Thames Valley Fire Control Service (TVFCS) mobilise appliances within 90 and 120 seconds have fallen slightly during quarter one compared to 2017/18 (2.9 and 2.5 percentage points). The incident types and duplicate calls have all had an impact on this measure, as often outdoor fires are hard to establish an exact location and tend to attract higher call rates.

Emerging issues, risks, and focus for next quarter

The second data collection and document request for Her Majesty's Inspectorate for Constabulary and Fire and Rescue Service (HMICFRS) will be submitted during quarter two. The self-assessment is also due for completion in Q2 in preparation for the inspection in January 2019.

Three new risks have been added to the risk register since the Q4 update.

One relates to the development of the Theale site and the others to the remotely managed stations and flexi-duty officer project. More information on these risks can be found on page 69.



Supporting Performance Information

Quadrant One: Service Provision *

(Data accurate as of 13/07/2018)

ID	Measure *	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Dwelling Fire Deaths and Safeguarding											
1	Number of Fire Deaths in Accidental Dwelling fires	0	0				0	0	2	2	↑
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >)									
		We continue to deliver safe and well visits to those at risk of dying as outlined in measure six to proactively contribute to the prevention of fire deaths in accidental dwelling fires.									
2	Number of Fire Casualties in Accidental Dwelling Fires	29 MAX	15				15	8 MAX	7	7	
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >)									
		The figures for this quarter show a significant increase in casualty numbers when compared to a four-year Q1 average of six persons. This said, a third of this quarters casualties (5) came from one incident. Single incidents that involve a high number of casualties are rare and can create a spike in the totals for a single quarter. Officers are investigating the circumstances of this incident to determine where we can influence the contributory factors or where specific action needs to be taken.									
		Given the Q1 figures build on a figure of 10 reported casualties in Q4 of 2017/18, we are now monitoring for a potential upward trend. We will be looking at this in relation to overall incident numbers, how casualty numbers are being reported and how this compares to our risk mapping and prevention activity. Hub managers will update on this research and analysis in future quarterly reports and use any findings to drive on-going prevention activity.									
		In the main, fire casualties are persons who have been affected by the fire, such as through smoke inhalation, but who do not suffer longer-term health impacts. Fire casualties who do suffer longer-term health impacts or life changing injuries from fire are more uncommon. To put this into context of the 15 casualties in this quarter, 14 were slight (meaning attending hospital as an outpatient) and 1 was severe (meaning – at least an overnight stay in hospital as an in-patient). We continue to be vigilant in understanding how and when we can prevent such incidents or reduce the impacts of fire.									

*See appendix E for service provision corporate measure definitions

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Quadrant One: Service Provision

ID	Measure *	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance										
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD								
3	% of safeguarding referrals made to Local Authorities within 24 hours	100%	100%				100%	100%	100%	100%	↔								
		(Source: Manual calculation by Safeguarding Coordinator)																	
		There were 46 safeguarding referrals made during Q1. The current safeguarding provision stays in place, with a fulltime Safeguarding Coordinator, overseen by the Prevention & Safeguarding Policy Manager with the added resilience of the Duty Officer availability over evenings and weekends. The Universal Safeguarding Children Level 1 training has been rolled out and has been received well. Development of Safeguarding Vulnerable Adults Training is in progress with the Safeguarding Coordinator, this training is due to commence delivery in Q4.																	
4	The number of deliberate primary fires	Monitor	37				37	Monitor	33	33									
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >) Data as 31/07/18) We see a slight increase in the number of deliberate primary fires when compared to the Q1 of last year. Officers continue to monitor performance for any change in trend and to inform local targeted activity to address deliberate primary fires. This is because they can be formed from spate activity, such as an individual setting a series of fires. This therefore requires local activity, often in conjunction with colleagues from the police or other agencies and may be supported by fire investigation where necessary.																	
5	The number of deliberate secondary fires	Monitor	76				76	Monitor	130	130	↑								
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >) Data as of 31/07/18) In comparison to quarter 1 in 2017/18, we see a much lower number of deliberate secondary fires this quarter. The beginning of the quarter saw a lot of cold, wet weather, which would have influenced the number of incidents. There can be a range of factors that influence activity in this area, such as weather, spate activity by an individual, school holidays. We continue to educate on the impact of deliberate fires and we monitor for trends to inform local targeted activity as set out in measure 4 above.																	
		<table><tr><td>East Hub</td><td>11 incidents</td></tr><tr><td>Central Hub</td><td>18 incidents</td></tr><tr><td>West Hub</td><td>47 incidents</td></tr></table>		East Hub	11 incidents	Central Hub	18 incidents	West Hub	47 incidents										
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Quadrant One: Service Provision

ID	Measure *	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Prevention											
6	Risk of Death	8,200	1979				1979	2050	1,451	1,451	↑
7	Risk of Injury	2,500	743				743	625	778	778	
	TOTAL	10,700	2722				2722	2675	2,229	2,229	↑
	Number Safe and Well visits delivered to those who are at heightened risk of dying/being injured in the event of an accidental dwelling fire	(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >) Data as of 19/09/2018 This quarter we are nearer achieving the overall target and the number of Safe and Well visits to those at 'risk of death' is at its highest level for a year and a significant increase on Q1 2017/18. The 'risk of injury' category has been consistently above target for the last year and the challenge for the Hubs is to try and get the balance between the two areas. Hub Prevention leads continue to work with Community Safety Advisers (CSA) to manage the flow of referrals, assessing and prioritising the visits that crews undertake to balance the influx of referrals against available capacity to ensure we manage risk appropriately. This is in combination with ongoing work to improve the use of safer data and enabling the CSAs to work with other agencies to generate referrals that target those more vulnerable people, (those that would be at greater risk of dying in a fire). In the latter part of this quarter we saw a rise in operational activity due to the hot weather and the increase in wildfires. This will have had an impact on the capacity to reach Safe and Well targets and we expect this impact to carry through into Q2 as the hot weather continues.									
8	% of priority home safety referrals, where there has been a threat or incidence of arson, completed within 48 hours	100%	100%				100%	100%	83%	83%	↑
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >) There were 9 Referrals in quarter 1 The new process involving TVFCS and the Duty Officer has led to a much swifter and flexible response to these referrals, which has resulted in achieving the target. We typically have a response ready within a few hours and any delays beyond that timescale are usually due to the householders not being contactable or ready to receive the Safe and Well visit. We do still however receive a few arson referrals that have been incorrectly routed, which can result in delays in response e.g. referrals received from agencies other than the police at weekends or over public holidays. Action is being taken to address these areas, for example through changes to the referral form and providing an auto-response to emails and telephone calls advising callers to contact the police if there is a threat of arson or harm.									

*See appendix E for service provision corporate measure definitions

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Quadrant One: Service Provision

ID	Measure *	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
9	% of priority category 1 home safety referrals, where there is a significant heightened risk of an individual having a fire in their property, completed within 48 hours	Monitor	n/a				n/a	Monitor			
		(Source:) Awaiting full Policy Definition. A draft definition has been proposed by prevention policy and the next stage will examine the impact of this on workloads. Procedures and systems can then be set up to allow for implementation and recording of this data.									
Protection											
10	Full Audits	1400	250				250	350	262	262	
	Total Number of Full Fire Safety Audits carried out	(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >)									
		The number of full audits has increased from 173 in Q4 2017/18, but is still short of the target. As set out in previous quarterly updates we have made a significant change in our inspection programme and our focus of inspection is on those premises we understand present the greatest risk. This means our qualified inspecting officers undertaking more complex visits which may require more time to complete and can lead to informal or formal activity [see measures 12 and 13] resulting in a lengthier process to complete the audit activity relating to a premise. However, we know this focus on risk is the right approach for the long-term greater impact on the safety of communities.									
		We continue to support our project work in response to Grenfell and this impacts capacity, with Fire Safety Inspecting Officers seconded to the Community Safety Project Team, (discussed in the Q4 report). It is planned these personnel will return to the Hubs this autumn,).									
		We have recruited a number of new Fire Safety Inspecting Officer (FSIO) team members but this has initially created a draw on existing resources to mentor these new FSIO team members. As these team members become fully developed this will increase overall capacity, however, as set out in the commentary for measures 11-13 below that there is currently significant focus on their development.									
		We have also seen an increase in statutory building consultations, which reduces the time available for inspections. The latter have been increasing steadily over Q1, for example in the West Hub from 39 in April to 55 in June. To address this issue Protection managers are exploring the possibility of utilising an external resource to support the building consultation work so that FSIOs can focus on delivering audits.									

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Quadrant One: Service Provision

ID	Measure *	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
11	Satisfactory	50% max	54.8%				54.8%	50% max	66.8%	66.8%	↑
12	Informal Activity	45% min	29.4%				29.4%	45% min	26.7%	26.7%	↑
13	Formal Activity	5% min	2.4%				2.4%	5% min	1.2%	1.2%	↑
14	Success Rate	4:1						4:1			
	Outcomes of Full Fire Safety Audits (above)	<p>(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19>)</p> <p>Success Rate: Manual input from Group Manager – Protection</p> <p>Formal activity has been increased in the last six months and this quarter represents a significant achievement in this area, one which has strong links to improved community safety. However, the balance across measures 11-13 is not consistent with the targets. This is being influenced by a number of factors. Firstly, the development of our new FSIOs requires them to be mentored by more experienced team members whilst they undertake audits of simple premises that are more likely to be found 'broadly compliant' with the relevant legislation. This has an effect on the experienced officers' capacity to undertake their own audits and focus on higher risk premises. The remaining capacity of those experienced officers, which has also been reduced through retirements and secondments out to the Community Safety Project Team, is being prioritised to deal with the ongoing number of fire safety complaints, post fire inspections and audits as a result of automatic fire alarm actuations. The outcomes of these more responsive audits, requiring immediate action to reduce community risk, will inevitably be a mixture of compliance and non-compliance. As the new FSIOs become more experienced, the need for mentors for simple audits will reduce and over the course of this year they will undertake the next level of qualification and begin to undertake more complex audits themselves.</p> <p>There have been no prosecutions in Q1.</p>									

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Quadrant One: Service Provision

ID	Measure *	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Response											
15	% of occasions where the first fire engine arrives at an emergency incident within 10 minutes, from time the emergency call was answered	75%	73.4%				73.4%	75%	72.4%	72.4%	↑
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19>)									
		The Q1 figure is an improvement on Q1 of 2017/18 and consistent with the average for the whole of 2017/18, which was 73.1%. Meeting the target is an ongoing challenge. The overall response time from when the call is answered is made up of three key components: call handling, turnout time and travel time.									
		Within each component there are a number of influencing factors that may impact the amount of time taken to complete that part. For example, in call handling (documented in service measure 5 and ideally within 90 seconds) there may be challenges in acquiring all the necessary information to then identify the best resource for mobilisation (the caller may not know the address, there may be language barriers etc.). TVFCS managers are continually looking for means to improve call handling and mobilisation times. Service Delivery managers liaise regularly with TVFCS colleagues to understand how they can jointly improve performance.									
		Turn out time is the time taken from receiving the call at a fire station, or the current location of the fire engine, to beginning the journey to an incident. Service delivery hub managers have given a great deal of scrutiny to this area, working with local teams to improve the turn out times. 90 seconds is the turnout target and again anything above that will impact on the time available for travel to the incident. This scrutiny has resulted in significant improvements, documented in service measure 7 at 89.3%, just 0.7% off the target and a big improvement from the previous year. This maximises the chances of achieving the response standard.									
		The ideal call handling and turnout time combined is 3 minutes. Therefore, where the travel time to an incident is greater than 7 minutes then the target would be missed. Of course, factors such as traffic, time of day, weather activity and concurrent activity can have an influence on the nearest available appliance and the speed with which it can get to an incident. Clearly the faster the call handling and turn out times the more time there is for travel.									
		In some areas we see greater impacts than others from longer travel distances, For example in the west of the county or where gaps in cover are created as incidents occur or crews attend training events. Hub managers actively look to minimise the impact of these type of situations, for example by balancing appliance availability when training occurs and use of Retained Duty System (RDS) for standbys. Equally, TVFCS will continually look to balance the deployment of resources based on the overall range of operational activity and demand that is taking place.									
		Work is currently being undertaken to consider the impacts from other deployments, such as attending incidents or standbys in other services that in turn create longer travel times for incidents within the County as appliances have to travel further afield. There is a careful balance to be struck as mutual assistance with cross border arrangements is, in the main, mutually beneficial and effective.									

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Quadrant One: Service Provision

ID	Measure *	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
16	Whole Time(shifts)	100%	100%				100%	100%	100%	100%	
17	RDS (hours)	60%	32.4%				32.4%	60%	Awaiting revised figure	Awaiting revised figure	
	% of shifts/ hours where there is adequate crewing on frontline fire engines (above)	<p>(WT Source: Scorecard Corporate Measures - Response – (CTT07a) based on shifts worked at planned appliance crewing for WT (56) and a manual check of FireWatch.</p> <p>The Service aims to maintain 14 wholetime crewed appliances (pumps) and a number of specialist vehicles on the run 24/7, 365 days a year basis.</p> <p>Performance for Q1 was 100% availability, which equates to 14 wholetime pumps having the required crewing to be available for all 182shifts during the quarter.</p> <p>Positive factors affecting availability:</p> <p>6 wholetime recruits completed their training halfway through Q1, augmenting existing establishment levels. A further 14 wholetime trainees commence their initial training in July, with a view to be joining the duty system in Q2.</p> <p>Work is underway to identify suitable Retained Duty System (RDS) personnel able to undertake wholetime contracts to further assist maintaining wholetime appliance availability. This needs to be balanced so that RDS availability is not unduly affected. This said, the experience gained through a temporary contract at a wholetime stations adds value to the capability of the individual in their retained role.</p> <p>A range of workforce monitoring tools were introduced to forecast and support the operational Hubs in managing the establishment. Operational Policy and Support Team (OPAS) will continue to develop and refine these to ensure effectiveness and that adequate crewing is maintained throughout the year. The OPAS data also informs the Workforce Planning Board to further support proactive management across organisational establishment.</p>									

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Quadrant One: Service Provision

ID	Measure *	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance																																															
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD																																													
		<p>(RDS Source: Download direct from FireWatch)</p> <p>The overall figure for Retained availability for the quarter is just over 30%. As can be seen in the table below the cover is highly variable across each station</p> <table><tr><td></td><td>April</td><td>May</td><td>June</td><td>Q1</td></tr><tr><td>Hungerford</td><td>47.9%</td><td>57.5%</td><td>47.8%</td><td>51.1%</td></tr><tr><td>Lambourn</td><td>10.4%</td><td>11.7%</td><td>12.9%</td><td>11.7%</td></tr><tr><td>Pangbourne</td><td>29.2%</td><td>20.8%</td><td>6.9%</td><td>19.0%</td></tr><tr><td>Wargrave</td><td>9.7%</td><td>17.6%</td><td>13.5%</td><td>13.6%</td></tr><tr><td>Mortimer</td><td>3.5%</td><td>5.0%</td><td>1.1%</td><td>3.2%</td></tr><tr><td>Crowthorne</td><td>70.6%</td><td>84.9%</td><td>79.7%</td><td>78.5%</td></tr><tr><td>Maidenhead</td><td>37.4%</td><td>54.2%</td><td>58.1%</td><td>49.9%</td></tr><tr><td>All</td><td>29.8%</td><td>36.0%</td><td>31.4%</td><td>32.4%</td></tr></table> <p>Through the RDS Project Board, good progress is being made on recruitment in support of all stations. However, there is a lag from when a new firefighter is recruited to a retained section to when they actually take up their role as an operational firefighter. This is because it takes time for a retained joiner to go through all the necessary courses. A good example of this is Wargrave, where we have seen a number of new joiners in recent months but they will not start to be available to ride the appliance until the Autumn. We would then expect to see a positive impact on appliance availability. The Leadership and Development team have worked with Oxfordshire FRS to increase our capacity and flexibility to meet this need and try to reduce the lag where possible.</p> <p>As the current RDS project comes to a close we will maintain a regular meeting structure and other RDS specific projects will be instigated with a focus on retention, effective training, sustaining RDS numbers and increasing experience levels across the RDS sections. The latter is a current area of focus to understand the impact of an influx of new staff on RDS experience levels. Initial research shows no issues at this time however Hub managers continue to scrutinize the developing picture. Service Delivery Hub Managers are focusing on each RDS station individually to further understand their specific challenges and take measures that increase appliance availability in the short and medium term. Short-term activity includes performance management of crewing, identifying immediate issues such as prioritization of driver or incident command qualifications and enabling RDS staff to undertake work at a paid hourly rate to combine crews that make an RDS appliance available. Medium term activity includes forecasting and planning for skills requirements so that capabilities remain sustainable. In the longer term we will look to have station specific approaches that support long term sustainability that take account of the section profile (potential leavers, number of qualifications etc.), local demographics and local risk. To support this a business case is being developed to introduce an RDS focused management role that can speed up our work in this area.</p>											April	May	June	Q1	Hungerford	47.9%	57.5%	47.8%	51.1%	Lambourn	10.4%	11.7%	12.9%	11.7%	Pangbourne	29.2%	20.8%	6.9%	19.0%	Wargrave	9.7%	17.6%	13.5%	13.6%	Mortimer	3.5%	5.0%	1.1%	3.2%	Crowthorne	70.6%	84.9%	79.7%	78.5%	Maidenhead	37.4%	54.2%	58.1%	49.9%	All	29.8%	36.0%	31.4%	32.4%
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*See appendix E for service provision corporate measure definitions

Strategic Performance Report Q1 2018/19

Quadrant One: Service Provision

ID	Measure *	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Customer Service											
18	Domestic Respondents	100%	100%				100%	100%	100%	100%	↔
19	Commercial Respondents	95%	100%				100%	95%	100%	100%	↔
20	Fire Safety Audit Respondents	90%	100%				100%	90%	100%	100%	↔
	% of Questionnaire respondents satisfied with the overall service (above)*	<i>(Source: Owned by Risk & Performance - manual calculation from results of postal surveys returned)</i> <i>During Q1:</i> <i>70 surveys were sent out following domestic fires. 37 responses were received back and 100% were satisfied</i> <i>27 surveys were sent out following fires in commercial premises. 7 responses were received back and 100% were satisfied</i> <i>116 surveys were sent out following fire safety audits. 18 responses were received back and 100% were satisfied</i> The volume of responses to surveys is good. Plans are in place to review the surveys, analyse more of the data collected and to further increase the response rate.									

*See appendix E for service provision corporate measure definitions



Service Provision - Service Measures

(Data accurate as of 13/07/2018)

ID	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Response Service Measures											
1	Dwelling Fire	Monitor	50.4%				50.4%		52.5%	52.5%	
2	Road Traffic Collision	Monitor	53.0%				53.0%		53.8%	53.8%	
	% of occasions a second fire appliance attending arrives within 2 minutes of the first appliance to arrive.	<i>(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19>)</i> For both these measures the continued effort to manage turnout times and the response standard in general will have an impact in this area. At present, achieving around 50%, which is consistent with the same quarter in the previous year.									
3	5 seconds	92%	89.9%				89.9%	92%	88.7%	88.7%	↑
4	10 seconds	97%	97.8%				97.8%	97%	97.4%	97.4%	↑
	% of occasions where time to answer emergency calls is within (above)	<i>(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19>)</i> <i>Issue with Call Logger, did not record all calls during May/June.</i> An issue with hardware occurred in early May following a system update, which caused call pickup times not to be recorded. This was identified and rectified on 5 June. Capita’s work plan for these updates has been amended to check this functionality before the work is signed off. Figures for Q1 on 5 Seconds have improved by 1.2% compared to the same period in 2017/18, whilst Figures for 10 Seconds have improved by 0.4% compared to the same period in 2017/18. Despite this improvement, both figures were negatively affected by the prolonged dry weather conditions experienced since the end of May. All 3 Thames Valley FRS’s have seen a significant increase in fires involving vegetation, some of which have been large protracted incidents covering considerable areas of land. Such incidents have led to a significant increase in repeat 999 Calls received for incidents in visible locations where large smoke plumes are present. This situation is exacerbated when appliance availability is low, whether due to operational commitment or low levels of retained/on call availability, as the time taken to arrive has a direct relationship on the									

*See appendix E for service provision corporate measure definitions

Strategic Performance Report Q1 2018/19

Quadrant One: Service Provision

ID	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		numbers of 999 calls that continue to be made reporting the incident. It has been usual to receive over 50 emergency calls in these scenarios. The overall number of Emergency calls across the Thames Valley for June 2018 has increased by 6.8% in comparison with June 2017. This level of demand has meant that call-handling capacity within TVFCS is reached quicker than normal and calls are waiting longer in a queue to be answered.									
5	Within 90 seconds	80%	73.8%				73.8%	80%	76.7%	76.7%	
6	Within 120 seconds	95%	85.2%				85.2%	95%	87.7%	87.7%	
	% of occasions where time to mobilise (above)	<p>(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19>)</p> <p>Performance against these measures has declined by a small amount during Q1. There are a number of factors, which have contributed to this.</p> <ul style="list-style-type: none">A new intake of recruits joined their watches in May. Historically, the introduction of new staff into the ‘Live’ environment has caused a slight drop in performance.An increase in outdoor fires. It can be more difficult to accurately establish the location of outdoor fires which delays call handling. This is compounded by the higher call volumes being received, as multiple callers may provide conflicting information about the location of an incident, which can further delay mobilisation. Overall, numbers of repeat/duplicate calls have risen by approximately 27% compared with the equivalent period in 2017.Capacity for close supervision of staff. Due to the high volume of calls being received, and high operational workload, it is not possible for supervisory managers to provide the normal levels of supervision to less experienced staff. This leads to situations where inexperienced staff delay mobilising whilst waiting for a supervisor where they are unsure of the correct course of action. <p>Due to other pressures on the Business Information Systems team, it has not yet been possible to produce a report which identifies when call challenge procedures have been applied. The TVFCS Joint Committee has asked that a revised method of reporting performance be investigated, with a view to providing a more detailed breakdown of how TVFCS perform in various scenarios. This should allow more meaningful performance information to be provided to all 3 Thames Valley FRS’s in relation to call handling and mobilisation activity.</p>									

*See appendix E for service provision corporate measure definitions

Strategic Performance Report Q1 2018/19

Quadrant One: Service Provision

ID	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance																																		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD																																
7	Whole Time under 90 seconds	90%	89.3%				89.3%	90%	76.0%	76.0%	↑																																
8	RDS within agreed timeframe	100%	See below				See below	100%																																			
	% of occasions where crews turnout within the agreed timeframes	<p>(Source: Reports > Stats > CorporateMeasuresAndReportableServic5Measures_18-19 >) WDS, see measure 15. A really good improvement and an upward trend throughout 2017/18.</p> <table><tr><td></td><td>Number of times mobilised</td><td>% within agreed timeframe</td><td>Agreed timeframe</td></tr><tr><td>05 Hungerford</td><td>17</td><td>94.1%</td><td>360</td></tr><tr><td>06 Lambourn</td><td>2</td><td>100%</td><td>480</td></tr><tr><td>07 Pangbourne</td><td>5</td><td>60%</td><td>360</td></tr><tr><td>09 Wargrave</td><td>1</td><td>100%</td><td>420</td></tr><tr><td>11 Mortimer</td><td>0</td><td>N/A</td><td>420</td></tr><tr><td>15 Crowthorne</td><td>27</td><td>100%</td><td>360</td></tr><tr><td>19 Maidenhead</td><td>17</td><td>88.2%</td><td>360</td></tr></table> <p>This is the first quarter this measure has been reported in this way and variations in percentages are dependent on relatively small numbers. For example Maidenhead did not make the time on two occasions and in the case of Pangbourne, also two occasions, the times were missed by 30 and 50 seconds respectively. Hub managers are putting in place monitoring to better understand why these times are not being met and will provide greater focus in Q2.</p>											Number of times mobilised	% within agreed timeframe	Agreed timeframe	05 Hungerford	17	94.1%	360	06 Lambourn	2	100%	480	07 Pangbourne	5	60%	360	09 Wargrave	1	100%	420	11 Mortimer	0	N/A	420	15 Crowthorne	27	100%	360	19 Maidenhead	17	88.2%	360
	Number of times mobilised	% within agreed timeframe	Agreed timeframe																																								
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09 Wargrave	1	100%	420																																								
11 Mortimer	0	N/A	420																																								
15 Crowthorne	27	100%	360																																								
19 Maidenhead	17	88.2%	360																																								
9	Volume of activity undertaken by fire safety inspecting officers	Definition agreed with business in July 2018 and SQL still to be built																																									

*See appendix E for service provision corporate measure definitions

Service Plans

To ensure effective delivery of our services in line with our strategic plans and priorities the various activities undertaken across functions are detailed and monitored through Service plans that are developed and maintained by Heads of Service. Service Plans are overseen by Heads of Service and reviewed by the appropriate Director. By exception, matters may be reported at Strategic Performance Board by the relevant Heads of Service.

By monitoring for the delivery of outputs from these activities we can assure the Fire Authority and other external stakeholders that arrangements associated with the management of financial, governance and operational matters are appropriate.

We have in place Service Plans that focus delivery and enable management of day-to-day business across the functions of:

- HR and L&D
- Corporate Services
- Health and Safety
- Facilities and Assets,
- Operational Policy and Assurance
- Finance & Procurement
- Business Information & Systems
- Service Delivery
- Property Capital Projects
- Thames Valley Fire Control Service
- Prevention and Protection Policy

These plans set out how each department contributes to the achievement of strategic objectives and targets, aligning tasks for individuals to objectives. This provides a connection between the activities of staff and the wider strategic direction. Actions committed to will ensure delivery of services (external and internal); maintain or improve performance; deliver new capability; improve effectiveness or efficiencies within functions or; support service-wide change projects.

Service plans ensure delivery against corporate targets, and priorities, they will drive necessary actions to deliver our IRMP commitments and corporate priorities. They will consider new challenges, such as requirements stemming from Grenfell Towers or expectations of HMICFRS. We will renew our focus on the key areas that will best enable the organisation to improve delivery. This will include actions in the areas of recruitment and staff development, revision of our policy approach and evolution of our operational assurance systems.

Within the Service Delivery Hubs, there are local safety plans that provide a local focus on delivery. These are further translated into station level plans with clear outputs and targets so that delivery teams understand expectations and ensure their activity across prevention, protection and response is closely aligned to service priorities.



Quadrant Two: Corporate Health Performance *

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Human Resources											
1	% of working time lost to sickness, across all staff groups	3%	3.4%				3.4%	3%	4.6%	4.6%	↑
		(Source: Data calculated and supplied by HR) (Note: RDS figures should be viewed with caution as this figure is calculated based on the average shift length and these vary considerably and many sickness episodes may be recorded as unavailable)									
		In this quarter we have seen a decrease in the percentage of working time lost to sickness per employee. This decrease of 1.2% on the same quarter last year and a 2.2% reduction on the previous quarter (Q4 17/18). This is due to both short and long term absence reducing.									
		The total days lost to sickness this quarter has decreased by 29% (1284 in Q4 compared to 915 in Q1) when compared to the same period last year shows total days lost to sickness is significantly lower by 24% (1204 days lost in Q1 2017/18)									
		Long-term sickness reduced from 637 days in the previous quarter to 532 days in Q1. Short term reduced from 647 in the previous quarter to 383 days in Q1.									
		In line with seasonal fluctuations, respiratory absence has decreased by 63% on the previous quarter. However, it is 53.3% higher than the same quarter last year (Q1 2017/18 = 44 days, Q4 2017/18 = 256 days and Q1 2018/19 =95 days)									
		A small number of sickness absences were logged as ‘unknown’, however, on investigation two of these cases have been mental health related. The Mental Health Strategy and Action Plan aims to tackle stigma around mental health which it is hoped will reduce the reticence of individuals to declare mental health conditions. (NB figures have been adjusted to reflect the correct causes).									
Case management continues to take place and support and guidance is provided to Managers. Case management meetings are taking place at Stations and in Control. Occupational Health are utilised as required and Managers, with HR and the Health and Fitness Team, work with employees to support an early return. Trends in sickness are identified to ensure any early interventions can be considered.											
Mental Health											
There has been an increase of 15 days (9.5%) on the previous quarter. Mental health absences equated to 16% of the total days lost to sickness this quarter, compared to 11% last quarter. 143 days (8 episodes) were lost in Q4 and 158 days (11 episodes) in Q1. Three individuals on long-term absence have now returned to the workplace, four individuals remain absent at the end of the quarter.											

*See appendix F for corporate health measure definitions

Strategic Performance Report Q1 2018/19

Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		<p>Although Mental health absences increased this quarter in comparison to this time last year shows 203 days were lost in Q1 2017/18 there has been a 22.2% reduction. (Q1 17/18 = 203 days Q1 18/19 = 158 days) The Service continues to promote mental health awareness and encourage people to talk and utilise the support mechanisms available.</p> <p>Work completed this quarter under the mental health action plan includes Mental Health Awareness Training which has been developed and pilot sessions have been completed. An external trainer has been identified to deliver the package to all staff. Training will be rolled out to all staff from Quarter 2. The Mental Health policy has been published and tool kits will be developed to support this.</p> <p>Musculoskeletal (MSK) Sickness Musculoskeletal sickness (MSK) remains the top cause of sickness absence but there has been a decrease of 114 days (24.4%) on the previous quarter. MSK absences equated to 37% of total days lost to sickness in Q1 in comparison to 35% in Q4. 467 days (46 episodes) were lost in Q4 and 353 days (47 episodes) this quarter. While the number of episodes is relatively consistent Musculoskeletal absence is 21% lower than the same time last year, this suggests that people are returning to work quicker.</p> <p>Seven individuals on long-term sickness have now returned. Eight individuals remain absent from the workplace and are receiving support from their line manager and HR. The Movement Specialist continues to work with individuals and line managers to support rehabilitation, providing advice and prescribing exercise.</p> <p>There were four accidents at work resulting in four short-term MSK cases of 15 days.</p> <p><u>Support and Health Promotion</u></p> <p>Benenden At the end of Q1 we had 411 members and 21 cases had been supported. Work continues to promote the scheme.</p> <p>Employee Assist Programme Promotion Visits to Stations 3, 10, 16, HQ took place this quarter raising awareness of the benefits of using the EAP scheme and encouraging more employees to use this service. The smart phone app was promoted in May which is available to all staff to download and has been downloaded into RBFRS mobile phones. There were 17 calls to this service, the top reasons for calling were mental health, relationships and service enquiries. Additionally there were 62 hits on the on-line portal.</p>									

*See appendix F for corporate health measure definitions

Strategic Performance Report Q1 2018/19

Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		Health Promotion The following promotions took place this quarter: Stress Awareness Month, National Walking month and Men’s Health Awareness, Diabetes Awareness and Mental Health Awareness week (Five Ways to Wellbeing). As part of mental health awareness week different activities took place at HQ e.g. Middy mile, a sharing picnic and a test your stress. Practical advice was available on Siren along with posters at all workplaces. A Pregnancy Guide was published in May, which brings together information on exercise and nutrition during pregnancy. Cycle to work scheme Opened in May and closed in June. There were 11 applicants, which is more than in previous schemes run over the last year.									
2	% of eligible operational staff successfully completing fitness test	100%	99.3%				99.3%		99.8%	99.8%	
		(Source: Data calculated and supplied by HR) 99.8% of eligible staff have been tested – there are 405 eligible staff this period. One officer test is outstanding. Of those tested 99.3% passed the test – three people were unsuccessful this period, and are being supported to meet the required standard. One has already done so; one is on light duties. 19 operational personnel are currently not eligible for testing – they will complete a fitness test before returning to full duties.									
3	% of eligible staff with Personal Development Appraisals	100%	54.5%				54.5%	100%	53.0%	53.0%	↑
		(Source: Data calculated and supplied by HR) 556 staff were eligible to have received a Personal Development Interview (PDI) meeting between April and June 2018. Dual contract employees only require one PDI and therefore have only been counted once. Of this 68 employees were exempt for the following reasons: <ul style="list-style-type: none">• 52 new employees• 14 employees who have been away from the workplace for the duration of the period for various reasons including maternity and long term sickness. The figures only account for those PDI meetings recorded on the system up to and including 30 June 2018. 303 staff are recorded as having had their PDI meeting which equates to 54.5%. 253 remain not recorded on firewatch. Of the meetings that have taken place 108 PDI forms have been returned to HR. 195 are still outstanding.									

*See appendix F for corporate health measure definitions

Strategic Performance Report Q1 2018/19

Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
4	% of eligible operational staff in qualification	100%	99.5%				99.5%	100%	95.0%	95.0%	↑
		<p>(Source: Data calculated and supplied by L&D)</p> <p>This measure provides an overall indicator of core operational training. Further detailed analysis and discussion is undertaken quarterly at the Organisational Development, People Learning Group (ODPLG) to ensure relevant stakeholders from across the Service consider performance outcomes and associated impacts. Locally, in the Learning and Development department, detailed analysis is undertaken and liaison with individual managers as necessary to address requirements, competence related matters and issues of attendance.</p> <p>Training and assessment activities in RBFPS are aligned with the Fire Professional Framework, which outlines the operational core skills requirements of Firefighters and Officers. National Occupational Guidance provides the standards applicable to the nine core skill areas (Water, Working at Height (WAH), Road Traffic Collision (RTC), Hazardous Materials, Casualty Care, Breathing Apparatus (BA), Driving, Incident Command and Core Skills).</p> <p>Our performance in this area for Q1 is 99.5% (increase of 0.3% from Q4, and an increase of 4.5% from Q1 last year)</p> <p>Note: The RTC qualification is included in these figures for the first time, as agreed at the July Strategic Performance Board. The target of 100% qualified by the end of Q4 was nearly achieved with a performance of 95% qualified.</p> <p>Areas of good performance include:</p> <ul style="list-style-type: none"> Breathing apparatus - 100% Incident Command - 100% Emergency Response Driving - 100% <p>Areas for improvement:</p> <ul style="list-style-type: none"> WAH - 98.95% 4 individuals qualifications have expired, 2 individuals returning from long-term absence, booked in for Q2, 2 individuals were deemed not competent, development plan in place. RTC - 95%. The remaining 20 individuals have been programmed in for courses during Q2. Individuals who return from light duties, career breaks, and maternity leave will be scheduled throughout the year upon their return. Target of 100% by the end of Q2 is achievable. 									

*See appendix F for corporate health measure definitions

Strategic Performance Report Q1 2018/19

Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		<p>Corrective actions highlighted over the last year have been implemented and have steadily improved the performance each quarter. These have addressed shortfalls in planning, recording and the development of individuals requiring further support to achieve competency. Individuals who are out of qualification or fail to achieve a qualification do not perform that activity at operational incidents until they have re-qualified.</p> <p>The ability to effectively train staff is reliant on the ability to release individuals from duty to central training and provide sufficient instructors to train and assess these skills. A combination of efforts to ensure there is flexibility to do so, and other performance such as sickness absence is reduced to facilitate attendance continue to be examined. Staffing in the Learning and Development department is kept under review to ensure as much as possible, there is the ability to plan for and cover turnover.</p>									
Health and Safety											
5	All injury accidents including RIDDOR (RIDDOR & Total)	10% reduction (4*/72)	1*/18				1*/18	10% reduction (1*/18)	2*/9	2*/9	
		<p>(Source: Data calculated and supplied by H&S)</p> <p>During Q1, there was one RIDDOR reportable injury. These were the result of an animal bite at a flat fire. Of the 18 injuries which occurred in Q1 6 were classified moderate injuries (including the RIDDOR injury) and 12 were minor injuries. Two of the moderate injuries occurred whilst BA training. These were heat related, so training processes were reviewed, particularly in light of the recent hot weather, and the investigation concluded that very robust procedures are in place. Examination of the trends and follow up action is taken in all cases and is reported through the Health, Safety and Wellbeing Committee. Learning from accident investigations is highlighted and opportunities taken to inform and improve working practices.</p> <p>The top five reasons for accidents remain consistently the same and are comparable to others in the fire service sector, these being:</p> <ul style="list-style-type: none">• Slips, trips and falls• Manual handling• Strike against something fixed or stationary• Struck by moving object• Exposure to heat <p><i>*RIDDOR is the Reporting of Injuries Diseases and Dangerous Occurrences Regulations 2013. Under RIDDOR we have a duty to report certain events, those events being accidents that led to a person being unfit for their normal work for more than 7 days, or ‘specified injuries’ which are more serious types of injuries. These include injuries such as broken bones, crush injuries and amputations.</i></p>									

*See appendix F for corporate health measure definitions

Strategic Performance Report Q1 2018/19

Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Spend											
6	% of spend subject to competition	85%	93.1%				93.1%	85%	88.6%	88.6%	↑
7	Compliant spend as % of overall spend	100%	100%				100%	100%	99.4%	99.4%	↑
		<p>(Source: Calculated by Procurement)</p> <p>% of spend subject to competition RBFRS now has over 90% of its expenditure within a formal contract. Most contracts are for three to four years and some are now due for review, with renewal in 2018/19. The focus of the work of the team this year is now to review options for ensuring any new tenders are carried out collaboratively with partners. Where possible requirements are being standardised to support operational alignment and the ability to work across services. Replacement commodity contracts are being developed to include agile supply arrangements and online ordering to reduce processing costs. Category plans are also being created with Thames Valley Police obtain increased value for money from using combined leverage from single supply arrangements. Procurement savings are now reported to the Home Office</p> <p>Compliant spend as a % of overall spend The service has continued to achieve 100% compliance with all purchase orders being checked by Procurement and Finance for accuracy, budget availability and compliance. This year the service plan to implement a new purchase to pay solution that will assist in automating some of the current checks carried out and reduce the administrative work of the team. The new Procurement and Contract Management online training tool will also go live shortly and this will offer short online training sessions covering all aspects of the procurement process.</p>									

*See appendix F for corporate health measure definitions

Strategic Performance Report Q1 2018/19

Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Freedom of Information											
8	Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act and Environmental Information Regulations).	0	0				0	0			New for 2018/19
		(Source: Manual Input from Information Governance)									
	Number of Information Commissioner assessments finding that the Service has breached Data Protection Legislation (Data Protection Act and forthcoming legislation)	0	0				0	0			New for 2018/19

*See appendix F for corporate health measure definitions

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Quadrant Two – Corporate Health

RBFRS Revenue Expenditure Quarter 1 2018/19

	Annual Budget £'000	To June Outturn £'000	Forecast to YE £'000	Fcast - Budget Variance £'000
EMPLOYEES				
UNIFORMED	18,742	4,547	18,628	(114)
NON-UNIFORMED	6,202	1,408	6,013	(189)
TRAINING	632	115	653	21
OTHER	199	55	214	15
	25,775	6,125	25,508	(267)
PREMISES				
REPAIRS & MAINTENANCE	731	7	730	(1)
RATES	842	218	841	(1)
CLEANING	223	23	229	6
UTILITIES	378	47	370	(8)
	2,174	295	2,170	(4)
SUPPLIES				
INSURANCE	310	158	310	0
EQUIPMENT	418	97	407	(11)
IS EQUIPMENT & LICENCES	589	300	607	18
CLOTHING/PPE	343	73	343	0
COMMUNICATIONS	718	115	692	(26)
OCCUPATIONAL HEALTH	152	73	152	0
PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTIONS	140	66	157	17
HYDRANT REPAIRS	25	7	40	15
COMMUNITY FIRE SAFETY SUPPLIES	117	84	194	77
SUPPLIES OTHER	151	35	166	15
	2,963	1,008	3,068	105
CONTRACTS				
CONTRIBUTION TO TVFCS & COLLABORATION	800	0	789	(11)
LEGAL	280	15	297	17
CONTRACTS OTHER	269	9	269	0
	1,349	24	1,355	6
TRANSPORT				
VEHICLE RUNNING COSTS	690	41	685	(5)
TRAVEL	251	65	269	18
	941	106	954	13
PENSIONS				
PENSIONS	419	89	419	0
	419	89	419	0
INCOME				
FEES & CHARGES	(60)	(7)	(55)	5
INCOME OTHER	(908)	(506)	(912)	(4)
	(968)	(513)	(967)	1
NET COST OF SERVICES	32,653	7,134	32,507	(146)
DEBT CHARGES INTEREST	390	19	390	0
INVESTMENT INTEREST	(75)	(12)	(75)	0
NET OPERATING EXPENDITURE	32,968	7,141	32,822	(146)
REVENUE FUNDING OF CAPITAL	500	0	500	0
APPROPRIATION TO/(FROM) RESERVES	(307)	0	(307)	0
MINIMUM REVENUE PROVISION	318	0	318	0
NET EXPENDITURE	33,479	7,141	33,333	(146)

Commentary

- 1.1 2018/19 is a year of consolidation following the unprecedented change in the organisation in 2017/18. A great deal of the work necessary to achieve the £2.4 million of savings outlined in the MTFP has been undertaken, with £1.5m of efficiency savings achieved and a further £614,000 to be delivered within the next year.
- 1.2 The budget monitoring procedure with devolved budgets is becoming embedded as standard, in keeping with two of the key elements of Vision 2019, namely, improving capacity, capability and resilience and creating a “one team” culture.
- 1.3 The variance for Retained Staff is currently estimated to be an underspend for the year of £198,000. This is lower than last year’s underspend (which was £295,000) as recruitment of retained staff has improved.
- 1.4 There are a number of whole-time uniformed posts to be filled, including at stations. To meet this need 14 new recruits have recently finished their training. In the meantime, the overtime forecast is higher than budgeted to cover unfilled posts.
- 1.5 It is noted that the pay award for uniformed staff has been agreed at 2% from 1 July 2018. Estimates of the effects of this has been built into the current forecast.
- 1.6 The forecast underspend in the year for non-uniformed staff is £189,000. As at 30 June 2018 there were a number of vacant posts, including one in IT, 5 at the HUBS (for Fire Safety Inspectors), 4 in Prevention, Protection and Policy and a few others. 13 Green Book posts are scheduled to be recruited from 1 July 2018.
- 1.7 The training line variance of £21,000 includes £15,000 for additional costs for organisational development.
- 1.8 Outside of employee costs, the forecast for Community Fire Safety costs (for smoke detectors) has a variance of £77,000 over budget. However, there is £62,000 left in earmarked reserves specifically for detectors that could be utilised to meet this variance.
- 1.9 The mobile phone provider has been changed to Daisey (though still using the Vodafone network), with forecast savings of £26,000 against this years original budget for Communications.



Financial Position as at June 2018 (Capital)

CAPITAL SCHEMES	Total Project Budget £'000	Actual Spend in Prior Years £'000	Actual Spend in Q1 2018/19 £'000	Est. Project Spend to completion £'000	Total Est. Project Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. Project Completion Date	Notes
Fire Station Build - Theale Fire Station	6,200	684	7	5,509	6,200	0	0%	Qtr 4 2020/21	Planning permission was received in September 2018 and implementation and completion timelines are currently being revised and confirmed.
Whitley Wood Fire Station Firehouse	350	15	31	304	350	0	0%	Qtr 2 2018/19	Both off site and on site works were completed according to the programme in September 2018.
Fire Station Re-build - Crowthorne	1,500	21	27	1,452	1,500	0	0%	Qtr 2 2020/21	With the receipt of a positive outcome from the Local Planning Authority, the project is progressing well to deliver a future focused station that provides RBFA's second Tri Service Community Fire Station. The work to re-build the station will commence in April 2019.
Fire Station Refurbishments - minor works	650	260		390	650	0	0%	Qtr 4 2020/21	Planned projects in 18/19 include a contaminants washdown at Bracknell which will be completed in October and a refurbishment at Ascot. A PID for this will be completed in Qtr 3 with work to commence in Qtr 4.
ICT - IBIS redevelopment or replacement	131	55		76	131	0	0%	Qtr 3 2018/19	On schedule to complete in Qtr 3 2018/19 with system development and testing progressing as planned.

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Quadrant Two – Corporate Health

CAPITAL SCHEMES	Total Project Budget £'000	Actual Spend in Prior Years £'000	Actual Spend in Q1 2018/19 £'000	Est. Project Spend to completion £'000	Total Est. Project Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. Project Completion Date	Notes
ICT - Helpdesk System	45	29		10	39	-6	-13%	Qtr 2 2018/19	System has been upgraded and new functionality being rolled out across the authority.
ICT - Sage 1000 upgrade	65	17		48	65	0	0%	Qtr 4 2018/19	Phase 1 of the upgrade to Sage 1000 was successfully implemented in Qtr 4 2016/17. Plans for phase 2 of the project are being developed and will be completed in Qtr 4 2018/19.
ICT - Learning Management System (LMS)	45	0		45	45	0	0%	Qtr 4 2018/19	Project has been paused whilst the operational competence review is completed to ensure that the new system is aligned to any change in the competency framework. Options will be fully assessed in October 2018 and the project will resume following this, with potential providers already identified.
ICT - Firewatch Development	60	30		30	60	0	0%	Qtr 4 2018/19	Implementation is now expected by Qtr 4 2018/19. The delay is due to additional testing and training needs on the new releases, and their compatibility with Control.
ICT - Cyber Security	60	0		60	60	0	0%	Qtr 4 2018/19	A tender to appoint a new supplier to ensure the Authority achieves the new Cyber Security accreditation and additional network and system improvements will be undertaken soon so that the next security audit can be carried out later this year.

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Quadrant Two – Corporate Health

CAPITAL SCHEMES	Total Project Budget £'000	Actual Spend in Prior Years £'000	Actual Spend in Q1 2018/19 £'000	Est. Project Spend to completion £'000	Total Est. Project Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. Project Completion Date	Notes
ICT - Asset Replacement / Licenses	236	113	13	110	236	0	0%	Qtr 4 2018/19	Annual asset replacement which forms part of the ongoing 3 year plan. Laptops which were provided early on in this rolling plan are now due for replacement in 2018/19.
Fleet & Equipment - Fire Appliances	2,599	1,221	56	1,322	2,599	0	0%	Qtr 4 2019/20	The first 4 new appliances were delivered in Qtr 1 2017/18 and a further 3 have been delivered in July 2018. This was part of the shared exercise with Thames Valley partners which will see RBFRS procure a total of 11 new vehicles over a 3 year period.
Fleet & Equipment - Special Appliances - Operational Support Unit	384	19	40	325	384	0	0%	Qtr 4 2019/20	Work is underway to identify operational support unit vehicles requirements and how these will integrate with other compatible systems.
Fleet & Equipment - Special Appliances - Aerial Ladder Platform	850	0	0	850	850	0	0%	Qtr 3 2019/20	The collaborative Aerial Ladder Platform project is progressing with a contract awarded.
Fleet & Equipment - Other Ancillary Vehicles & Equipment	800	112		688	800	0	0%	Qtr 4 2020/21	The fleet replacement strategy is currently being reviewed but a number of vehicles are expected to be beyond serviceable use over the next 3 years and will be replaced as necessary.
Total (Under)/Over	13,975	2,576	174	11,219	13,969	-6			

Transition Bids Spend Summary

(As of 25/07/2018)

TOTAL BUDGET AVAILABLE	2,000,000
TOTAL BUDGET ALLOCATED	1,498,990
TOTAL BUDGET AVAILABLE FOR ALLOCATION	501,010

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend to end of Q1 19 (£k)	Start Date	Forecast End Date	Update
K02-601	Comms and Engagement Effective staff engagement is critical to the delivery of the Organisational Development Programme. The capacity to deliver the level and breadth of intervention required does not currently exist within the organisation. This resource will lead on developing/deploying a range of communication and engagement interventions to increase the likelihood of successful delivery of the key projects in the programme and the desired cultural, structural and process changes.	Katie Mills	28/04/2015	30,330	41,546	01/03/2018	28/02/2019	Successful candidate selected and started post from March 18 Delivered to date: <ul style="list-style-type: none"> • Communication strategy written and approved to support the organisational development programme - completed 2016 • Improvements made in the frequency and quality of communications • Cascade started in March 17 • The Shout re-designed 18 by an external company in March and is in distribution. • Ongoing support provided to the OD and IRMP programme boards to ensure key messages are communicated • The website and intranet has been improved to ensure relevant and up to date content is available and found quickly • Corporate branding was refreshed and continues to evolve To be delivered: <ul style="list-style-type: none"> • Launch of social media campaign to promote the organisation's diverse range of roles and excellence at work. • Ongoing focus on engagement of workforce and the community via internal and external communications

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend to end of Q1 19 (£k)	Start Date	Forecast End Date	Update
K10-601	Core Skills Training Programme Core skills development is a key plank of the OD programme and central to delivering new behaviours. This bid will support early delivery of key core skills and a long term core skills development and refresher programme, mapped to the Investors in People standard, leadership development and embedding into the L&D function	Becci Jefferies	01/09/15 26/04/16	104,000	89,499	01/09/2015	30/06/2019	Additional monies identified to support the delivery of new core skills training to support behavioural and cultural change. Delivered to date: <ul style="list-style-type: none"> • Appraisal (new PDI process) – 67 people attended to date • Coaching course - 38 people attended to date (+11) • Crucial Conversations course – 81 people attended to date (+5) • Managing High Performance – 21 people attended to date • Managing Sickness course – 68 people attended to date • Mentoring course – 43 people attended to date (+8) • Mindfulness course – 105 people attended to date (+16) • Procurement framework skills – 12 people attended to date • Procurement overview – 20 people attended to date • Resilience – 75 people attended to date (+9) • Time management course - 50 people attended to date (+12) • Working with Members course - 49 people attended to date Introduced in Q1: <ul style="list-style-type: none"> • Equality, Diversity and Inclusion training - e learning package for managers and one for all staff • Managing Disciplinary Investigations- 8 people attended to date • Recruitment and Selection: Interview Skills - 7 people attended to date • Writing effective Reports - 9 people attended to date To be delivered: <ul style="list-style-type: none"> • To be rolled out in Q2 - Mental Health Training and a refresh of 'Protecting information'

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend to end of Q1 19 (£k)	Start Date	Forecast End Date	Update
K12-601	HR Advisor Support To ensure an HR resource with appropriate skills and knowledge is available to support Managers to execute necessary staffing restructures and re-organisation to effect organisation change.	Becci Jefferies	02/02/2016	162,500	114,570	02/02/2016	31/03/2019	<p>Following the restructure of the HR and Learning and Development function, which saw a reduction in HR staff, funding for temporary HR resources was sought from the Transition Fund in support the delivery of various change projects. These resources can be flexed to meet needs and project timelines. Support is provided by 1 fixed term member of staff.</p> <p>Delivered to date:</p> <ul style="list-style-type: none"> • Work with Heads of Service and departmental managers to assist with restructure activity including planning, reports design and consultation - Complete • Reviewed the operational leave policy • Role assisted with TVFCS transition plan activities as per the agreed plan and as appropriate • Support and consultation provided for Risk and Performance and Service Delivery restructures including consultation meetings, formal consultations and selection processes • Support arrangements reviewed during Q1 and role advertised in Q1 • Completion of support and consultation for Risk and Performance and Service Delivery restructures • Collation of objectives identified for E&DI Forum consideration • Bursary Policy review • Armed Forces Covenant development • Two tier entry feasibility report • Additional HR support in place on temporary basis to respond to key projects • Development of PDI pilot to include behaviours - for pilot in Q1 • Contract Review • Discipline review • Recruitment Attraction Review - initial review

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend to end of Q1 19 (£k)	Start Date	Forecast End Date	Update
								To be delivered: <ul style="list-style-type: none"> • Policy review • Job Profile Review • Equality Diversity and Inclusivity action plan development for consideration by the EDI forum • EDI actions - in accordance with action plan • Support with the Route to Operational Competency project as appropriate • Assistance with IRMP FDO/RMS project • New additional HR support identified following loss of temporary fixed term appointment

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend to end of Q1 19 (£k)	Start Date	Forecast End Date	Update
K16-602	Systems Business Partner - resource Two year temporary post – systems business partner, a customer facing role to deliver and rollout Firewatch upgrades, IBIS improvements and support development of other service applications from an end user perspective	Tony Vincent	07/06/2016	76,720	43,158	29/08/2016	31/08/2018	Delivered to date: <ul style="list-style-type: none"> • Post filled and started on 29/08/16 • Activity to understand role requirements and current system • Working on Firewatch 7.6 testing prior to implementation particularly around whole-time payments processing • Providing FireWatch 7.5 support • Checking if mileage claims could also be done within FW • Retained payments in Firewatch 7.6 • Documentation of new FireWatch user manuals • Set up and testing new Fire Watch modules (Availability, mobilisation, self-service) • Provision of FireWatch 7.6 go live • Testing new Availability Service for Retained • Training and Go-Live on new Availability Service for Retained • Key member of the FireWatch Senior members forum • Liaising with Finance to ensure Station level Cost centre reporting is in place and correct • Acting Up payments in FireWatch (due to go live July 2018) • Officer OT payments in FireWatch (due to go live July 2018) To be delivered <ul style="list-style-type: none"> • General FireWatch 7.6 ongoing support (and testing new fix releases from Infographics) • Setup and testing of new Mobilisation and Self Service modules • Testing and release of major Firewatch release versions 7.7/7.8 – dependent upon when Beta versions are released by Infographics

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend to end of Q1 19 (£k)	Start Date	Forecast End Date	Update
K17-602	Data & Performance Analysis Manager Resource for a 24 month period to rectify issues with data assurance emerging because of linkages and feeds between systems	Katie Mills	05/07/2016	92,000	40,096	24/10/2016	30/11/2018	Delivered to date: <ul style="list-style-type: none"> • Original recruitment completed and resource started 24/10/2016, in post until Autumn 2017. • Audit of data flows for Corporate measures and development of SQL reports initiated • Restructure of team complete Autumn 2017. • New resource appointed 1st December 2017 • Further improvements to quarterly performance reporting • Preparation for HMICFRS, including coordination of first data return • Development of and preparation for new Corporate Measures for 18/19 • Assessment of data integrity issues and development of plan to further review data flows and system development. To be delivered: <ul style="list-style-type: none"> • Ongoing management of regular HMICFRS data collections to including regular HMICFRS data collections. • Continue data integrity work to further review data flows and system development to support effective performance monitoring. • Develop and encourage evidence-based approach across the organisation.

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend to end of Q1 19 (£k)	Start Date	Forecast End Date	Update
K19-601	Review of competency assessments Funding for a resource for 6 months to complete a full review of the current methodology used when assessing competence at operational ranks through understanding the “as is” situation, research on potential alternative models with and final recommendation for consideration provided	Becci Jefferies	05/07/2016	30,000	3,182	01/06/2018	31/03/2019	To assist in a full review of the NVQ methodology of determining competency is required. A bid against the Transitional Fund was made to undertake research and make recommendations on how RBFRS should deliver a competency framework for the future. Delivered to date <ul style="list-style-type: none"> • Scope of work agreed and PID written and approved • Phase 1 work – research undertaken • Equality Impact Assessment and communication plan development project group established. To be delivered: <ul style="list-style-type: none"> • Scope of activities and options to be assessed. • Progress to be monitored via Programme Board
K22-602	Temporary accounts officer Funding for a temporary accounts officer for two years starting April 2017. This is the continuation of a post in the old structure that will be required while new ways of working are embedded within the department and the wider organisation.	Conor Byrne	02/08/2016	74,000	39,612	03/04/2017	31/03/2019	Prior to the Finance department restructure this post was financed from base budget. Currently, it is being funded by Transition Fund for a 2 year period whilst business process re-engineering takes place to streamline processes and improve efficiency. Delivered to date: <ul style="list-style-type: none"> • Resource recruited to start from April 2017 • Undertaking activities related to invoicing, accounts payable and receivable, cash management and credit control for the Fire Authority • Support to Trading company and dealing with invoices, carrying out credit control and cash management • Currently running under budget therefore will relinquish the in to the transition fund To be delivered: <ul style="list-style-type: none"> • Support implementation of efficient P2P processes

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend to end of Q1 19 (£k)	Start Date	Forecast End Date	Update
K24-602	Temporary procurement officer Funding for an additional Procurement Officer for two years starting April 2017. This resource will assist in the change of how procurement will be delivered going forward over the next 24 months, as well as assist in the delivery of the Procurement service plan ensuring compliance, knowledge and advice	Conor Byrne	02/08/2016	90,000	34,393	14/08/2017	31/08/2019	<p>This post is required while collaborative procurement options are being investigated.</p> <p>Delivered to date:</p> <ul style="list-style-type: none"> • Post filled in August 17 • Contract register and work plan now being updated weekly • Contract repository review completed • Set up contract award process • Three tenders completed under supervision • Taken over from buyer role and checking all requisitions to ensure compliance • Worked on undress uniform project • Issued letters to critical suppliers to check business continuity plans • Set up quarterly report monitoring to capture any new categories • Produce quarterly reports for SPB <p>To be delivered:</p> <ul style="list-style-type: none"> • Support the delivery of the Procurement work plan and service plan • Support contract management framework roll out

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend to end of Q1 19 (£k)	Start Date	Forecast End Date	Update
K26-601	Temporary resource to manage the introduction of a Learning Management System. The system will provide the ability to develop and host flexible e-learning reducing the need, in some areas, for face to face training.	Becci Jefferies	16/09/2016	69,516	0	16/10/2018 (forecast)	30/06/2019	<p>Introduction of a e-learning platform required to facilitate achieving the organisational development objectives</p> <p>Delivered to date:</p> <ul style="list-style-type: none"> • Resourcing and Development Manager started in mid-May and objectives set regarding the provision of a Learning Management System • Engagement with other organisations to understand the developments in eLearning • Further review of requirements completed <p>To be delivered:</p> <ul style="list-style-type: none"> • Unsuccessful attempts to secure an individual to date with alternative recruitment options being evaluated • Learning from Route to Operational Competence review required to further inform need. Requirements to be refined to inform specification and tender process. Exploring opportunities for potential joint procurement with OFRS and BMKFRS - await outcomes of project before finalising.

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend to end of Q1 19 (£k)	Start Date	Forecast End Date	Update
K27-601	Dedicated mental health support post A dedicated resource, based at the Bracknell Fire Station to provide Mental Health Support in line with the Health, Safety and Wellbeing Strategy	Becci Jefferies	16/05/2017	29,195	10,363	30/08/2017	31/03/2019	Post created to support the RBFRS Health, Safety and Wellbeing Strategy and the Governments' focus on mental health and to assist with various initiatives to engage the Service. Delivered to date: <ul style="list-style-type: none"> • Mental Health and Wellbeing Adviser recruited in August however left in April • Recruitment of additional Blue Light Champions • Leadership session designed for Middle Managers - held on 1 Feb • Mental Health Strategy and Action Plan designed and approved via SLT • Training requirements identified • Training on mental health designed and piloted To be delivered: <ul style="list-style-type: none"> • Training package on mental health to be delivered commencing Q2 • Identify other resource requirements to address actions indicated in action plan
Total ongoing (open) projects spend					416,419			
Closing total for projects completed during Q1					0			
Closing total for completed projects prior to Q1					743,935			
Total spend					1,160,354			
Total budget allocated				1,498,990				
Total budget available for allocation				501,010				

Procurement Plan

(Data accurate as of 20/07/2018)

The Procurement team review all the expenditure for each quarter against contracts in place to ensure that no 'off contract' spend is taking place and the value of contract award is not being exceeded.

Suppliers have been advised that they should not accept a request for work or goods from RBFRS unless they are provided with a valid Purchase Order. Any non-compliance identified is dealt with through meetings and training. In addition, all RBFRS suppliers have been advised that any invoices received by RBFRS without a valid Purchase Order will be returned to them and will not be paid. This twinned intervention of closer working with suppliers and staff is raising the profile of the importance of spending in accordance with the new RBFA Contract Regulations.

Since 1 April 2018 a total of 15 tenders have been completed and contracts are now in place.

Project No	Service	Contract Owner	Procurement Contact	Contract Detail	Specification Owner	Supply Type	Contract Status	Process	Collaboration	Project Start Date	Contract Award/ Completion Date	Est. Total Contract Value	CAP/REV	Contract Awarded
342	Facilities/Fleet	HOFF	Jane Lubbock	PPE	Rob Read	Supply	Renewal	Framework	Y	01/01/2018	30/06/2018	£4,000,000	Revenue	Bristol Uniforms Ltd, implementation in progress.
443	Corporate Services	Katie Mills	Jane Lubbock	Staff Survey	Angela Smith	Service	New	Tender	N	01/03/2018	30/04/2018	£30,000	Revenue	Survey Solutions Ltd
506	BIS	Tony Vincent	Emma Peate	Freya Support Renewal 3 Years	Gary Thomas	Service	Renewal	Quote	N	12/06/2018	12/06/2018	£3,900	Revenue	Verisec Ltd
507	Corporate Services	Katie Mills	Moses Kuria	Photographic Services	Melissa Gerbaldi	Service	New	Quote	N	01/06/2018	30/06/2018	£7,000	Revenue	SWNS Ltd
508	Policy	Paul Jacques	Emma Peate	Domestic Sprinklers	Tregear Thomas	Supply	Renewal	Tender	N	01/04/2018	30/04/2018	£30,000	Capital	Domestic Sprinkler Ltd
509	HR	Becci Jefferies	Jane Lubbock	Managed Service for Temporary Agency Resources	Jacky Manning	Service	Renewal	Framework	Y	01/04/2018	30/04/2018	£1,200,000	Revenue	Comensura Ltd
528	Facilities/Fleet	HOFF	Moses Kuria	Waste Collection, Disposal and Recycling Services	Matt Barber	Service	Contract Extension	Extension	Y	01/04/2018	31/05/2018	£140,000	Revenue	Grundon Waste Management Ltd

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Quadrant Two – Corporate Health

Project No	Service	Contract Owner	Procurement Contact	Contract Detail	Specification Owner	Supply Type	Contract Status	Process	Collaboration	Project Start Date	Contract Award/ Completion Date	Est. Total Contract Value	CAP/REV	Contract Awarded
596	BIS	Nikki Richards	Moses Kuria	Process Mapping Services	Angela Smith	Service	New	Quotes	N	15/05/2018	31/05/2018	£50,000	Revenue	Libreea Ltd
582	BIS	Tony Vincent	Emma Peate	Station Mobilisation System	Lee Arslett	Service	Renewal	Waiver	N	15/05/2018	16/05/2018	£15,000	Revenue	Multitone Electronics plc
588	Corporate Services	Katie Mills	Jane Lubbock	Media Training and Digital Media Services	Angela Smith	Service	New	Tender	N	01/06/2018	14/06/2018	£48,000	Revenue	KellyVision Ltd
594	Facilities/Fleet	HOFF	Emma Peate	Hydrostatic Testing of BA Cylinders	Rob Read	Service	New	Quotes	N	01/04/2018	30/04/2018	£15,000	Revenue	AirServices Ltd
598	Facilities/Fleet	HOFF	Moses Kuria	Tarmacking of Newbury Fire Station	Matt Barber	Supply	New	Quotes	N	02/05/2018	31/05/2018	£40,000	Revenue	Kier Ltd
601	Facilities/Fleet	HOFF	Emma Peate	Grounds Maintenance	Matt Barber	Service	Renewal	Extension	N	01/04/2018	31/05/2018	£130,000	Revenue	Countrywide Grounds Maintenance Ltd
605	Corporate Services	Paul Jacques	Jane Lubbock	Legal Enforcement Services	Paul Jacques	Service	New	Collaboration	Y	01/04/2018	30/06/2018	£43,000	Revenue	West Berkshire Council
608	HR	Becci Jefferies	Emma Peate	Fire Fighter Training	Dom Manton	Service	New	Collaboration	Y	01/04/2018	30/04/2018	£102,000	Revenue	Oxfordshire County Council through Fire Service College

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Quadrant Two – Corporate Health

Human Resources Performance

(See appendix H for supporting charts) (Source: All data calculated and supplied by HR)

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 YTD	Q1 17/18	
STAFF IN POST	Wholetime	389				389	382	
	Retained	74				74	65	
	Control	41				41	38	
	Green Book	149				149	129	
	Total Number of Staff in Post	653				653	614	
							Q1 17/18	
STAFF TURNOVER	Wholetime	6				6	7	
	Retained	4				4	2	
	Control	1				1	0	
	Green Book	10				10	3	
	Total Number of Leavers (Heads)	21				21	12	
	Staff in Post (SIP)	653				653	614	
	Percentage of Leavers vs. SIP	3.2%				3.2%	2.0%	
							Target	YTD 17/18
FEMALE STAFF	Wholetime	4.1%				4.1%	4%	3.7%
	Retained	5.4%				5.4%		4.6%
	Control	68.3%				68.3%		71.1%
	Green Book	57.0%				57.0%		54.3%
	Total	20.4%				20.4%		18.6%
							Target	YTD 2017/18
ETHNICITY FIGURES	Wholetime	4.9%				4.9%	5%	4.7%
	Retained	0%				0%		1.5%
	Control	2.4%				2.4%		2.6%
	Green Book	16.8%				16.8%		13.2%
	Total	6.9%				6.9%		6.0%

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Quadrant Two – Corporate Health

NB.26 individuals hold more than one role (Dual Contract). This quarter there were 21 leavers and 28 new starters. No major trends have been identified following examination of the reason for leaving as the majority of staff that have left have retired or left for personal betterment.

Increase in staff numbers is due to the recruitment of additional 14 wholetime firefighters, three RDS Firefighters, three Control Firefighters and eight Green Book staff. Three of which were interns recruited through the Change 100 programme.

Annual turnover, year to date, equates to 3.22%, if similar levels occur for the rest of the year this will suggest we will outturn at around 12%.

The number of employees from a BME background have increased by 0.37% from last quarter due to three BME employees joining the service and one employee leaving. Compared to this quarter last year we are 0.86% higher. Overall performance stands at 6.9%, exceeding the current target of 5%.

The number of female employees has increased this quarter. This is due to nine new female employees joining the service. Although the number of female firefighters employed in the service remains unchanged from last quarter. The percentage of female firefighters has decreased by 0.07% to 4.32% as a result of 17 male Firefighters joining the service. Although there has been a slight decrease we have still exceeded our target of 4%

Of the 28 people recruited this quarter four were from an ethnic minority group (2 Green Book and 2 WT). Nine females were employed (8 Green Book and 1 Control).

The number of disabled staff employed by RBFRS has increased from last quarter by 0.39%. Four individuals with disabilities were recruited and two employees left.

The Equality, Diversity and Inclusion action plan and the recruitment project both focus on attraction as key objectives, aiming to identify and implement ways to attract individuals from a wider range of backgrounds.

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 YTD	2017/18 Performance	
							Q1 17/18	YTD 17/18
AGE PROFILE	25 and Under	35				35	19	19
	26-35	182				182	166	166
	36-45	223				223	212	212
	46-55	179				179	184	184
	56-65	32				32	30	30
	66 and Over	2				2	3	3
	Total	653				653	614	614

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Quadrant Two – Corporate Health

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 YTD	2017/18 Performance	
							Q1 17/18	YTD 17/18
DAYS LOST TO SICKNESS	Short	383				383	412	412
	Long	532				532	792	792
	Total	915				915	1204	1204
	<i>(RDS figures are not included as figures are calculated based on the average shift length and these vary considerably as many sickness episodes are recorded as unavailable).</i>							

Disciplinary Cases, Grievances and Complaints

	Number commenced in Q1	Number commenced in Year to Date 18/19	Number commenced Year to Date 17/18
Misconducts (including gross misconducts)	5	5	11
Grievances	5	5	5
Complaints (External)	7	7	4
Whistle Blowing	0	0	2
Use of RIPA	0	0	0

Data is provided for year-end and in relation to those cases commencing in the quarter. This avoids the provision of information that would potentially identify individuals.

Quadrant Three - Priority Programmes

(Summary as of 27/07/2018)

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Operational Maintenance of Competence Review	Dom Manton	<ul style="list-style-type: none"> Project Initiation Document agreed at Programme and governance processes put in place Two phases project with interim solution being created for phase one before alignment to NOG Interim process to be designed and consulted on with SLT Meeting with OFRS GM L&D to ensure alignment across the two services is consistent regarding the gap analysis of NOG training specifications. 	<ul style="list-style-type: none"> Interim process agreed by SLT Communication plan drafted and messages to be sent around the interim process to operational staff Meeting set up to specify the build of the interim system in Firewatch Creation of policy 	G	<ul style="list-style-type: none"> No project issues at this time
Recruitment Project	Jacky Manning	<ul style="list-style-type: none"> Project Initiation Document agreed at Programme Board and governance processes put in place. Objective is to enhance/update processes to attract and hire the highest calibre of candidate Work packages set up to cover selection process, equality and diversity, offer and contract, appointing, induction and unsuccessful applicant process 	<ul style="list-style-type: none"> Work packages continue to scope the work and plan in timescales for delivery Draft the communications plan Equality Impact assessment completed Procurement of On line Portal to be finalised 	G	<ul style="list-style-type: none"> No project issues at this time
Continuous Improvement	Katie Mills	<ul style="list-style-type: none"> External third party appointed to assist with specialist support for process mapping Process improvement project underway with external third party to review and map out the existing prevention processes 	<ul style="list-style-type: none"> Continue to map out the prevention process as they currently are and start to review the potential process and action plan. Agreement on process with key stakeholders Scoping meeting to be set up for the procurement to pay process 	G	<ul style="list-style-type: none"> No project issues at this time

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Quadrant Three– Priority Programmes

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
			<ul style="list-style-type: none"> Scoping meeting to be set up for protection process review 		
Corporate Communications and staff engagement	Katie Mills	<ul style="list-style-type: none"> Tender process underway to identify supplier for the staff survey Improving engagement with the public and internal staff through updates to the website and intranet to ensure relevant content and news stories. Review of existing branding of templates for published and internal documents underway 	<ul style="list-style-type: none"> Decision on staff survey supplier and agree timescales for survey New branding to be used for published documents and pilot of internal updated branded templates 	G	<ul style="list-style-type: none"> No project issues at this time
HMICFRS Inspection Programme	Katie Mills	<ul style="list-style-type: none"> Gap analysis on the self-assessment questions is underway to identify strengths and areas for improvement SLT reviewed the document submission list and gap analysis The communication plan has started with regular updates to all staff via Cascade and on Siren. Seminars have been run for middle managers to provide background information for them to then cascade onto their teams. First data request has been compiled and submitted on 01 May. Work to start on a welcome pack for the Service Liaison Lead 	<ul style="list-style-type: none"> Await confirmation of inspection dates Discovery visit to be set up for the Service Liaison Lead to visit TVFCS Service Liaison Lead to visit the Service at the beginning of September Compile documents ready for document request Compile data for second submission Project plan to be updated 	G	<ul style="list-style-type: none"> No project issues at this time
Reward and Recognition	Katie Mills/ Becci Jefferies	<ul style="list-style-type: none"> The annual RBFRS ceremony will take place on 28 September at Wokefield Place, Mortimer. The nominations for the 11 categories opened on 31 May. 	<ul style="list-style-type: none"> The judging panel will be selected ensuring representation from across the organisation. Submission for the awards nominations will close on 27 July. 	G	<ul style="list-style-type: none"> No project issues at this time

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Quadrant Three– Priority Programmes

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
		<ul style="list-style-type: none"> Project meetings now focussing on the running order of the evening. RBFRS had representatives in 2 categories in the Spirit of Fire Awards: Supporter of the Year – Firefighter and Supporter of the Year – Fire and Rescue Service categories. Review of merit payment system completed 			
Routes to Operational Competence	Lorraine Sullivan	<ul style="list-style-type: none"> Project Initiation Document agreed at Programme Board Project objective is to review the NVQ and development programmes to establish if an alternative development pathway model can be used to achieve a revised route to operational competence without losing quality. Four stage project. Stage one timescales planned. Project meetings set up. Research started on alternative operational competence models Equality Impact Assessment, Communications and Engagement Plan and Stakeholder Analysis undertaken Process mapping and questionnaire design underway 	<ul style="list-style-type: none"> Review of timescales needed to reflect project team capacity Detailed planning of research steps to be undertaken Information to be sought from other FRSS 	G	<ul style="list-style-type: none"> No project issues at this time
Leadership Development Programme	Nikki Richards	<ul style="list-style-type: none"> Cohort 1 to 3 completed their full course and presented their learnings to SLT Volunteers arranged a leadership development forum for cohorts 1-3 to attend and participate in activities 	<ul style="list-style-type: none"> Cohorts to continue/complete their courses Review requirements for next steps of the leadership development programme 	G	<ul style="list-style-type: none"> No project issues at this time

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Quadrant Three– Priority Programmes

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
		around the inspection and the People Strategy <ul style="list-style-type: none"> Cohort 6 started their course New core skills courses underway for recruitment, managing disciplinary issues, writing effective reports 			
Combined Remotely Managed stations and FDO project	Doug Buchanan	<ul style="list-style-type: none"> Operating model agreed by SLT 	<ul style="list-style-type: none"> PID for project implementation Comms plan to support implementation Job descriptions for WM/SM FBU rep to join project team full time Face to face staff engagement Stage 1 formal consultation process 	A	<ul style="list-style-type: none"> Difficulty in employing HR resource – continue to pursue options for attracting to role. Limited access to FBU reps as this is not their main role – agree a secondment
Retained Support Unit	Doug Buchanan	<ul style="list-style-type: none"> Formal consultation process complete with remaining RSU staff Postings for 2019 formally issued Gap analysis complete 	<ul style="list-style-type: none"> SLT report and presentation – gap analysis and proposals 	G	<ul style="list-style-type: none"> Potential FBU dispute in relation to pay protection – decision/solution to be generated from SLT
IRMP 2019 to 2023	Doug Buchanan	<ul style="list-style-type: none"> Draft report to SLT Consultation plan/comms plan to SLT Consultation plan and materials drafted 	<ul style="list-style-type: none"> Draft report to Fire Authority (31 July) Public Consultation to commence 2 August for 8 weeks Evaluation of feedback and summary report preparation 	G	No project issues at this time
New Fire Station at Theale	Alex Brown	<ul style="list-style-type: none"> Planning application has been approved by LPA. New tender process has been instigated for the land remediation requirement via the release of a PIN (Prior Information Notice) directly to specialist contractors. 	<ul style="list-style-type: none"> Completion of the PIN process/engagement directly with remediation specialists. Prepare and release tender for specialist remediation site works. 	A	<p>Issue: Once remediation tender process is completed, revised timelines can be produced for this project to delivery.</p> <p>Issue: Until outcome of remediation tender is known, the additional VE work cannot commence.</p> <p>Action: Project still progressing</p>

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Quadrant Three– Priority Programmes




Whitely Wood Project	Alex Brown	<ul style="list-style-type: none"> Progression of Stage 2, Concept Design, with outcomes expected by end of August. Operational working group report incorporated into design process. 	<ul style="list-style-type: none"> Outcome of Stage 2, Concept Design will be presented to SLT in September. 	A	Issue: The intensive nature of the concept design stage has put pressure on both the PCP team and end users in terms of feedback timelines in order to meet project development timelines.
Firehouse Facility	Alex Brown	<ul style="list-style-type: none"> Contract awarded and programme of works confirmed. 	<ul style="list-style-type: none"> Contract commenced in May 2018.8 Completion programmed for September 2018 	G	On track, no issues raised
Crowthorne refurbishment	Alex Brown	<ul style="list-style-type: none"> Planning application submitted for fire station project. Planning application submitted for temporary accommodation at decant site at Wellington College Public consultation held on station to support planning application submission 	<ul style="list-style-type: none"> Outcome of planning application for main fire station site. Outcome of planning application for decant site at Wellington College. Development of main contractor tender pack. 	G	On track, no issues raised
Caversham Road refurbishment	Alex Brown	<ul style="list-style-type: none"> Next 12 – 18 months will be devoted to design development with end users and key stakeholders. Once concept design is completed, more accurate timescales can be put forward however, these must be balanced with other key projects also under development (Theale, Whitley Wood, and Crowthorne). 	<ul style="list-style-type: none"> Outcome of initial round of feasibility and concept design in order to feed decision making process on option to take forwards to design development. 	G	On track, no issues raised


Quadrant Four - Risk

Corporate Risks (As of 16/10/2018)

We have performed a robust and systematic review of those risks we believe could seriously affect the organisations performance in relation to safety of our staff, reputation of our ability and the ability to deliver against our strategic commitments.

We maintain a risk register of risks faced by the organisation (excluding Health and Safety and community risk as these are addressed separately through both Occupational Health and Safety and the IRMP Programme). Below are the higher-level corporate risks that are considered and discussed on a regular basis by the Senior Leadership team and reviewed by the Audit and Governance Committee. The risks identified do not comprise all of the risks associated with the organisation and are not set out in priority order. Additional risks not presently known to management, or currently deemed to be less material, may also have an adverse effect on the business.

	No risk movement
	Risk decreasing
	Risk increasing

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Capital Investment Strategy (Risk: 233) Risk Owner: Assistant Chief fire Officer					
Inherent Score: 23					
If we fail to effectively manage our property assets to ensure they are in the right locations and fit for purpose, which may become increasing likely given the level of skills and experience and capacity within our estates team and the increasing age of our fire stations, then we can expect our expenditure to increase, our services to be less effective and our stations to further decline which would be significant in respect to our objective to ensure value for money and ensure fire stations are at the heart of communities	<ul style="list-style-type: none"> • Ensure a Property Asset Management Plan is developed • Ensure maximum use of memorandum of understanding and ensure compliance with statutory duty to collaborate by positive engagement with blue light and other partners. • Ensure effective project management through procurement of professional services and management through the programme board. • Additional personnel added when required for resilience. Flexible staffing model to scale up when required. • Annual update to Strategic Asset Investment Framework • Develop partnerships and opportunities for potential income generation through Joint venture and colocation opportunities • Ensure additional flexibility in project plans where planning consent is required • Ensure good and effective communication on progress • Establish a ten-year asset plan through the Strategic Asset Investment Framework. 	<ul style="list-style-type: none"> • Being developed. In service plan as work package for completion by October 2018. Progress is being made now fit for purpose project has been completed. This work will need to align closely with revised IRMP to ensure operational alignment. • Good progress with TVP on all projects and with other partners. All collaborative opportunities explored at outset of each project and engagement documented. Now part of TV Collaboration Board work stream and Collaboration Estates Operational Group • Professional services team working closely with Property Capital Projects team to bring the schemes forward through the planning process. Highlight reports and project updates to Programme Board and Fire Authority. • Property Capital Projects team scaled up to provide resources necessary to deliver Property Capital programme as per SAIF. If additional projects become live ahead of schedule due to opportunities, then additional resources may be needed. 	16	16	



Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
	<ul style="list-style-type: none"> Establish clear processes for the development of each projects business case with gateway review at key stages 	<ul style="list-style-type: none"> Revised in February 2018 and Forward Planner updated to reflect amended programme of works. Continued engagement with stakeholders at Berkshire OPE and wider collaboration conversations. Forward Planner sets out entire programme of works across entire property portfolio to identify key milestones, ensure sufficient time allocated to the planning process ahead of tenders and to avoid pinch points across the programme. Communication through SLT and Programme Board with updates to staff through Cascade. Lead member, property development working group and management committee as well as monthly Group Manager level meetings across all departments. Fire Authority agreed the SAIF on 31st July. The plan will be reviewed on an annual basis in line with the medium term financial plan. Findings of task and Finish group and Capital Projects closedown report action plan going to A&GC on 1st November for agreement 			
Emerging risks and implications of Grenfell Tower (Risk: 408) Risk Owner: Assistant Chief fire Officer					
Inherent Score: 24					
If we fail to effectively deal with emerging community risks and additional burdens which are likely in the aftermath of the Grenfell Fire tragedy, this may result in the inability to meet our statutory duties and strategic objectives which will cause significant reputational damage and impact our financial stability	<ul style="list-style-type: none"> Ensure effective political, community and partner engagement processes are in place to ensure integrated delivery of service Ensure current policies are revised, updated and integrated across function to include the implications of the impacts and burdens Ensure adequate people and financial resources within the community safety functions including proactively managing succession to mitigate any emerging risk 	<ul style="list-style-type: none"> Community Safety Project Team have assessed the top 70 high-risk premises. TGM Thomas now working on transition plan to move to BAU w/c 5 November. AMP&P service delivery fully aware. T/GM James has produced a PID and action plan for 'Protection' new ways of working which has gained programme board approval. TGM Thomas is working on a prioritised list of policy refresh. meetings with AM P&P SD arranged to prioritise deliverable 	17	16	↓




Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
	<ul style="list-style-type: none"> • Ensure development programmes are re-aligned to include the appropriate new skills and knowledge to meet any new demands for staff • Ensure staffing models are flexible and agile enough to deal with a rapidly changing landscape • Ensure new work is embedded in service plans and any new performance measures are developed and reported on • 4 phase plan developed incorporating multiagency working • Additional resources to be put in place with additional funding provided • Ensure project plan defines timelines for integration of SD resources into hubs to avoid silo working and specialisms • Clear cross-over on a number of issues to Protection new ways of working project • Plan to migrate team to Service delivery to ensure integration into hub working 	<ul style="list-style-type: none"> • 10 new FSIO's continue with development in the Hubs. Recruitment for emerging vacancies temporarily on hold following a JD review by AM P&P SD. • Ongoing development training at Diploma level 3&4 being delivered. • Following recent seminar attendance re: the Hackett review meetings have been arranged to determine the staffing requirements of the FI, Fire Engineering and Prosecution Hub. • Protection Service plan are viewed following directorate meeting 30/08/2018 but additional work required to reflect the wide range of current activities and the change of reporting lines following AM P&P SD arrival. • Transition to BAU underway - target w/c 5 November • Following recent seminar attendance re: the Hackett review meetings arranged to determine the staffing requirements of the FI, Fire Engineering and Prosecution Hub. • Transition to BAU on the way - target date w/c 5 November • Project timelines and priorities discussed by AM P&C and AM P&P SD. • Transition to BAU target date w/c 5 November 			

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Collaboration, partnership working & shared service (Risk: 410) Risk Owner: Assistant Chief fire Officer					
Inherent Score: 22					
If collaboration, partnership working and shared service opportunities are not considered, developed and embedded which may become increasingly likely with the complexity and volatility in the current political and financial landscape. Then we can expect impacts on the effectiveness of our service provision and on our financial position which would then affect the delivery of our legal duties and the Authority's strategic objectives	<ul style="list-style-type: none"> Actively drive and engage with the Thames Valley strategic collaboration board Continue to manage projects through programme office processes and report on updates. 	<ul style="list-style-type: none"> Governance arrangements now in place to lead and oversee collaborative projects. Development of collaboration document including terms of reference for sign off by constituent authorities by end of Aug 2018. Regular highlight reports to Steering Group, Executive Board and RBFRS Programme Board to ensure progress and scrutiny 	17	12	
Pension Liabilities (Risk: 413) Risk Owner: Chief Fire Officer					
Inherent Score: 21					
If we do not comply with the various pension regulations and the calculations of pension contributions, entitlements and payments made are incorrect, which is becoming increasingly likely given changes to these regulations which are complex in nature, changes to pension and payroll administrators, the ability to accurately interrogate historic records (which do not sit with RBFRS) and limited pensions expertise and capacity within the HR department, then we can expect to be in breach of the regulations, be	<ul style="list-style-type: none"> Regular contract meetings with Pension Administrator - Conor and Becci Pension Board to provide scrutiny on behalf of the Scheme Administrator (Fire Authority) Participate in regional pension meetings to share understanding, seek guidance including from the LGA Advisor Build resilience by sharing understanding and learning within the HR department Maintain records on actions taken for reference and clarity Audit pension related pay matters to ensure adequate pension pay records are maintained and relevant actions taken e.g. transition to 2015 scheme 	<ul style="list-style-type: none"> BAU with regular meetings scheduled throughout year and correspondence regarding emerging issues and changes in regulations. Performance reports provided monthly. Discussions on complex matters undertaken to ensure all parties clear PB had training, meetings examine arising matters/risk assessment maintained by PB. Further training & input - LGA Oct 2017. Tax training, developments considered by PB. Annual report to FA. New member and Chair of PB in place. Attendance at regional meetings and other training as appropriate. - Meetings attended -SE regional meeting Special Mod scheme training undertaken -actions added to pensions action plan 	15	15	

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
<p>subject to scrutiny from The Pensions Regulator, subject to enforcement and penalty notices and impact employees and pensioners which are significant in respect to our financial security, employer duties and our reputation</p>	<ul style="list-style-type: none"> • Attend fire sector pension related events to ensure kept abreast of changes and can make relevant enquiries of the pensions administrator • Seek legal advice on emerging issues as appropriate to ensure actions taken are within parameters and are escalated to Fire Authority as appropriate • SLT to consider any matters arising as appropriate • Careful monitoring of SLAs and service provision from WYPF as a result of their client base increasing 	<ul style="list-style-type: none"> • Action taken to build knowledge in department and with other FRSS - regional and WYPF meetings attended. One HR member individual on PB helping build knowledge as an HR rep • Actions logged from contract meetings and HR action plan updated regularly by HR Advisor. Regular review of actions in department • Ongoing monthly check with specific attention given to known issues. Audit of WYPF provision completed - results to July A&G. All actions complete • Member of Finance and HR attended special modified training • Advice sought on 30/08/17 and 14/3/18 on identified issue - approach/impacts shared with SLT. VSP - MO and legal advice sought. A&G report July 2018 & update to Management Committee on VSP 22 Oct 2018. • Agreed actions following SLT 29 May 2018 and A&G July 2018 - meeting to be scheduled with relevant parties CB/BJ/TF. Provision of information to assist decision-making discussed at contract meeting 6.9.18. Paper to Management Committee October. • New Treatment - discussion at contract meeting 6.9.18 to ensure that the focus on performance/access to expertise not lost. Audit scope reviewed - consider business continuity and assurance of expertise 			

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Firefighter Safety (Risk: 417) Risk Owner: Deputy Chief Fire Officer					
Inherent Score: 25					
<p>If we do not maintain the safety, health and wellbeing of our operational staff through effective training; operational policy and guidance; safe systems of work and; means to capture and respond to operational learning, we risk a significant firefighter injury or fatality, a failure to comply with our legal duty and an undermining of the operational effectiveness and competence of our staff. This could significantly impact the effectiveness of our operational response, have a long-term impact on staff welfare and damage our public reputation and trust levels.</p>	<ul style="list-style-type: none"> • Programme of Work to be undertaken across SD Hubs to have in place "Service Readiness" ensuring all stations operating to common standards for training, assurance, delivery off PP&R and maintenance of standards. To be led by DCFO and AM SD • Monitoring experience levels on RDS stations • Operational assurance framework processes, ensuring firefighter risk management, are being monitored for effectiveness and changes implemented as necessary. • Monitor operational competency • Monitor operational refresher training • Alignment of RBFRS Operational Policy and Guidance with the national Operational Guidance (NOG) 	<ul style="list-style-type: none"> • Station Audit process trialled and framework and policy in consultation following SLT sign-off. Full Audit programme to commence from 27 October 2018. • Initial research complete, data does not highlight any immediate risk critical issues. HUB RDS lead working group meeting regularly to review. • OA monitoring process further adapted to ensure review by OPAS, RSG and SDMT as appropriate to matter identified. • Percentage of eligible staff in qualification monitored through SPB, SLT and Audit and Governance. Performance measured against core areas of the Fire Professional Framework • Managerial review of Operational Training Planner (OTP) once live. Launch of station audits to underpin quality of refresher training. • This work is being delivered through the Thames Valley Delivery Group as part of TV Collaboration. OFRS officer leading with officers from across all 3 services supporting. Policies and procedures being monitored/maintained during transition. 	19	19	

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
ESMCP (Risk: 418)) Risk Owner: Deputy Chief Fire Officer					
Inherent Score: 18					
<p>If we do not make sufficient provision of resources to support the development, transformation to and implementation of ESMCP products and capabilities at a Service level, then we will not be a part of the proposed Emergency Services Network and we will be out of step with national and regional partners across the three emergency services. This could significantly impact on the effectiveness of our operational mobilization and response and limit access and use of operational technology to support incident command and joint emergency services interoperability. Consequently, this could impact negatively on our collaborative and partnership working and our public and political reputation.</p>	<ul style="list-style-type: none"> • Service level project board to oversee RBFRS delivery across national programme work streams and SC partners. • Representation on SC Programme Board with funded programme support and appointed staff within each regional work stream group. • Representation on national Fire Customer Group by DCFO for SC Region • Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified. • Preparation of systems (e.g. TVFCS ICCS) being completed with national programme funding already secured • Regular reporting to Audit and Governance Committee to ensure transparency in service and national programme progress • Detail resource requirements to ensure all work streams are successfully delivered • RBFRS review of implications of National Programme move to an incremental approach to ESN delivery. To be completed with a 75% of assurance and fed back to National Programme by September 2018. Interim positions of 25% and 50% in June and August. 	<ul style="list-style-type: none"> • Head of BIS internal sponsor. Appointed PM in place. RBFRS project Board in place. Board tasked with developing RBFRS options under new ESN incremental delivery model. • Current commitments remain sufficient. Monitoring commitment to work streams in context of developing narrative National Programme of a move to an 'incremental approach to ESN'. • Continue to attend FCG for updates and input to national programme. • Contact being maintained through SC Board with regular police attendance and SCAS dial in. Unclear on how incremental approach will impact collaboration opportunities but being kept under review. • Work continues within TVFCS. Vodafone putting in place DNSP connection. No concerns over progress given National Programme delay and likely move to incremental approach. • Update to A&G made July 2018. Letter sent from FA through A&G to National Programme Permanent Secretary • National Programme indicating future direction will be incremental approach. Though subject to Full Bus Case review due Dec 2018. Work streams continue to progress where they can making necessary business assumptions. • Return on 06.06.18 on RBFRS approach - 25% assurance. NP sought further return for 03.09.18 with higher assurance. Not possible until NP address questions raised. RBFRS Project Board now developing options for delivery based on incremental delivery. 	14	14	


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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Operational Availability, Crewing and Capabilities (Risk: 419)) Risk Owner: Deputy Chief Fire Officer					
Inherent Score: 21					
<p>If we fail to maintain appropriate numbers of personnel and associated skills and knowledge requirements, in line with our planned establishment and current or future demands, then we can expect this to affect our ability to provide an efficient and effective level of service delivery that matches our commitments and stakeholder expectations. This could significantly impact community safety and organizational reputation.</p>	<ul style="list-style-type: none"> • RDS Project to create sustained recruitment and retention and deliver increased availability across all RDS stations. • Focus on RDS recruitment, training, succession planning and retention • RDS management and training support • Watch management accountable for management of leave policy, maintaining an accurate crewing forecast and ensuring appropriate level of qualifications on watches • Hub managers accountable for ensuring leave policy adhered to, watch levels are managed across stations and vacancies are managed. • OPAS accountable for monitoring and reporting on crewing levels across the service (WDS, RDS and FDO) • On-going proactive management of service delivery workforce planning needs through the Workforce Planning Group 	<ul style="list-style-type: none"> • Project close down Close down report due to Prog. board 6 Nov • Overall net gain in recruitment. Retention and progression work will transition into ongoing RDS management outlined in RDS project report. Local succession planning made a priority to react to L1 spread at certain stations • New arrangements with RSU taking place with L&D. Hub leads continue to support. Initiatives in hubs for WDS support and opportunities for increased RDS involvement with HAG/NFST, exercises and drill nights. • Increased focus through Hub management 121s and SDMT on leave management. leave policy under review and will be sent for consultation mid-late October and leave picked published early November • Increased focus through Hub management 121s and SDMT on leave management. Working group to commence early Sept on new leave policy • Development of further IM from Vision and Firewatch to improve reporting • Group meeting regularly with long term forecasting in place and promotion/recruitment requirements planned forward and linking with developing OPAS work. 	14	14	

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Capacity, Capability and resilience (Risk: 422) Risk Owner: Director of Support Services					
Inherent Score: 21					
<p>If RBFRS fail to increase the capability, capacity and resilience of our workforce which may become increasing likely as we lose knowledge through retirement of experienced staff, and require new skills and additional capacity to help us responds to the changing demands of the workforce reform programme and vision 2019, then we can expect to fail to deliver against our statutory requirements and broader organisational development objectives</p>	<ul style="list-style-type: none"> • Revise the RBFRS people strategy, taking in feedback from the recent peer review and National CFOA people strategy • strengthen workforce planning information to cover all staff and regularly review as part of performance monitoring • Implement middle managers development programme in collaboration with TV partners • Increase flexibility of recruitment policies to enable RBFRS to attract and retain the best staff • Review reward and recognition arrangements for all staff • in terms of resilience we have a number of grey book staff who have been in temporary positions for a considerable then of time and through the workforce planning group we need to determine a plan to substantiate position where possible • Intelligence shows that over the next 6-12 months we will need to develop a plan to run selection and recruitment programmes for all grey book posts from FF to ACFO to enable us to have sufficient capacity, capability to deliver the service 	<ul style="list-style-type: none"> • Strategy has been agreed and through consultation. Work is now starting on developing the detailed action plans. A number of related project plans agreed and monitored through PB. • Workforce Planning Board established. Standard report -workforce information. Impacts of IRMP projects identified, promotion schedule agreed 06/18, monitoring promotion activity & pools for succession reported, specific Task & Finish group set up • Middle Manager development programme embedded with majority of MM now completed. Full evaluation of programme still to come to SLT. • Recruitment PID agreed at PB March/ updated May. Work leads assigned, priorities identified, regular review on project progress via project meetings in between PB meetings. Portal secured • This action forms part of the People Strategy and will be picked up in the recruitment project. • This is a new treatment designed to respond to a growing concern around temporary roles. Temporary chains considered as part of the Workforce Planning Group • We are at the early stages of the treatment and will be seeking external support where possible. Promotion process for GMs complete. 	18	18	

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Failure in delivery of ESMCP National Programme (Risk: 425)) Risk Owner: Deputy Chief Fire Officer					
Inherent Score: 22					
If the ESMCP National Programme fails to deliver a new Emergency Services Network (ESN) or key component parts of ESN that properly enable FRS mobile communications, then the service risks not having robust mobilisation and communications systems to support operational crews and officers or insufficient time to implement its own replacement systems. This would directly impact delivery of services and consequentially public confidence and reputation.	<ul style="list-style-type: none"> • Programme Management structures for SC Region • Communication of service and regional concerns through Fire Customer Group and NFCC lead. • ESN National Programme change to an incremental approach to ESN delivery - Review of impacts to be completed June - Sept 2018 – incl. extension of airwave implications and appetite for phased product adoption. 	<ul style="list-style-type: none"> • DCFO Steve Foye maintains on-going oversight of national progress at Fire Customer Group and chairs SC Regional Group. This is an on-going treatment. National Programme are currently going through a programme "reset". Expected July 2018. • Attending or dialling into monthly Fire Customer Group meetings. Regional NFCC ESN team attend South Central Programme Board. Monthly and other updates from national programme shared with key staff for impacts and feedback. • June return made to ESN National Programme re incremental approach (see risk 418). Project Board now developing options for RBFRS take on of ESN following incremental delivery model published timelines. To come forward for liaison with SLT and TVFRS' 	18	18	
Management of Assets (Risk: 427)) Risk Owner: Deputy Chief Fire Officer					
Inherent Score: 21					
If we fail to effectively manage our ICT, facilities and operational assets, from acquisition to disposal, which may become increasingly likely as we upgrade our equipment and facilities, we will be unable to effectively track assets for maintenance and financial management purposes.	<ul style="list-style-type: none"> • Introduce and maintain asset management system within Facilities. • Finance to review policy and methodology for the disposal of assets. • ICT to review and capture current asset management process ensuring any disposal arrangements align with organisational policy • Introduction of the use of Tranman to provide a fully automated process for the management of operational assets. 	<ul style="list-style-type: none"> • 2 new staff have been recruited to help support the project and work is well underway on a pilot at Wokingham Road station. The project has recently left the organisation but recruitment activities have started for a replacement. • work on this has started but will be revisited as the project moves forward particular to review definitions of Assets and values of assets • ICT fully engaged in asset management project activities with a view to ensuring that where appropriate, existing systems are explored and assessed against overall RBFRS requirements 	18	18	

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
		<ul style="list-style-type: none"> further work is required prior to full implementation including consideration of the findings from the Wokingham road pilot 			
Fire Service College (Capita) (Risk: 479) Risk Owner: Head of HR and L&D Inherent Score: 13					
<p>If the Fire Service College fails to deliver its services, which may become more likely given the financial health of the parent company (Capita PLC), then we can expect to see a cessation or reduction in the availability of training courses for new firefighters and existing staff (covering a range of areas), which will be significant in relation to our need to develop and maintain a safe and competent workforce.</p>	<ul style="list-style-type: none"> Monitor training needs and bookings with the FSC to ensure courses are to be delivered as planned Identify other providers of training Export recruitment data through each stage of the forthcoming recruitment process to enable management of the process internally in the event the online platform ceases to be available. Reorganise commitments internally as necessary to accommodate any changing circumstances Regular financial health monitoring 	<ul style="list-style-type: none"> Training Plan for 2018/19 outsourced training considered - No difficulties identified in accessing training as at Oct 2018 - monitoring continues. Training requirements for 19/20 TCR process commences Oct. Provider options considered in relation to training need, availability and cost. Alternative providers for most training known to organisation. Provision in system enable the export of data. To be built into recruitment process commencing Feb 2018 - WT campaign closed Assess requirements as circumstances dictate. Consider outsource of other training to enable recruit training to be delivered in house if necessary but not required for WT before 2019/20 Monitoring of the financial health of capita provided via procurement for awareness 	10	10	↔

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Ongoing viability of Capita Communications and Control Solutions (Risk: 480) Risk Owner: Head of Business Information Systems Inherent Score: 20					
If Capita Communications and Control Solutions ceases trading, is sold or divested, or stops providing services to RFBRS, which is an increased possibility given Capita Systems recent profit warning, then we can expect software and hardware support for the Vision Mobilisation and control systems to be disrupted, degraded, or cease altogether, which is significant in respect of our Service delivery response, and Collaboration objectives	<ul style="list-style-type: none"> Monitor corporate and financial health of Capita Communications and Control Solutions 	<ul style="list-style-type: none"> Ongoing monitoring continues - no major issues or alarming trends developing. Update - no significant change in position but the credit rating are still volatile 	10	13	↑
Impact of GDPR Non-compliance (Risk: 481) Risk Owner: Head of Business Information Systems Inherent Score: 18					
If we do not manage the service's compliance to GDPR requirements, which is increasingly likely due to impending legislative enforcement, then we can expect increased likelihood of negative reputational impact and significant financial penalties in the event of a personal data breach.	<ul style="list-style-type: none"> Central Policy updates to reflect GDPR IG Team resourcing GDPR compliance tracking Investigate/implement Subject Access search and rights application system to reduce organisational overhead and time to respond to SARs 	<ul style="list-style-type: none"> In-scope policies have been identified and 6 policies have now been revised and published Additional resource is being sought to alleviate routine workload from key existing resources. Update: Interviews taking place for shortlisted candidates. Decision w/c 15th October Ongoing tracking of progress against action plans - 79% complete as of 15th October, with an estimated completion date of late November 2018 based on current rate of progress Initial research into potential solutions started - utilising Gartner magic quadrant for research. Update: System capabilities reviewed favourably by IG and ICT teams. Onsite demo date not finalised yet. 	13	13	↔

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Management of Corporate Data, Information and Knowledge (Risk: 482) Risk Owner: Head of Business Information Systems					
Inherent Score: 17					
If RBFRS fails to effectively manage the sharing, control and distribution of corporate data, information and knowledge, which is increasingly likely due to the increasing complexity of data flows into, out of and within the organisation, as well as significant change in organisational structure and personnel, then we can expect mishandling and loss of critical information as well as reduced efficiency in getting the right information to the right individuals for the right action to be taken, which is significant in respect to achieving all of our strategic objectives	<ul style="list-style-type: none"> • Create a data classification framework to ensure that appropriate departments and individuals are sighted on the data classes their role(s) demand, and which defines the management and handling of specific record types. • Create an Information Sharing policy to ensure that consistent handling of critical information is defined • Review and update email distribution lists to reduce unnecessary exposure to information • Create a document management policy to clarify the lifecycle management of information types and permissible modes of storage/transmission • Create Process and Standard Operating Procedure documentation for business critical information flow management to cover inbound, outbound and intra-service information flow • Establish learning/comms Vehicles to ensure consistent familiarisation and awareness of information management processes and procedures 	<ul style="list-style-type: none"> • Draft framework accepted. Work has begun to draft the business case for necessary resourcing to progress. • Consultation with the wider organisation has begun but further work to complete. • Update: No further progress at present - requires business consultation for input • Document Management policy in draft revised target date December 2018 • Not started - this will be driven by the detail work undertaken as a result of Data Classification identification consultation work with the service. • Not started - this will be driven by the detail work undertaken as a result of Data Classification identification consultation work with the service. 	10	16	↑
Data reliability, validity and analysis (Risk: 483) Risk Owner: Director of Support Services					
Inherent Score: 21					
If we fail to maintain reliable systems and accurate data that supports effective and timely analysis and continuing improvement of knowledge about our activities and their impacts, then we will not be able to make informed, evidence based decisions, manage and improve performance of services, report effectively on this performance to the Fire Authority and the public	<ul style="list-style-type: none"> • Commission work to scope longer term data resolution and development. • Maintain capacity within the data and performance team to deal with all organisational intelligence requirements, ensure scope of responsibility is clear and use of analytical capacity efficient. • Develop skills and capabilities of data and performance team to enhance analytical capability of the organisation. • Ensure close liaison and effective working relationships with BIS to ensure data assurance and reporting 	<ul style="list-style-type: none"> • TV mapping and modelling steering group now reports into TV collaboration board. • DPAM role filled on a temporary basis. Longer term business case due to be brought to SLT to ensure this function is able to meet new and emerging organisational requirements. • Training requirement submitted for 2018/19 with some flexibility for developing requirements. Objective setting completed. Ongoing identification of training needs. 	15	15	↔



Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
<p>and respond to audit needs - such as HMICFRS. This would substantially undermine our financial and resource efficiency, operational effectiveness and our political and public reputation.</p>	<p>methodology, as well as ensuring D&P team have access to data required to perform role, and SQL reporting controls</p> <ul style="list-style-type: none"> • Ensure clear, documented and agreed definitions of performance measures, starting with corporate measures • Ensure accuracy of reporting systems and processes, ensure smooth scorecard retirement • Improve data entry processes across the organisation to ensure data integrity • Developing performance department to actively support other teams in using performance management tools, data and information and knowledge to define delivery plans • Ensure performance management framework and processes are aligned to HMICFRS requirements, where this is appropriate and helpful. • Build links with analysts and data managers in partner FRSS, Home Office and HMICFRS to ensure any issues and efficiencies are identified. 	<ul style="list-style-type: none"> • Agreed an approval process with BIS for commissioning and approval process of data reporting to ensure data integrity. Fortnightly meetings in place to monitor progress on development work. • Significant progress made as part of development of 18/19 Corporate measures. New SQL reporting tool launched as part of quarter 1 reporting, feedback collection period now underway. • Audit and verification of feeds ongoing. Small number of outstanding issues in relation to scorecard retirement, these will be risk assessed prior to a decision to turn off. Access removed for users 13/09. • Work underway as part of the BPI programme to identify areas of continuous improvement in prevention and protection processes to include data entry and quality. • Team manager is developing relationships and communication channels with hub managers. Data input and process focus continues to have an impact on value added here. • Completion of two data requests. Assessment of data requested and national picture in progress. • Met with HMI data leads from Ox and Bucks in June and October. Continue to stay in touch with HMI data team and build contact with HO analysts. 			

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Response to Home Office Reform Programme (Risk: 484) Risk Owner: Director of Support Services					
Inherent Score: 21					
<p>If RBFRS fails to meet the expectations of the Home Office Fire Reform Programme and fails to deliver against the revised national framework as monitored by the HMICFRS Inspection Programme, which may become increasingly likely given absence of clarity on the details of the inspection programme, then we can expect to receive a lower than desired inspection assessment, reputational damage and loss of public confidence which will be significant in our ability to meet our strategic objectives.</p>	<ul style="list-style-type: none"> • Ensure plans and projects (inc IRMP) are focused on delivery of services as set out in the efficiency and effectiveness elements of the National Framework and HMICFRS methodology. Gather evidence to show how projects are delivering against plans. • Ensure that the new People Strategy is aligned to the people element of the National Framework and HMICFRS methodology. • Engagement with HMICFRS through NFCC, directly and through national and regional consultations and events, to ensure ability to plan against emerging programme. • Ensure that we have adequate resource to manage and direct the preparation for and process of the inspection. • Ensure that we have adequate capacity across the organisation to meet the practical requirements of the HMICFRS Inspection. • Identify stakeholders and develop a communication plan to ensure all stakeholders are fully informed in relation to the Inspection Programme plans and RBFRS preparation. 	<ul style="list-style-type: none"> • Corporate Plan and IRMP 2019-23 aligned to National Framework (including HMICFRS), has concluded its consultation phase for report to Fire Authority. Reporting to quarterly SPB and bi-monthly Programme Board on project progress in place. • People Strategy published. Projects have been started on key focus areas and long term plan being developed to understand timescales for the delivery of the remaining activities. • Responses to consultations and attendance at events. New Service Liaison lead assigned in October, visits arranged to ensure SLL fully briefed ahead of Discovery phase. • Project group has been set up to manage the HMICFRS planning and prep. Two data submissions completed. Document request and self assessment submitted. Additional resource in place to support engagement visits for new SLL. • A standard service plan objective for HMICFRS involvement has been developed and agreed for use across the organisation for 2018/19. Following completion of inspection, requirement actions to be incorporated into 2019/20 corporate planning. • A communication plan for staff and FA members has been developed and continues to be rolled out with updates as required. Work ongoing around organisational awareness of inspection processes, including workshops with Middle Managers. 	15	15	

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Volatility of funding (Risk: 506) Risk Owner: Chief Fire Officer					
Inherent Score: 24					
If RBFRS fails to receive sufficient funding, which is becoming more likely given the level of national debt, the Government's fiscal policy, increasing volatility in local funding and increasing budget pressures, we can expect to face further reductions in service delivery and a loss of public trust, which will severely impact on our ability to deliver our statutory duties and strategic objectives.	<ul style="list-style-type: none"> Political engagement with Central Government to ensure new burdens are matched with new funding Political engagement with Government to remove precept cap and referendum requirements which will allow additional flexibility in local funding Engagement with Central Government, through Political lobbying, Fire Finance Network and NFCC, on new Fire Funding proposals Engagement with fire minister and Home Office Officials to explain and clarify RBFRS pressures and risk/demand methodology. Write to all Berkshire MPs to gain support for our return to Government for the Local Finance Technical Consultation 	<ul style="list-style-type: none"> Responded to Central Government on 2019/20 Local Finance Technical Consultation. Engagement with Berkshire MPs has been encouraging and engagement continues. Responded to Central Government on 2019/20 Local Finance Technical Consultation. Engagement with Berkshire MPs has been encouraging and engagement continues. Will look to respond through the various channels to ensure our views are taken into account early on in any decision-making processes. Correspondence has been exchanged between minister and officials and a conference call has taken place on 11 May. Chairman has written to all local MPs to canvas support for flexibility in precept funding. 	17	18	↑
Management of Resources (Risk: 507) Risk Owner: Assistant Chief fire Officer					
Inherent Score: 24					
If we fail to manage resources tightly which is more likely in the short term given that the organisation has undergone substantial restructuring then we can expect that resource utilisation will be sub-optimal which will negatively impact on our ability to deliver an efficient and effective service to the public.	<ul style="list-style-type: none"> Robust internal budget monitoring and management processes Initiate budget setting process for 2019/20 in September Agility in internal planning processes to ensure delivery plans are matched to Medium Term Financial Plan Effective and flexible Treasury and Reserves management Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified. 	<ul style="list-style-type: none"> Q1 revenue and capital budget monitoring work completed with full engagement from cost centre managers. New permanent employee focused on this area started Aug 18. Planning is underway and is a key deliverable for the Finance and Procurement Service Plan Planning for IRMP projects delivery is in place. 10 year capital strategy presented to Fire Authority in July On-going connection with Police, regional FRS's and SCAS through range of forums (ESMCP, SEORRG, TV Collaboration and Partnership etc.). 	16	13	↓

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q4 risk score	Current risk score	Direction of travel
Property Capital Projects - Theale (Risk: 516) Risk Owner: Head of Property Capital Projects and Estates Inherent Score: 22					
<p>If the site remediation works are more extensive than surveys indicate, which is possible on this site, then we could see an increase in the costs to carry out the remediation works.</p>	<ul style="list-style-type: none"> Site remediation will form part of a separate tender to the main build contract in order to work more closely with the specialist contractors to identify the works and strategy to remediate this site in line with requirements for build contract. Once further review of existing survey works have been completed, the remediation specialists will be able to provide more detailed cost estimates for the required works 	<ul style="list-style-type: none"> Initial detailed survey works have provided a good level of information about the remediation strategy required. The project team will now work closely with specialist remediation contractors to refine a further detailed survey. Having engaged directly with specialist contractors, no additional survey work is required to inform tender process. Tender documents now being prepared for release in Jan 2019. 	n/a	22	New risk

Accident Investigations

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 Y.T.D.
Accidents Requiring Investigation	Minor	12				12
	Moderate	6				6
	Major	0				0
Near Misses Requiring Investigation	Minor	5				5
	Moderate	4				4
	Major	0				0
*Accident Investigations Completed	Minor	12				12
	Moderate	2				2
	Major	0				0
*Near Miss Investigations Completed	Minor	5				5
	Moderate	2				2
	Major	0				0
**Recommendations not Implemented	Minor	0				0
	Moderate	0				0
	Major	0				0

* Accident investigation policy allows Accident Investigation Officers a maximum of two months in which to carry out their investigation, complete and submit their report.

**Recommendations arising from accident investigations that have not been implemented.



Minor - an accident which causes only a slight injury, with little pain or discomfort, and not requiring medical attention other than first aid, with no potential to have been more severe, or a near miss event with the potential to cause slight injury. The local workplace manager investigates these events.

Moderate - an accident which causes an injury requiring medical treatment immediately (not including first aid) or at a later date (for example physiotherapy), and/or an accident that is likely to lead to more than three days' absence from work or normal duties (i.e. restricted duties) but is not a specified injury as defined under RIDDOR, or a near miss event, including Dangerous Occurrences as defined under RIDDOR, which had the potential to have caused such injuries. These investigations are carried out by someone who is trained in analytical accident investigation, known as an Accident Investigation Officer (AIO).

Major - an accident that causes a death or a specified injury as defined under; or a near miss event, including Dangerous Occurrences as defined under RIDDOR, which had the potential to have caused such injuries. Major events are investigated by a team of AIO's, co-ordinated and led by an Area Manager.

Near miss - an unplanned event including damage to equipment and property that had the potential to cause death, injury or ill health. Accident categories may be re-categorised at any point before or during the investigation, which can retrospectively affect the numbers.



Audit Recommendations

The audits shown have been undertaken and recommendations agreed. The information provides a progress on those open recommendations as of 02/08/18

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open / Closed	Date of Audit	Allocated to
Cyber Security (or Cyber Risk Management)	Management should look to get the software management portal completed so they can observe their actual compliancy with licenced software as well as with unsupported software.	31/03/2018	31/12/2018	Medium	In progress. Software asset management tool is in active use and a software inventory is being built. UPDATE May 18: Snow SLM configuration is in progress with currently 50 complete. All agreements have been imported, now working on license import and manual one-off matching exercise to generate automated notifications to asset owners. UPDATE Sept.18: completed a comprehensive manual review of our software-licensing environment and are now ready to import this information into our software asset management software, once the licensing automation module has been purchased and installed.	RED	open	06-Dec-17	Head of Business and Information Systems (HBIS)

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open / Closed	Date of Audit	Allocated to
Cyber Security (or Cyber Risk Management)	Management should remove all legacy software from their computers as the manufacturers no longer release security patches for them.	31/03/2018	31/12/2018	Medium	Software asset management tool inventory will be used to catalogue legacy applications and flag for retirement. Legacy software will disappear as older machines are decommissioned. Only current software is being installed onto new builds. UPDATE May 18: Requires purchase of additional modules for Snow SLM, which will automate the identification and removal of unused or redundant software, and recycle licensing if appropriate for alternate legitimate usage. UPDATE July 18: The automation tool has been demonstrated and appears to deliver on all of our requirements. Two outstanding tasks remain before we can make a purchase decision: 1) We need to visit a reference site to provide additional assurance on functionality. This is being arranged with the help of the software supplier 2) We need to determine the current and future workflow volume requirements in order to understand the overall cost to deploy	RED	open	06-Dec-17	Head of Business and Information Systems (HBIS)

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open / Closed	Date of Audit	Allocated to
Procurement Advisory Review	Recommend that current controls are extended to cover post-award contract management. In particular, for business-critical contracts that are high in risk, value or complexity.	31/03/2018	31/07/2018	n/a	This is already set out in the Contract Regulations and will be supplemented by a new contract management guidance document. This will be supported with the new contract management-training course planned to start in April 2018 as set out in 2.4 of this report. The new course will form part of the Core Skills continuing development programme. The course will be designed to ensure the contract is managed according to risk, cost and criticality to the service as well as supplier development. In addition, quarterly financial health checks and annual checks on insurance and compliance with other standards is already carried out. UPDATE Jan 18 - The new course is currently being drafted and will be signed off ready for use in late February 2018. UPDATE May 18: A new Contract Management Online Training course as part of a new suite of online procurement training has been developed and should be ready for use in June 18. The online training tool scope has been broadened to enable it to be used by any emergency service. Includes 6 training modules from raising a Purchase Order through to a detailed training module for contract managers. The new online tool will be available from mid-June. A Contract Management Framework that is aligned to the training will be completed in July 18. Update July 18 – Contract Management Framework and Procurement Strategy drafted. SLT to consider documents for approval on 7th August 18	AMBER	open	07-Dec-17	Procurement Manager

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open / Closed	Date of Audit	Allocated to
Procurement Advisory Review	Recommend that RBFRS considers extending the procurement training to cover contract management and contract deployment. This is vital in ensuring that any value captured up to the state of award can be maintained thereafter.	30/04/2017	31/07/2018	n/a	The new course is currently being drafted and will be signed off ready for use in late February 2018. UPDATE June 18: The Procurement course has been turned into an online training tool covering all aspects of the procurement lifecycle, including low value quotes, raising a PO through to managing a contract. The online tool is being finalised by the supplier and will be ready for launch 1st July 18. Update July 18 – Online course now covers 6 modules and is signed off and will be launched September 18	AMBER	open	07-Dec-17	Procurement Manager
Procurement Advisory Review	Recommends RBFRS considers investing in contract management software, which may serve as a repository of documents alongside providing other information such as key trigger dates within contracts.	31/12/2018	n/a	n/a	The Authority is currently planning to purchase an additional Sage module that will encompass this information and link this to the scanned copies of live contracts on the S drive. This work will commence in July 2018. UPDATE June 18: Current Sage supplier has been asked to provide P2P module options that will work with Sage but is not limited to Sage only so portable to any new software the Authority might move to in future. Update July 18. Librea are mapping current P2P manual processes August 18. Project brief to commence full review and identify options and business case for a new P2P solution to be considered by SLT 7th Aug 18	GREEN	open	07-Dec-17	Procurement Manager

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open / Closed	Date of Audit	Allocated to
Procurement Advisory Review	Recommends RBFRS Ensures that the governance in collaborative procurement projects, where there is shared responsibility and accountability between organisations, is agreed. Terms of reference for projects should identify which parties have lead accountability and authority for key decisions.	31/03/2018	31/07/2018	n/a	This is a new requirement as a result of the high proportion of tenders now being run collaboratively. This piece of work is already on the Thames Valley Procurement Collaboration programme of work. UPDATE Jan 18 - A first draft is due to go to the next Procurement Collaboration meeting in March 2018. UPDATE June 18: Report drafted for review by the Strategic Collaboration Board Update July 18 Collaboration Executive Board have requested a lesson learned at their next meeting and may then request a governance document for procurement collaboration	AMBER	open	07-Dec-17	Procurement Manager
Timesheets and Timekeeping	Management will streamline the policies where possible into fewer documents, enabling more swift updating and review of policies	30/09/2018	31/03/2019	Low	Currently being looked at to when best to undertake in line with rest of policy review Update July 18: Annual leave Policy for WT and RDS is currently being reviewed in-line with the RMS/FDO policy. This will look to amalgamate the RDS and WT policies and consider incorporation of the optimisation of crewing policy. Green book leave policy amalgamation was considered but it was identified that due to the vast differences this policy should remain separate – Green book A/L policy is currently out for formal consultation due for publication 3 September	GREEN	open	01-Mar-18	HHR & LD

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Quadrant Four - Risk

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open / Closed	Date of Audit	Allocated to
Timesheets and Timekeeping	Guidance relating to the parameters for completing the timesheets in practice will be included in the Flexible Working Hours Policy. Once completed this will be communicated to all current and future non-uniformed staff and those who manage non-uniformed staff.	Sep-18	31/12/2018	Low	Currently being looked at to when best to undertake in line with rest of policy review UPDATE July 18: To be undertaken following publication of the Annual Leave Policy	GREEN	open	01-Mar-18	HHR & LD
Timesheets and Timekeeping	Management will implement a reference guide for activities and type of leave to be used within the Firewatch system	Sep-18	n/a	Low	To be commenced UPDATE July 18: To be undertaken following publication of the Annual Leave Policy	GREEN	open	01-Mar-18	HHR & LD
Timesheets and Timekeeping	Managers will be issued guidance and reminded of their responsibility to regularly review timesheets	Sep-18	n/a	Low	To be commenced UPDATE July 18: Weekly email to managers has been developed and cascade article to be issued (W/C 6 August)	GREEN	open	01-Mar-18	HHR & LD
Timesheets and Timekeeping	RBFA will investigate the possibility of implementing refresher Firewatch manager training for non-uniformed managers, to ensure wider awareness of efficient methods for reviewing time.	Sep-18	n/a	medium	To be commenced	GREEN	open	01-Mar-18	HHR & LD
Timesheets and Timekeeping	Policies will be amended to state under what circumstances staff may enter their own leave	Sep-18	n/a	Low	Currently being looked at to when best to undertake in line with rest of policy review UPDATE July 18: Guidance document to be issued following finalisation of the Annual leave policy for Green Book staff	GREEN	open	01-Mar-18	HHR & LD

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Quadrant Four - Risk

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open / Closed	Date of Audit	Allocated to
Timesheets and Timekeeping	Once the self-serve module is implemented: It will be mandated as the official method for inputting holiday requests. The new process will be clearly communicated.	Sep-18	n/a	low	Awaiting changes to FireWatch UPDATE July 18: Self-service yet to be rolled out interim arrangement developed to be published following policy publication	GREEN	open	01-Mar-18	HHR & LD
Key Financial Controls	RBFRS will ensure that all journals are prepared and approved in line with the delegation of authority	Jun-18	Sep-18	Low	Discussions are underway with system provider to see whether alternative authorisation processes are possible directly within the system. Exchequer and Systems Manager is monitoring current processing to ensure compliance. UPDATE July 18: Solution has been identified with system provider to enable this to be captured within the system rather than manually and testing has been completed in the demo system. This will now be implemented in the live system in Q2.	GREEN	open	16-Mar-18	Deputy Head of Finance
Key Financial Controls	RBFRS will rename the accounts with 'suspense' in their names on the balance sheet so that they accurately reflect the purpose of the account. If there are any actual suspense accounts remaining then RBFRS will ensure that these are reviewed and cleared on a monthly basis.	Jun-18	Sep-18	Low	Accounting Manager to update the names on the balance sheet in Qtr 1 18/19 with the Exchequer and Systems Manager. UPDATE July 18: Accounting Manager to update the names on the balance sheet in Qtr 2 18/19 with the Exchequer and Systems Manager (part of the wider Chart of Accounts work).	GREEN	Open	16-Mar-18	Accounting Manager

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Quadrant Four - Risk

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open / Closed	Date of Audit	Allocated to
Key Financial Controls	RBFRS are planning a P to P project for 2018 and will build this requirement (identifying a secure method for sign off), into the project (digital signature).	Jun-18	Sep-18	Low	Project planning underway with meeting with potential supplier held in Qtr 1 18/19. Awaiting further information from supplier before deciding agreed approach. UPDATE July 18: Sign off solution within system (outlined above) will satisfy this for journals. P2P project planning is progressing with project documents due at SLT in August 2018. Any new system procured later in 18/19 will include an authorisation process which will satisfy this requirement.	GREEN	open	16-Mar-18	Deputy Head of Finance
Key Financial Controls	RBFRS will investigate how segregation of duties can be incorporated into the SAGE system to ensure that invoices and journals cannot be posted without authorisation from an independent and appropriate person. RBFRS will look to build this into SAGE during the P-to-P project scheduled for 2018.	Jun-18	n/a	Low	Has been picked up as part of discussions with system supplier in Qtr 1 18/19 looking at the P2P project and the authorisation of journals. UPDATE July 18: Was covered as part of discussions with system supplier in Qtr 1 (outlined above). Any new P2P system procured later in 18/19 will include an authorisation process which will satisfy this requirement.	GREEN	open	16-Mar-18	Exchequer and systems manager
Key Financial Controls	The finance team will review the activities carried out by staff members and ensure that each activity can be carried out by at least two members of staff and thereby ensuring roles can be covered where there are staff absences.	Sep-18	n/a	Low	Staffing structure is currently being reviewed, but cross training has begun in Qtr 1 18/19 and this will be reinforced once the permanent staffing structure has been implemented. UPDATE July 18: Staffing structure is currently being finalised, with new structure implemented in August 2018. Cross training began in Qtr 1 18/19 and this will be reinforced once the full staffing structure has been implemented.	Green	open	16-Mar-18	Deputy Head of Finance



Audit Recommendations Closed during Q1

Audit title	Audit Action	Date by	Completion	Priority	Progress	Date of Audit Report	Allocated to
Cyber Security (or Cyber Risk Management)	Management should enable a local firewall on all local devices to prevent incoming cyber-attacks.	31/01/2018	July 2018	Medium	We are testing a group policy to apply the Windows firewall to client machines. There is significant effort required before it will be possible to enable firewalls on servers, as this is likely to have a major impact. UPDATE May18: Test solution has been on long-term impact and stability test with no adverse issues reported. Wider testing with selected representative users will take place imminently. UPDATE July 18 : Complete	06-Dec-17	Head of Business and Information Systems (HBIS)
Timesheets and Timekeeping	HR will ensure all promotion letters note the current or new annual leave entitlement	Sep-18	July 2018	Low	Complete	01-Mar-18	HHR & LD
Timesheets and Timekeeping	Automated Firewatch report to be developed to provide line managers with weekly information on their direct reports showing what hours have been posted.	Sep-18	July 2018	Medium	Currently in work plan to be commenced UPDATE July 18: Completed – to commence issue early August 2018	01-Mar-18	IT Business Analyst

Audit title	Audit Action	Date by	Completion	Priority	Progress	Date of Audit Report	Allocated to
Procurement Advisory Review	Recommends that RBFRS ensures that the post-award contract management responsibilities are agreed at the outset. This should include what protocols are to be followed should one or more of the parties has a change in strategy that requires a change to the contract or exit prior to contract completion.	31/03/2018	July-2018	n/a	This is set out in the Contract Regulations and there is a documented process to deal with any contract variation and approval. This will also be added to the internal contract management guidance and training. UPDATE Jan 18 - To be included in the new Contract Management Guidance to be completed for sign off end of February 18. UPDATE: June 18: Already included in the contract award report and agreed with named contract manager. Also included in the new contract management guidance and online training tool UPDATE July 18 - COMPLETE	07-Dec-17	Procurement Manager
Key Financial Controls	RBFRS will ensure that uncleared and unrepresented items in the bank reconciliation are resolved as soon as possible once they have been identified in the bank reconciliations. The bank reconciliation file will include comments against any reconciling items to give an explanation as to why they do not reconcile and what action will be taken to resolve it.	Mar-18	July-18	Low	Uncleared and unrepresented items outstanding at the end of Qtr 4 17/18 have been reviewed and resolved. Monthly position is being monitored by the Exchequer and Systems Manager. UPDATE July 18: Uncleared and unrepresented items outstanding at the end of each month is being monitored by the Exchequer and Systems Manager. Two cheques issued have currently not been cashed. One will be cancelled in August 2018 if not cashed.	16-Mar-18	Exchequer and systems manager
Key Financial Controls	An email will be sent to all relevant staff to remind them of the processes at RBFRS including the requirement to complete invoice and credit note request forms and the ensure that these are complete and accurate.	Mar-18	July-18	Low	Email sent Qtr 1 18/19	16-Mar-18	Exchequer and systems manager

Audit title	Audit Action	Date by	Completion	Priority	Progress	Date of Audit Report	Allocated to
Key Financial Controls	RBFRS will ensure that all virements are posted using the agreed processes in place to ensure that the spreadsheet tracker is fully up to date. In extreme circumstances where virements are required to be entered directly on to SAGE, retrospective authorisation and segregation of duties will be recorded on the Virement spreadsheet.	Jun-18	July-18	Low	All virement requirements are following the agreed process. UPDATE July 18: All virement requirements are following the agreed process, and is being closely managed by the exchequer and systems manager.	16-Mar-18	Deputy Head of Finance
Firefighter Pension Administration	The pension letters will be updated to better clarify the situation and the options available to the pension holder.	Jul-18	June-18	Low	Completed - Letter updated to reflect the value of pension benefits will be provided as soon as available	19-Jun-18	WYPF
Review of Payroll Provider (Dataplan)	Management will periodically review that action 5 sheets have been signed and dated by the officer's responsible for amending and reviewing the payroll data to ensure adequate segregation of duties.	May-18	May-18	Low	Implemented whilst audit was being conducted	18-Jun-18	Dataplan - Payroll Manager for RBFS account
Timesheets and Timekeeping	Management will review the current induction processes for managers to ensure they are shown the most effective ways for monitoring time posted.	Sep-18	July-18	Medium	To be commenced - Emma and Maja reviewing induction processes UPDATE July 18: New staff are now invited for training by HR on FireWatch time recording in welcome email as appropriate.	01-Mar-18	HHR & LD

Audit title	Audit Action	Date by	Completion	Priority	Progress	Date of Audit Report	Allocated to
Firefighter Pension Administration	RBFRS will look into the possibility of training another staff member to be able to deal with pension issues such as those relating to bandings and contributions.	Sep-18	July-18	Low	Additional staff member identified for training	19-Jun-18	HR Manager
Firefighter Pension Administration	WYPF will ensure that the new release of software supports the calculations required to enable statements to be given to employees leaving.	Jul-18	Aug-18	Medium	Update August 18: Software is now in place.	19-Jun-18	WYPF

Appendices

Appendix A: Update on Progress of the ICT Strategy Year Two

Tony Vincent, Head of Business and Information Systems

This ICT strategy is intended to design and embed a reliable, resilient ICT support service that will technically enable the implementation and ongoing delivery of the Strategic Commitments and Vision 2019. This is a high-level update for items agreed as part of the action plan and reflects the period April to June 2018.

Task	Progress	RAG
ICT information governance framework established and approved by IRMP	Framework published and governance arrangements will be finalised following arrival of new HBIS. Protecting Information e-learning package rolled out across the organisation – over 90% compliance achieved. IRMP/programme board no longer overseeing as twin aims of ESN accreditation and GDPR compliance driving activity.	G
Guiding principles implemented and PSN accreditation achieved	ESN Code of Connection requires both network security and wider IA conditions. National Cyber Security Centre standards chosen as accreditation for IA. Rolled into year 2 due to changing timelines for ESMCP. Plan to achieve Cyber Essentials certification as part of this. ICT Audit action plan has identified a range of activities, which are currently in execution; expected completion for all outstanding actions is end of Q4. This effort will reduce any additional effort required to achieve Cyber Essential Certification. All but two audit actions have been completed – the outstanding actions concern ongoing software license management. This has been delayed due to pressure of other priority work.	R
ICT infrastructure is fit for purpose and supports a reliable, robust IT environment	TVFCS Vision infrastructure resilience improvement plan in place and scheduled with the supplier. Ongoing capacity and resilience augmentation continues. New Mobile Data Management (MDM) solution implemented and all legacy Blackberry and other non-standard mobiles replaced for standard Samsung J5 phones. Opportunities to improve resilience and availability continue to be exploited, including increased firewall resilience for both RBFRS and TVFCS, and a change to the access methods for Firewatch and IBIS, both critical business systems for RBFRS.	G
Software and Hardware Asset management plans established	A software asset management solution for ICT resources has been implemented and is operational. RBFRS Device strategy is in development and work is underway to leverage existing asset management solutions across other RBFRS services (facilities, transport). Work continues in enhancing our utilisation of existing asset management platforms to automate hardware and software asset lifecycles as far as possible, and recycle these assets for use elsewhere within RBFRS where appropriate, maximizing useful life and value from these assets. Ongoing efforts are being made to identify, analyse and rectify resilience issues in key systems, notably Vision within TVFCS. Resilience and functionality upgrades have been scheduled for later in the year. The ESN focused upgrade has been retained, as this implements several important bug fixes and feature improvements that have been on hold pending ESMCP schedule publication. A live BCM simulation test including decant to secondary control in Kidlington was postponed due to system issues during Q1 but is rescheduled for Q2.	G

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Task	Progress	RAG
Cross training and up skilling of the ICT team	Our new starters have integrated well and are adding value to the team, to the extent that they are now shadowing existing duty communications officers for out of hours on call work. This will allow flexibility in the duty rota and bring additional strength in depth to this critical function. External network consultant contract has been renewed on a reduced hours basis, as internal skills continue to build in this technical area. One member of the team will depart in early Q1 18/19, which we plan to recruit a comms/electronics specialist into to assist with the non-ICT technical support elements of the organisation's remit. Advanced discussions are underway to secure an ICT apprentice to start during the 18/19 financial year.	G
ICT Service SLA and Service catalogue created	ICT Service SLA & catalogue is in place on vFire and is in use by all Newsham Court staff. VFire roll out across the remaining stations is underway and being carried out in conjunction with other station visits to minimize resource requirements. The SLA & Catalogue are still being adjusted to improve the services supplied by ICT. Out of hours (duty comms) SLA is still to be reviewed & an up to date agreed SLA implemented. The rollout of vFire to remaining stations has been completed, and ongoing refinement of our vFire portal have brought improvements in request and ticket differentiation and visibility, and improvements to the processes and workflow associated with Joiners, Movers and leavers have been implemented.	G
ICT work plan of BAU activities and prioritised development implemented	Annual work plan agreed and currently on schedule. The 2018/18 service plan has been compiled and published.	G
Applications portfolio (a list of all our systems) will be realigned to remove unnecessary applications	Software asset management capability has identified several opportunities for retirement of redundant, underutilised or duplicated applications. The process of decommissioning will continue for a number of months. Windows 10 and Office 2016 rollout is over 50% completed – this rollout is significantly simplifying the number of different installation types and configurations to a single standard per hardware platform. Windows 10 and Office 2016 rollouts are now completed with a very few exceptions where specialised software application require legacy system architecture. These applications are being examined for replacements in order to facilitate the eradication of the legacy environment.	G
Flexible working framework is developed to support new ways of working as part of the OD programme	This will be picked up later in 17/18. Work to create a strategy to support flexible working has been included in the 2018/19 service plan.	G
ITIL best practice standards in place embedded across whole of ICT	The change and configuration management process is now embedded and functioning as expected. Bi weekly standard change implementation windows have been established and all changes to systems, hardware or software are managed through a standard process. Problem Management process pilots have been carried out with some success - in one case successfully eradicating an issue manifesting between two third-party systems after a number of previous outages.	G

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Task	Progress	RAG
	<p>Problem and change/configuration management processes are now fully embedded within ICT, which has allowed several opportunities to identify and eradicate repeat instances of incidents, resulting in increased efficiency and less drain on support resources. There have been zero instances of issues caused by ICT infrastructure changes since implementing the new change management processes.</p> <p>Organisational development options to further align with the ITIL framework are under active consideration and will be developed further during Q2</p>	
Timelines for re-tendering, aligned to joint and shared tender opportunities	<p>Enhanced working practices in conjunction with procurement, has led to several migrations of contracts to framework suppliers and increase focus on lifecycle contract management has been brought to bear by the new HBIS. RBFRS has partnered with Buckinghamshire and Milton Keynes FRS and Oxfordshire FRS in a novel paging application that has the potential for enhanced mobilisation of retained crews in the future. Opportunities to explore joint working and joint procurement activities with not only our Thames Valley Partners but also other national FRS' are being explored via the NFCC ICT manager's group.</p>	G
A corporate content management solution is in place	<p>Intranet based content management system in place Yr. 1 Q4. Some further work required to ensure document control works effectively for information with high-risk implications. Continuing to work with service providers to remediate document control issues, however progress continues to be slow. Testing continues with mixed results. Ongoing effort is being applied to bring this to closure. Discussions to determine the future contract and technical management have been conducted internally and further discussions with the vendor have been scheduled for Q2</p>	R

Appendix B: Update on Progress of the Fleet Strategy

Steve Foye, DCFO. This Fleet Strategy is intended to design and embed a reliable, resilient Fleet and Equipment Department, which will enable the implementation and ongoing delivery of the Strategic Commitments and Vision 2019. This is a high-level update for items agreed as part of the action plan and reflects the period April to June 2018.

Task	Progress	RAG
Fleet and Engineering Management structure designed to meet future needs Fleet Strategy and principles agreed and Partnership with HFRS implemented	The Partnership is in the final stages of its current lifecycle. Given the success of the partnership, our intention is to recommend its continuation through an extension or renewal of the existing agreement. This extension for the forthcoming 2019-2024 term is in draft form and, subject to SLT and monitoring officer agreement, will be presented to the Authority for approval During Q3 2018/19. Alongside this we are looking at the roles in operation as part of the partnership to ensure they fully meet our needs going forward and to ensure all posts are filled.	G
Agree 4 year Main Pumping Appliance renewal plan - Commence Procurement exercise with TVFRS's	We received delivery of three new fire appliances during July. Our team brought them quickly into full operational capability the new appliance for Slough going into operation on the 19 July and the 2 new appliances for Newbury going into operation on the 24 July. This was a positive gain in time, with the team working with the supplier to reduce reported delays that were forecasting delivery in August and ensuring alignment with equipment provision and training of drivers to ensure the appliances went 'on the run' as quickly as possible. The old appliances that have been replaced will be kept as part of our reserve capability in the medium term. Ultimately we will reduce the reserve fleet but this will be after 2021. The next two new appliances are planned for 2019/20 with a further 2 the following year. We are considering the potential for increasing that number but will do this in consideration of our longer term Strategic Asset Investment Framework, availability of funding and with a mind to not adversely impacting our appliance replacement cycle. We will start work this year on our procurement approach for appliance provision for 2021 onwards. We will continue with the principle of doing this in collaboration with our partners in Oxfordshire and Buckinghamshire Fire and Rescue Services.	G
Review Equipment notes and technical information and create appropriate reference database	Equipment notes have been reviewed and redacted where possible to reduce the number of unnecessary documents. A separate access folder has been created in Siren. Further work is reducing and scanning documents to the electronic folders.	G

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Task	Progress	RAG
<p>Fleet Investment plan is created to align to medium term financial plan -</p> <p>Fleet and Equipment Asset Management plans established</p>	<p>A revised fleet & equipment investment plan has allowed capital provision to be made in the strategic assets investment framework (SAIF). A revised SAIF was approved by the Fire Authority on the 31 July 2018. Our approach has been facilitated by the development of a 25-year replacement schedule for all fleet assets. This will allow better programming of replacement and budget management in the future. Our Asset management is in the process of being reviewed to improve effectiveness and governance of all assets – this includes how we might use existing systems such as Firewatch and Tranman. The initial business case for improving Asset Management will be conducted in Q1 and 2 of 2018/19 and is likely to lead to further work through 2018/19 including the initiation of a project to delivery any new capability.</p>	G
<p>Agree replacement programme for Special Appliances</p>	<p>The Fire Authority has agreed the replacement of the ALP. All fleet replacement projects have been subject to in-depth collaboration with our TVFRS partners and other services across the area. We have been moving forward with a tender and procurement process and a recommended vehicle choice is expected in Q2 of 2018/19. The process has closely involved users and has been carried out as a joint procurement exercise with Oxfordshire FRS.</p> <p>Later in 2018/19 we will be considering future Operational Support Unit capability. This will be based on need and risk and will consider how it relates to other specialist vehicle capability.</p>	G
<p>Determine multi-use vehicles requirements, available to provide off road access, flexible and effective back-up vehicles</p>	<p>During 2017/18, redeployment of vehicles and removal of under-used vehicles leading to the disposal of 21 white fleet vehicles with some redeployment of vehicles for more efficient and effective use at station and team level. Through liaison with Hub managers monitoring of operating arrangements is being considered following the 2017/18 work. Some minor adjustments are being made to ensure we enable effective and efficient working – for example redeploying a personnel carrier vehicle to Hungerford. This will be shared with another RDS station and supports staff undertaking training and provides greater operating flexibility.</p> <p>The Pool fleet has been enhanced by the redeployments and the purchase of 4 new pool fleet cars. A new 4x4 vehicle has been procured for the driving school to enhance the officer blue light training and to be available for use in operational spate conditions such as adverse weather.</p> <p>An interim solution to replace 4x4 vehicles has been implemented at Maidenhead. This has enabled to work to be completed to consider the longer-term capability requirement in line with IRMP requirements and as part of the long-term fleet replacement strategy.</p>	A

Appendix C: Update on Progress of the Peer Review Action Plan

Doug Buchanan, Group Manager, Risk and Performance

In February 2017, RBFRS welcomed a Peer Challenge team into the organisation to offer an external assessment of the Service. This Peer Review action plan is intended to address areas of development identified through that process to support effective delivery of the Strategic Commitments and Vision 2019. This is a high-level update for progress against agreed actions and reflects the period April to June 2018.

Task	Progress	RAG
Develop and publish a member/officer protocol	Completed October 2017.	
Ensure effective communication with staff, including SLT visits, staff forums, Cascade and The Shout	CLOSED - Ongoing engagement and communication with all staff groups remains a focus for the Service, particularly during a changing environment. The observations and recommendations of the Peer team have been absorbed into business as usual processes, which will be reviewed where appropriate.	
Conduct a review of the NVQ systems and assessment of competence and implement findings	CLOSED – Project in train – progress monitored through Programme Board. RBFRS officers recognise that our current system for assessing competence should be subject to review. PID to review the route to competence will be presented to Programme Board July 2018.	
Conduct a review of the addressing and recording of operational competence in collaboration with TV partners	CLOSED – Project in train – progress monitored through Programme Board The TRI system utilised to assess and record maintenance of operational competence requires review. PID to conduct collaborative review of MOC will be presented to Programme Board July 2018	
Continue to publish the Pay Policy Statement on the website	CLOSED - Business as usual.	
Implement the middle managers development programme to support effective leadership	CLOSED – Programme implemented. Middle manager development programme now virtually complete and feedback has been very positive	
Introduce a supervisory level staff development programme across the organisation	There are plans to commission further courses for supervisory managers.	G
Review of the promotion process and consideration of accelerated promotion opportunities	CLOSED – promotions processed reviewed. RBFRS have reviewed the promotion process with an intent to ensure we give the greatest opportunity for the best candidates. We are currently developing a service delivery model that will require further review.	
Monitor the NFCC work on accelerated promotion	CLOSED - Business as usual within organisational/people development.	

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Task	Progress	RAG
Establish an Equality and Diversity Forum and create an action plan, with a focus on culture, and subject to public consultation	CLOSED – EDI Forum established and regularly meeting. Equality Objectives and action plan developed. This work has progressed well through Q1.	
Establish task and finish groups to examine particular strands of EDI	CLOSED – operates to meet aspects of action plan. This work has progressed well through Q1.	
Recruitment project to review how RBFRS can attract individuals from underrepresented groups	CLOSED - A recruitment project has been developed to identify opportunities to effectively engage and target under-represented groups.	
Roll out EDI training across the service	CLOSED - Training provider identified and EDI courses being delivered across the Service.	
Manage RDS recruitment, retention and training through the RDS project Board	CLOSED – Project in train – progress monitored through Programme Board. - RDS project board progressing various work packages with successful results already evident. Intention to absorb this work into business as usual in 2018.	

Appendix D: Information Governance Report (April 2018 to June 2018)

Information Requests (under Freedom of Information Act (FOIA), Environmental Information Regulations (EIR) and Data Protection Act (DPA)).

Information Requests...	Apr 2018	May 2018	June 2018	Total
New Information Requests Received	8	15	20	43
Total Information Requests Actioned	19	20	32	71
IGT - Hours Spent on Information Requests	25 ³ / ₄	27	46	98 ³/₄
Others - Hours Spent on Information Requests	17 ¹ / ₂	16 ¹ / ₄	11	44 ³/₄
Timeframes not met (figures relate to request due date)	0	1	3	4
Internal Reviews (figures relate to request due date)	0	0	0	0

Incident Reports

Incident Reports...	Apr 2018	May 2018	June 2018	Total
New IRS/FI requests received this month	16	15	20	51
IRS/FI requests confirmed (includes not charged for)	5	5	6	16
Total IRS/FI requests actioned (incl. still in progress)	19	22	25	66
Income from requests	£204.00	£306.00	£408.00	£918.00
Figure in brackets - total ££ so far this year	(£204.00)	(£510.00)	(£918.00)	

Incident Recording System (IRS) Reports are charged at £102.00 (2018/19).

Fire Investigation (FI) Reports (where produced) are charged at £354.00 (2018/19).

Report costs are waived for TVP, local authorities, and other public sector agencies.

Appendix E: Service Provision Measure Definitions

ID	Measure	Definition
1	Number of fire deaths in accidental dwelling fires	The total number of deaths that occur as a result of an accidental dwelling fire. This includes a person whose death is attributed to an accidental dwelling fire, even when the death occurs weeks or months later.
2	Number of fire casualties in accidental dwelling fires	The total number of casualties that occur as a result of an accidental dwelling fire. This includes a person or persons whose injuries may be slight or serious and require hospital treatment and which are attributed to the accidental dwelling fire.
3	% of safeguarding referrals made to local authorities within 24hours	To ensure that safeguarding referrals are made in a timely manner for the protection of individuals. This is the time taken from the Duty Officer or Safeguarding Coordinator being made aware of a safeguarding case, to the referral being made to the local authority.
4	The number of deliberate primary fires	This is the total number of primary fires, where the cause has been identified that the fire was started deliberately.
5	The number of deliberate secondary fires	This is the total number of secondary fires, where the cause has been identified that the fire was started deliberately.
Prevention		
6	Number of Safe and Well visits (S&W's) delivered to those who are at heightened risk of dying in the event of an accidental dwelling fire	Research has shown that certain vulnerable groups are at heightened risk of dying in an accidental dwelling fire. S&W's will be targeted towards these vulnerable groups.
7	Number of S&W's delivered to those who are at heightened risk of having an accidental dwelling fire and being injured as a result	Research has shown that certain groups of people are at heightened risk of having an accidental dwelling fire and being injured as a result. S&Ws will be targeted towards these groups.

ID	Measure	Definition
8	% of priority home safety referrals, where there has been a threat or incidence of arson, completed within 48 hours	When RBFRS are made aware of the threat or incidence of arson against an individual(s) a home safety visit is conducted within 48-hours.
9	% of priority category 1 home safety referrals, where there is a significant heightened risk of an individual having a fire in their property, completed within 48 hours	When RBFRS are made aware of a home or an individual who is at significantly high risk of having a fire, a home safety visit is conducted within 48-hours.
Protection		
10	Total Number of Full Fire Safety Audits carried out	This is the total number of full fire safety audits carried out in premises in Berkshire. This is calculated once the service has been closed by RBFRS and only includes the initial full fire safety audit. A Fire Safety Audit is carried out to enforce the Regulatory Reform Order (RRO) 2005, which applies to virtually all non-domestic premises and covers nearly every type of building, structure and open space.
11	% of audits where the results were satisfactory	This is the number of closed fire safety audits carried out in commercial premises, where the result was satisfactory and no further action or follow-up was required.
12	% of audits requiring informal activity	This is the number of closed fire safety audits carried out which resulted in informal activity. This includes a Deficiency Notice, with or without follow-up or informal education
13	% of audits requiring formal activity	This is the number of closed fire safety audits carried out which result in formal activity. This includes action plans, voluntary restrictions or premises requiring an Enforcement Notice, Prohibition Notice, Alterations Notice, or Prosecution Notice.
14	Success rate when cases go to court	This is the ratio of successful prosecutions following fire safety audits.

ID	Measure	Definition
Response		
15	% of occasions where the first fire engine arrives at an emergency incident within 10 minutes from time the emergency call was answered	This measure looks at the time taken from when the Fire Control Room Operator answers the phone until the time the first fire engine (appliance) arrives at the scene of the emergency incident, and on how many occasions RBFRS does this in under 10 minutes.
16	% of full shifts where there is adequate crewing on all wholtime frontline pumping appliances	This is the percentage of shifts (day or night) where there is sufficient minimum qualified fire fighters (4 personnel) on all wholtime pumping appliances (fire engines). A wholtime frontline pumping appliance is available 24/7, 365 days a year.
17	% of hours where there is adequate crewing on all retained frontline pumping appliances (based on 24/7 crewing)	This is the percentage of hours where there is sufficient minimum qualified fire fighters (4 personnel) on retained pumping appliances (fire engines). Retained frontline pumping appliances are crewed mainly by on-call fire fighters who are based at stations in more rural locations, and are ready to leave their place of work or home and attend emergencies from the local retained station, when they receive the call.
Customer Feedback		
18	% of domestic respondents satisfied with the overall service	Results are from a customer feedback questionnaire which is sent to those who have experienced a dwelling fire asking about their satisfaction and experience with the service they received from RBFRS.
19	% of commercial respondents satisfied with the overall service	Results are from a customer feedback questionnaire which is sent to business owners/ managers who have experienced a fire in their commercial premises asking about their satisfaction and experience with the service they received from RBFRS.
20	% of respondents satisfied with the services with regards to Fire Safety Audits	Results are from a customer feedback questionnaire which is sent to business owners/ managers who have had a full fire safety audit, asking about their satisfaction and experience with the service they received from RBFRS.



Appendix F: Corporate Health Measure Definitions

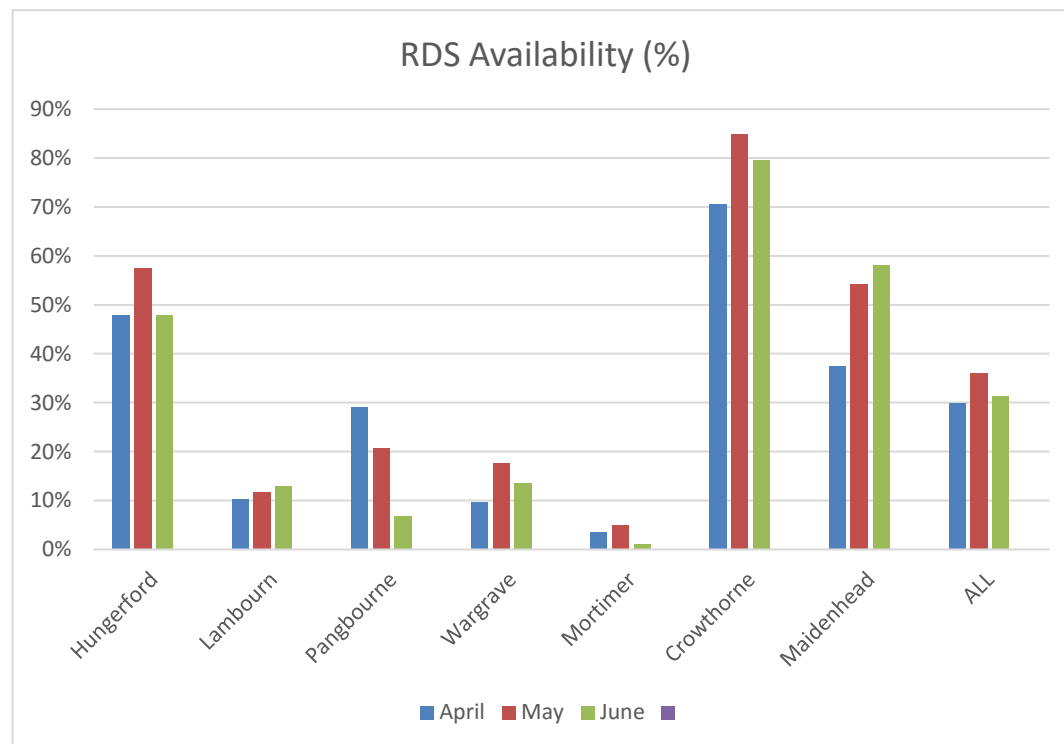
ID	Measure	Definition
Human Resources and Learning & Development		
21	% of working time lost to sickness across all staff groups	This measure looks at sickness across the whole organisation and the percentage of time lost based on the number of working hours available to the organisation.
22	% of Eligible operational staff successfully completing fitness test	The measure reflects the percentage of eligible operational personnel who have successfully completed their fitness test. Individuals who are not eligible include those on long-term sick or light duties.
23	% of eligible staff with Personal Development Appraisals	This measure reflects the percentage of eligible employees who have had a Personal Development Appraisal. Eligible staff are those who have completed their initial probation period before the end of the PDA period and who have not been absent for over 50% of the reporting period. Employees moving within the organisation to new roles on trial or probation periods will still be eligible for a PDA.
24	% of eligible operational staff in qualification	This measure examines performance in the key qualifications, outlined in the 9 core areas of the Fire Professional Framework, required by staff to maintain effective service delivery .
Health and Safety		
25	All injury accidents including RIDDOR (RIDDOR & Total)	RIDDOR(<i>Reporting of Injuries Diseases and Dangerous Occurrences Regulations</i>) are more serious injury accidents and the total number of accidents.
Finance and Procurement		
26	% of spend subject to competition	This measure is looking at all items of expenditure over £10k as RBFA must obtain quotes or tenders for all these purchases. This excludes statutory payments such as local authority charges or HMRC.

27	Compliant spend as a % of overall spend	This measure calculates the supplier spend that is in a compliant contract as a % of the total spend to external bodies and suppliers. (as per RBFA contract regulations)
Freedom of Information		
28	Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act and Environmental Information Regulations).	Number of decision notices issued by the ICO that uphold any part of a complaint that we have breached the relevant legislation.
29	Number of Information Commissioner assessments finding that the Service has breached Data Protection Legislation (Data Protection Act and forthcoming legislation)	Number of occasions where the Information Commissioner has informed RBFRS that we have breached the legislation.

Appendix G: RDS Establishment and Availability

The planned establishment for each RDS station against the actual number of RDS employees.

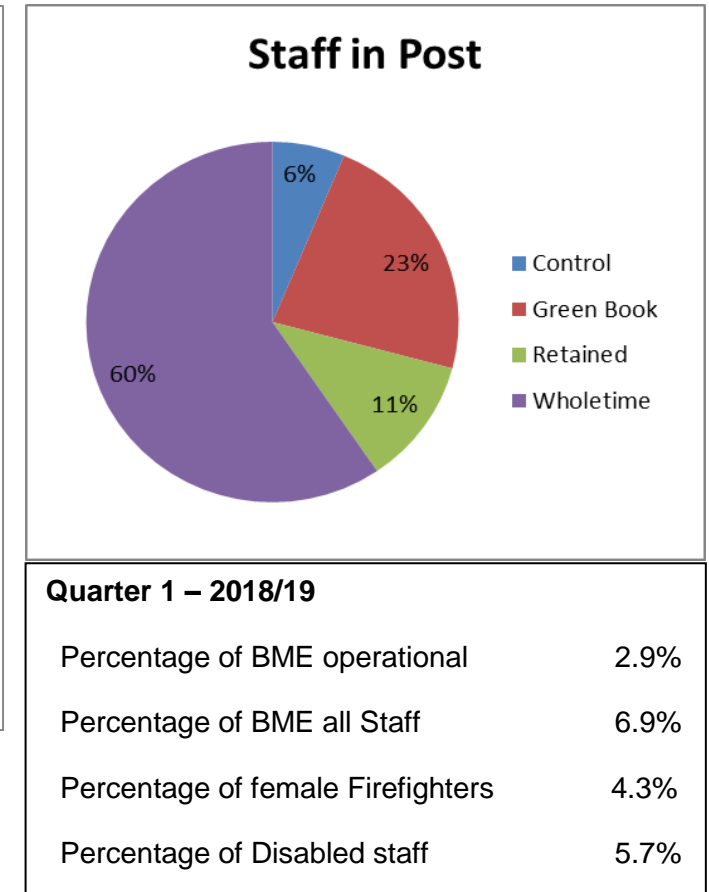
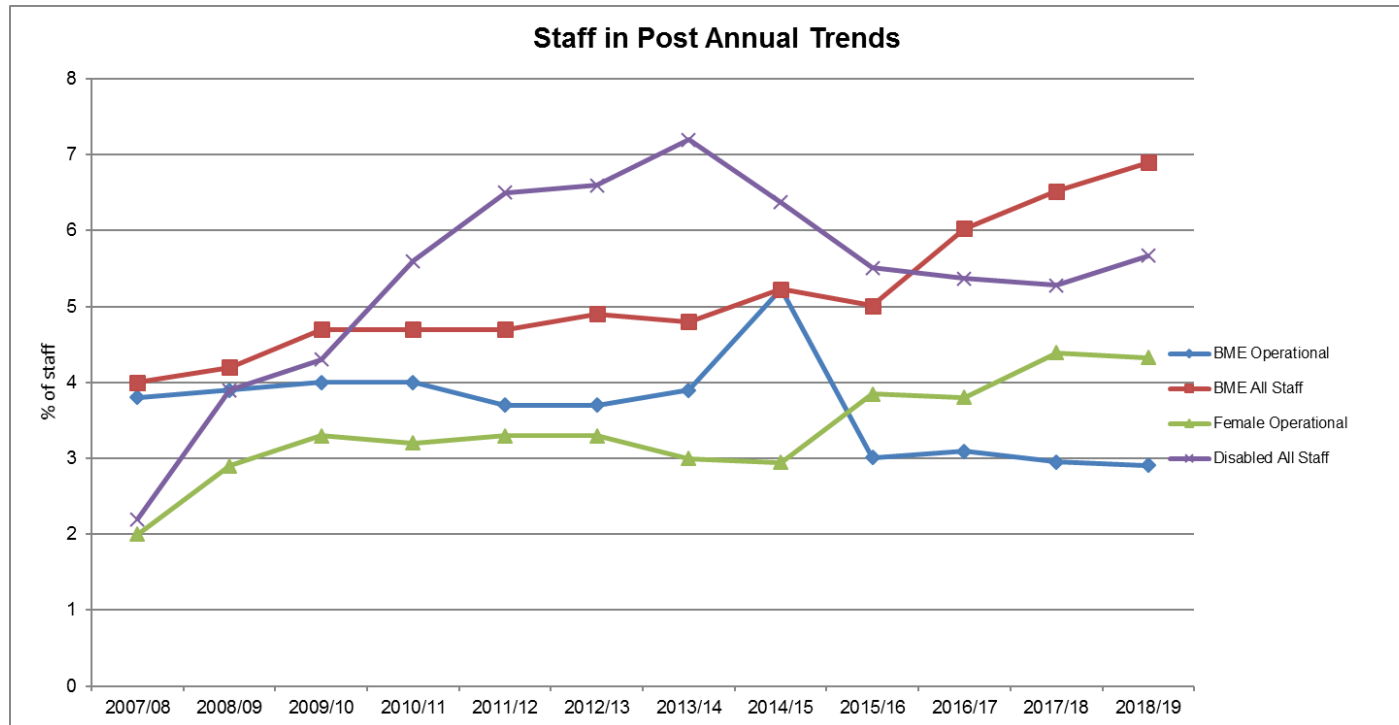
	Staff in Post	FTE	Establishment	SIP v Est	FTE v Est
05 Hungerford	11	4.70	13	84.62%	36.13%
06 Lambourn	8	3.16	13	61.54%	24.32%
07 Pangbourne	8	4.51	13	61.54%	34.70%
09 Wargrave	14	7.30	13	107.69%	56.15%
11 Mortimer	6	3.49	13	46.15%	26.84%
15 Crowthorne	12	6.42	13	92.31%	49.38%
19 Maidenhead	15	6.04	13	115.38%	46.43%
Total	74	35.61	91	81.32%	39.14%



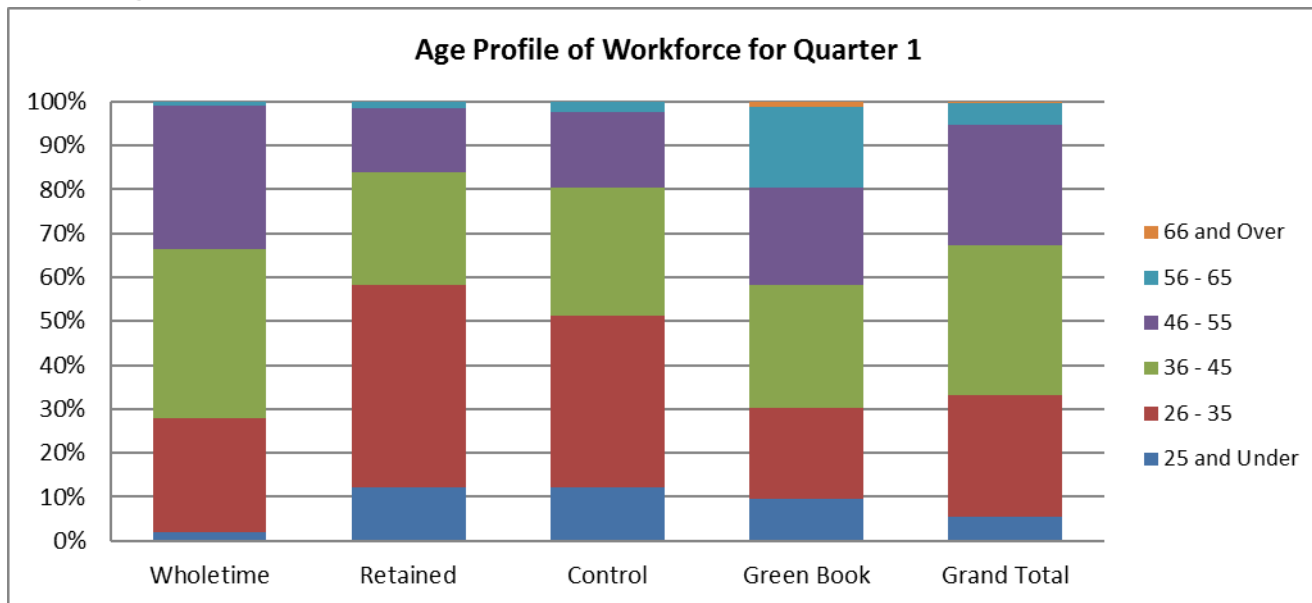
Appendix H: HR Supporting Charts

(Source: Data calculated and supplied by HR)

Staff in Post



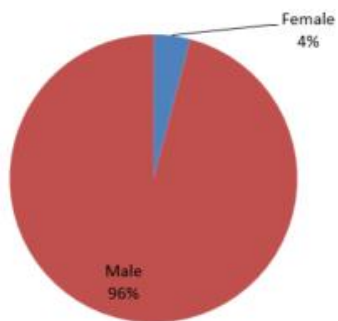
Staff Age Profile



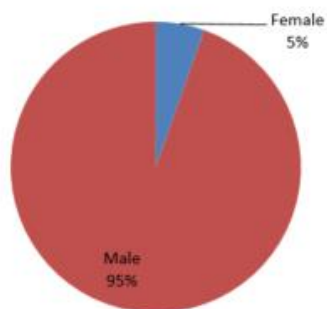
Age Group	Wholetime	Retained	Control	Green Book	Grand Total
25 and Under	7	9	5	14	35
26 - 35	101	34	16	31	182
36 - 45	150	19	12	42	223
46 - 55	128	11	7	33	179
56 - 65	3	1	1	27	32
66 and Over	0	0	0	2	2
Grand Total	389	74	41	149	653

Gender of Staff

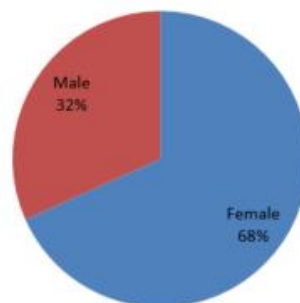
Gender Profile - Wholetime



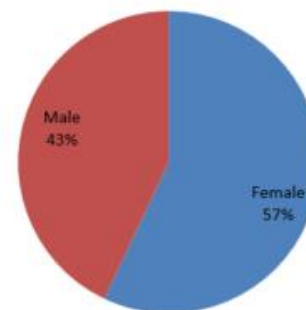
Gender Profile - Retained



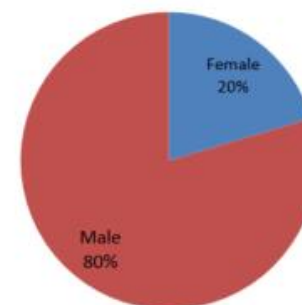
Gender Profile - Control



Gender Profile - Green Book

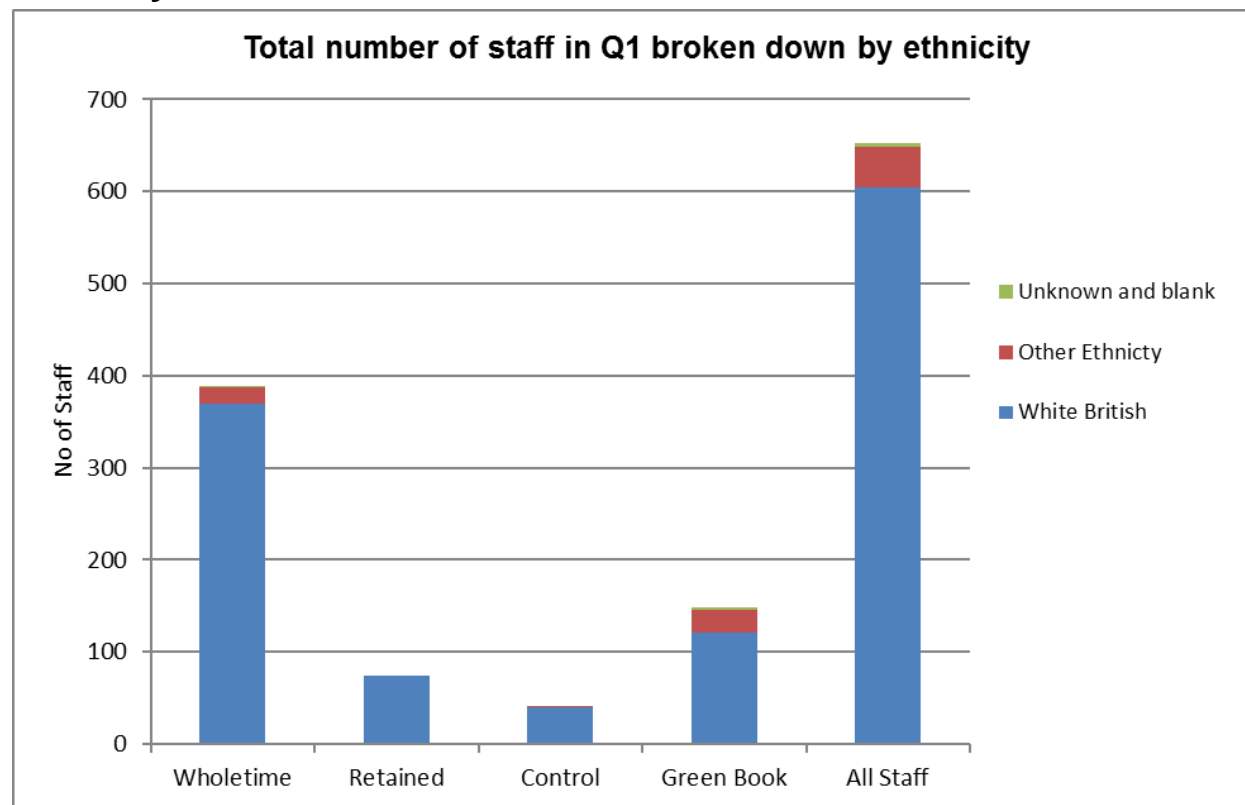


Gender Profile - All Staff



Gender	Wholetime	Retained	Control	Green Book	All Staff
Female	16	4	28	85	133
Male	373	70	13	64	520
Total	389	74	41	149	653

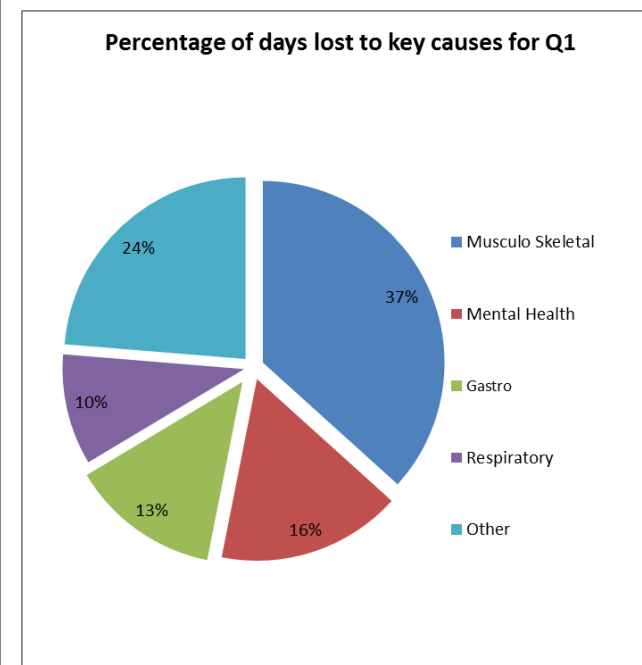
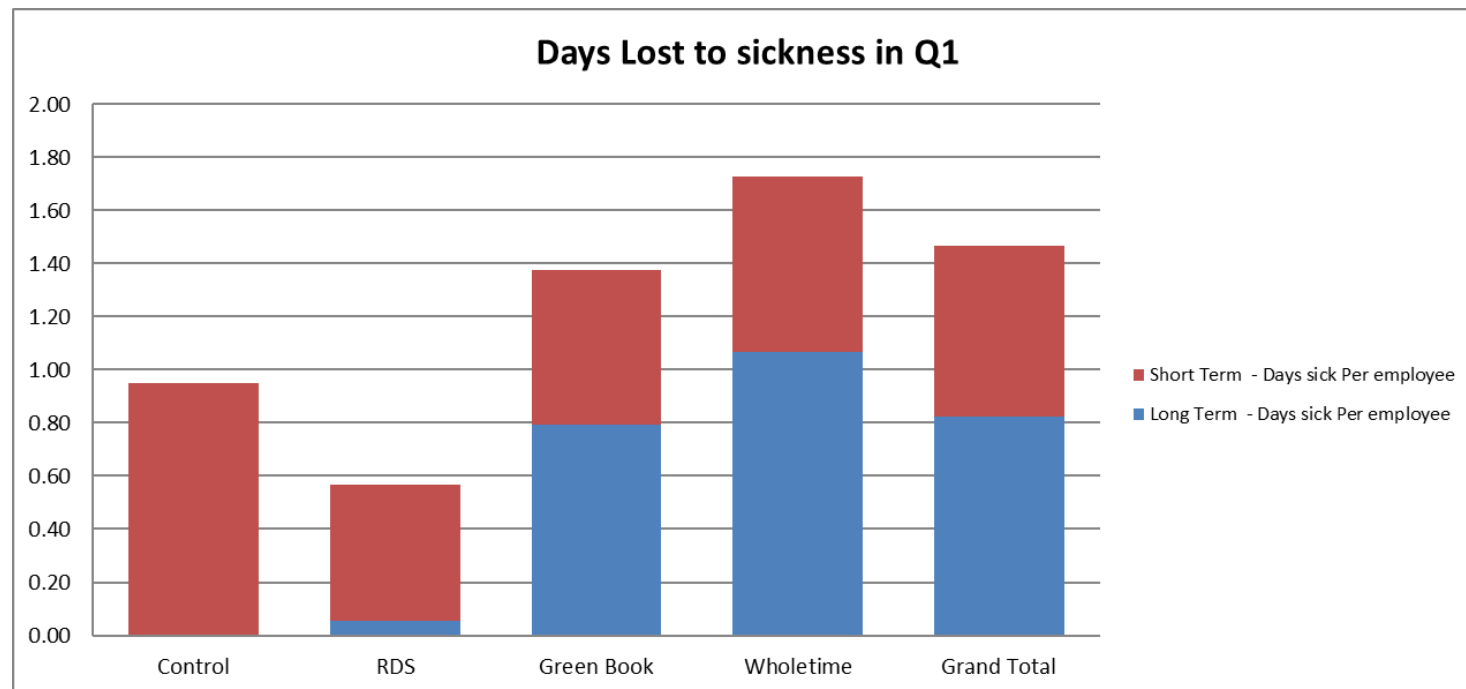
Ethnicity of Staff



Ethnicity	Number of Staff
Asian or British Asian: Indian	4
Asian or British Asian: Other	3
Black or Black British African	6
Black or Black British Caribbean	4
Black or Black British other	1
Chinese	2
Mixed White and Asian	3
Mixed White and Black Caribbean	2
Other	1
Other Mixed	3
Unknown	4
White British	604
White Irish	4
White Other	11
Asian or British Asian: Pakistani	1
Grand Total	653

Ethnicity	Wholetime	Retained	Control	Green Book	All Staff
White British	369	74	40	121	604
Other Ethnicity	19	0	1	25	45
Unknown and blank	1	0	0	3	4
Total	389	74	41	149	653

Days Lost to Sickness



Q1 18/19

Cause	Days Lost	Occurrences
Musculo Skeletal	353	47
Mental Health	158	11
Gastro	128	41
Respiratory	95	19
Other	228	47

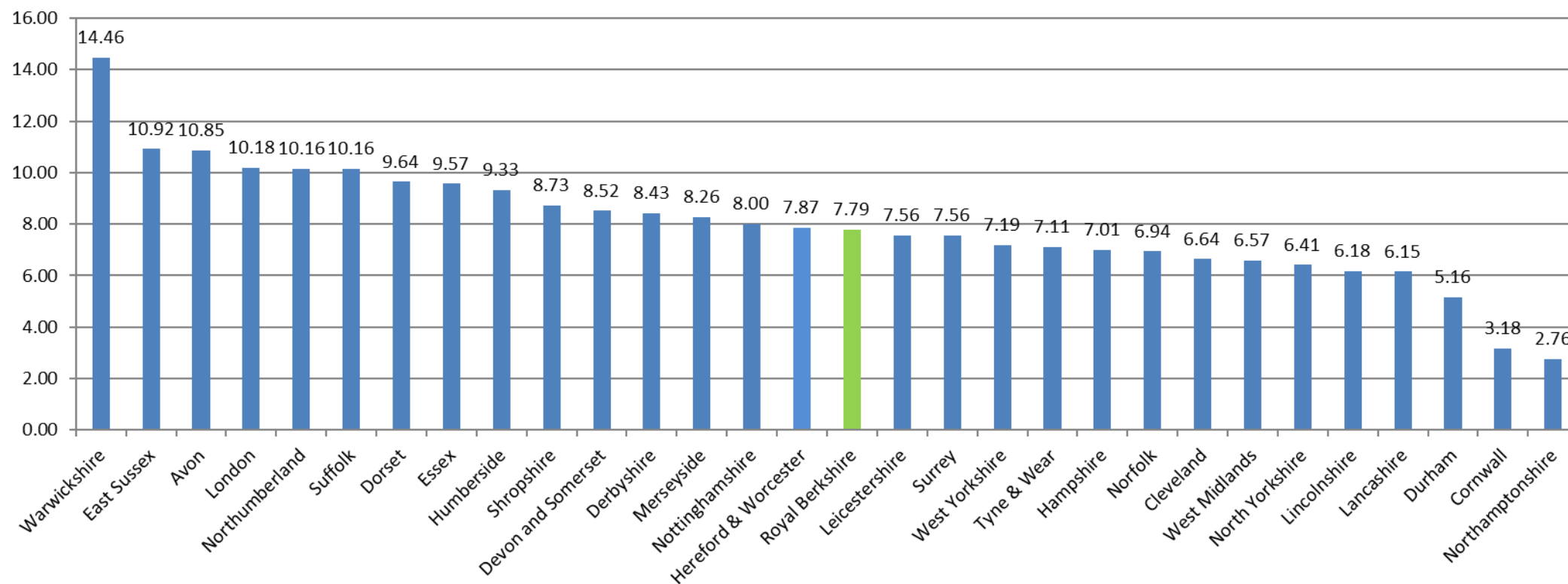
Q4 17/18 (For comparison with Q1)

Cause	Days Lost	Occurrences
Musculo Skeletal	467	46
Respiratory	256	59
Mental Health	143	8
Gastro	122	42
Other	338	57

This graph (provided by Cleveland FRS) compares the percentage of working days lost to sickness for all staff in each Fire and Rescue Service. The days lost are shown as a per person figure for the period **1 January 2018 to 31 March 2018**

** NOTE the data is submitted quarterly on a cumulative YTD basis, therefore these figures cannot be reported as a quarter in line with the rest of this report.*

Total days lost to sickness across other FRS - January to March 2018



If you require any further information relating to this report,
please contact the Performance Team at

performance@rbfrs.co.uk