

QUARTERLY PERFORMANCE REPORT

Q2 2021 - 2022

July to September





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Contact Us

Accessibility

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In an emergency

In an emergency, dial 999 and ask for the fire service.

If you are inside a building when a fire starts, remember to get out, stay out and call 999. Never try and put out a fire unless you have received sufficient training.

Contacting us when it's not an emergency



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RG31 7SD



Introduction

This is the Quarter Two Performance Report, summarising our progress across the Service.

In our Annual Plan for 2021/22, we set 10 Annual Objectives for the year, which can be found at Appendix B. The Objectives are delivered through our Service Plans and Local Safety Plans and our projects and programmes. Ongoing analysis of performance data and information supports decision-making across the organisation. We monitor performance across four Quadrants:

Service Provision: Monitoring the delivery of our statutory obligations and the services provided by RBFRS.

Corporate Health: Monitoring how key resources are managed and includes measures relating to staff, finance and health and safety.

Priority Programmes: Progress against our key programme activity (our Community Risk Management Plan (CRMP), People Strategy, Strategic Asset Investment Framework and Built Environment Programme).

Risk: Monitoring corporate risk management and other assurance activity including internal audit and our HMICFRS Action Plan.

The Strategic Performance Board monitors performance quarterly, before key data and analysis is provided in this report for the Audit and Governance Committee to scrutinise.



Key

Performance Measures

	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

Priority Programme Project Status

C	Project complete
G	Project on Track
A	There are issues with the project but these are being managed
R	Issues are having an impact on delivery
NS	Project not yet due to start

Classification of Risk Scores and Risk Movement

20 - 25	Outside assumed Risk Appetite and requires mitigation to proceed
19	Inside Risk Appetite only because of extremely low probability. Mitigate if necessary and possible, accept only if no further action can be justified
17 & 18	Inside Risk Appetite. Mitigate further if cost effective to do so - discuss with a Director
7-16	Inside Risk Appetite. Mitigate further if cost effective to do so
1-6	Inside Risk Appetite and unlikely to need further mitigation
↑	Risk increasing
↔	No risk movement
↓	Risk decreasing



Q2 Summary



COVID-19 Pandemic

Since the start of the COVID-19 pandemic we have focussed on protecting core service delivery, the wellbeing of our staff, and support for our partners. Our Annual Plan 2021/22 recognises the continued challenges we face and in some of our key areas of service, we adapted our delivery targets to reflect the expected impact COVID-19 restrictions would have on our level of delivery.

Incident Trends

The table below illustrates the number of incidents we responded to in Quarter 2 2021/22 in comparison with previous years.



Total Number Incidents				
	Q1	Q2	Q3	Q4
2019/20	1821	2101	1816	1592
2020/21	1732	1880	1571	1459
2021/22 Actual	1728	1972		

The number of incidents in 2020/21 fell due to the COVID-19 pandemic, whilst 2019/20 was mostly unaffected by the pandemic and is included in the tables in this report to aid comparisons.

The number of secondary fires this quarter was half the number in the same time period last year. Secondary fire numbers are highly dependent on the weather, and a wetter summer across the South East of England this year is a key factor in this decrease. Early data from our neighbouring services suggests they have also seen this impact and we will carry out further comparisons as data becomes available. This decrease is also reflected in the numbers of deliberate secondary fires we have seen this quarter.

The return to pre-COVID-19 economic activity in our communities has been reflected in incident volumes, with a rise in both primary fires in commercial premises and automatic fire alarms (AFAs) associated with the return to on-site working.

We have also seen a return to pre-COVID-19 levels for Road Traffic Collision incidents.



Quadrant One – Service Provision

This Quadrant scrutinises the service we provide to the public. Performance is monitored across Prevention, Protection and Response, using a set of performance measures, which can be found at Appendix C.

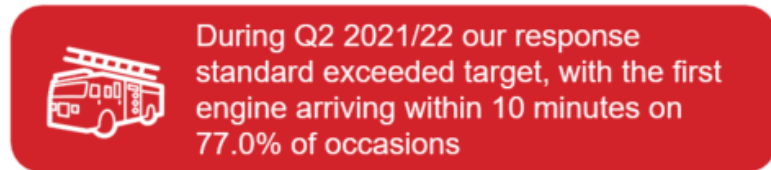
Throughout Q2 it has been clear to see the increasing level of communication and cooperation between prevention, protection and response staff with the associated increase in service provided to the public. There has been a notable reduction in the number of deliberate secondary fires when compared against target and previous performance. This reflects the fall in overall secondary fires explained in the Incident Trends on page 7. However, the reduction in deliberate secondary fires is particularly large and coincides with significant prevention activity and partnership working targeting this measure. Safe and Well visit numbers during this period are lower than hoped. This is partly due to the increased complexity experienced due to the length of time that some referrals have been on the waiting list. It is good to see that the Safe & Well waiting list numbers have now returned to pre-Covid levels.

Whilst Protection staffing shortages have impacted on Q2 audit completion rates, it is good to see a number of staff in development roles achieving competence to audit simple premises with an expected uplift in audit numbers in Q3. It is also encouraging that the number of audits completed in the first half of the year remains on target.

Despite some challenges in relation to Whole-time appliance availability, we continue to see a high percentage of emergency incidents attended within our response standard of ten minutes. This Quarter we have attended 77% of incidents within ten minutes which continues to exceed our target of 75%. This is an improvement from the last Quarter and also when compared to this time last year.

The percentage of full shifts where there was adequate crewing on all Whole-time frontline pumping appliances through Q2 was 86.4%. In addition to planned and “normal” absences and extractions, sickness absence relating to Covid-19 has added additional pressures which have on a number of occasions resulted in appliance unavailability.

On call appliance availability has seen a significant drop in performance throughout Q2. Availability is discussed in more detail on Page 10.



Joint working in response to a deliberate fire at a Hostel

RBFRS were called to a fire at a hostel that provides services and support for people who are homeless in Newbury and West Berkshire. The response to this incident with two appliances from Newbury Fire Station was within 5 minutes, which is well within the Corporate Measure target time of 10 minutes. The crews extinguished the fire and ensured all residents were safe and well.

Due to the nature of occupancy, this Hostel can be considered both high risk and high vulnerability. As such, it was recognised that there were necessary actions and interactions with partners to mitigate future risk and ensure continued safety of residents.

A tier one fire investigation identified this to be a deliberate fire set by a resident at the property. This information was shared with partners in Thames Valley Police to consider further action. In addition, RBFRS staff completed a safeguarding referral in relation to the individual involved as crews were concerned for their welfare. Additionally, our prevention team offered staff at the Hostel an Adults at Risk Programme (ARP) session.

Any fire in a premise such as this requires a post fire protection audit. Whilst reassuringly the audit did not identify any fire safety matters of concern, our Fire Safety Inspecting Officer provided advice and guidance to staff in support of risk reduction planning.

Repeat Automatic Fire Alarms (AFAs) from a premises

During this period, RBFRS were called to false alarms from an Automatic Fire Alarm at the same premises in Finchampstead on 6 occasions. Repeated attendance at AFAs mean our crews are not available to attend other emergency calls. Also, given the extensive travel distance to this particular premise, these calls were having an impact on our Response Standard performance.

Having identified the trend at a local level, Station personnel along with Protection staff, worked with, and applied proportionate pressure on the premise's responsible person to identify and remedy the fault with their alarm system. As a result, RBFRS have not been called back to the same premise since. RBFRS Protection team have



followed this up with an audit of the premise to ensure the premise's fire safety arrangements are compliant.

Appliance Availability Challenges

Whole-time appliance availability for Q2 averaged 84.6% across the Service, which is a decrease on the 98.9% performance level achieved in Q1. There were 25 shifts where full crewing was not achieved in line with the Corporate Measure. On 3 of these occasions there were two appliances unavailable.

There were several contributing factors relating to the unusual decrease in availability, which included:

- COVID-19 requiring many staff to 'self-isolate' and/or 'shield'. At its height, there were 17 Whole-time staff absent from the workplace due to these factors.
- A higher than usual level of staff on long-term sickness and restricted duties. This was caused by staff not being to access health care support as quickly as normal, due to pressures across the NHS.

Service Delivery established a cross-departmental 'Crewing Task Team' to closely monitor and manage impacts. This team met daily at the peak of the impacts and made a number of interventions to maintain appropriate response standards balanced across immediate and longer-term impacts for the organisation. These included:

- Realigned operationally competent staff performing other duties (such as projects) to targeted operational shifts. Staff on restricted duties were used to backfill this impact where possible.
- Recommended the immediate increase of competent 'transferees' from other FRS', resulting in an additional six contracts being offered. Due to employment processes and training requirements these staff will not improve availability until Q3.
- Improved the communication and processes around availability of overtime for staff, including On-Call personnel. This led to the acceleration of resource management functionality software, which is due for rollout in Q3/4.
- 11 On-Call duty staff were offered six month temporary Whole-time contracts, to fill personnel gaps. This made a significant and immediate improvement to availability. An assessment was made to understand the most likely impact to On-Call availability and how this could be minimised. This was balanced with maintaining the Service's overall response standard of attending 75% of emergencies within 10 minutes.

RBFRS are incredibly grateful for the flexibility and commitment shown by staff during this period.

On-Call appliance availability through crewing for Q2 was also significantly impacted, averaging 34.7% across the Service against the target of 60%, which is a decrease from 59.8% in the previous quarter. This was due to similar reasons as those discussed above that have affected whole-time appliance availability. Whilst the 11



on-call staff on temporary WDS contracts have sought to maintain On-Call availability, this has placed an increased pressure on On-Call crewing as the shift pattern requirements of WDS has changed the profile of availability of those staff.

Hub-based management teams continue to provide support to all On-Call station-based teams to promote and increase the availability of On-Call fire appliances across the Service.

The On-Call Station Manager (West Hub) has undertaken a detailed review of On-Call availability across the Service. As a result, recruitment activity has resumed and the service has 11 On-Call applications in progress.



QUADRANT ONE – SERVICE PROVISION					DATA SUMMARY
Overall Measures					
1. Number of Fire Deaths in Accidental Dwelling Fires					2021/22 Target: 0
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	1	0	1	1	1
Previous Year (20/21)	0	0	0	0	0
Target	0	0	0	0	0
2021/22 Actual	1	0			1↓
2. Number of non-fatal fire casualties in accidental dwelling fires					2021/22 Target: 20 max
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	2	3	8	2	5
Previous Year (20/21)	2	10	5	7	12
Target	5	5	5	5	10
2021/22 Actual	10	11			21↓
3. Number of deliberate Primary Fires					2021/22 Target: Reduce
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	50	44	36	35	94
Previous Year (20/21)	36	28	40	26	64
Target (Max)	35	27	39	25	63
2021/22 Actual	30	26			56↑
4. Number of deliberate Secondary Fires					2021/22 Target: Reduce
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	84	110	40	35	194
Previous Year (20/21)	85	101	41	38	186
Target (max)	84	100	40	38	185
2021/22 Actual	76	35			111↑
Prevention Measures					
5. Number of Safe & Well visits delivered to those with individual characteristics making them at higher risk of death in the event of an accidental dwelling fire					2021/22 Target: 5,700 (COVID-19 impacted measure)
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	2288	1800	2070	1352	4088
Previous Year (20/21)	302	542	581	490	804
Target	450	1750	1750	1750	2200
2021/22 Actual	1154	1497			2651↑



6. Number of Safe & Well visits delivered to those who live in households with demographic characteristics associated with higher risk of injury in accidental dwelling fires					2021/22 Target: 1880 (COVID-19 impacted measure)
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	416	702	685	704	1118
Previous Year (20/21)	14	18	0	2	32
Target	5	625	625	625	630
2021/22 Actual	20	107			127↑
7. Percentage of Safe and Well referrals, where there has been a threat or incidence of arson, completed within 48 hours					2021/22 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	75.0%	100.0%	94.7%	75.0%	87.9%
Previous Year (20/21)	100%	100%	97.2%	100%	100%
Target	100%	100%	100%	100%	100%
2021/22 Actual	93.8%	100%			97.9%↓
Protection Measures					
8. Total number of Full Fire Safety Audits carried out in premises in Berkshire					2021/22 Target: 1100
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	470	319	321	283	789
Previous Year (20/21)	32	158	141	66	190
Target	50	350	350	350	400
2021/22 Actual	240	233			473↑
9. Percentage of Full Fire Safety Audits with a 'Broadly Compliant' result					2021/22 Target: 60% max
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	67.9%	61.8%	55.8%	64.3%	65.4%
Previous Year (20/21)	40.6%	55.7%	39.7%	62.1%	53.2%
Target (max)	60%	60%	60%	60%	60%
2021/22 Actual	55.4%	57.5%			56.4%↓
10. Percentage success when cases go to court					2021/22 Target: 80%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	0 cases	0 cases	100% (2 cases)	0 cases	0 cases
Previous Year (20/21)	0 cases	0 cases	100% (1 case)	0 cases	0 cases
Target	80%	80%	80%	80%	80%
2021/22 Actual	0 cases	100% (1 case)			100% (1 case)



11. Percentage of Statutory fire consultations completed within the required timeframes					2021/22 Target: 95%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	92%	95%	90%	85.5%	93.1%
Previous Year (20/21)	95.6%	97.1%	95.5%	98.7%	96.4%
Target	95%	95%	95%	95%	95%
2021/22 Actual	94.1%	98.6%			96.3%↓

12. The number of Automatic Fire Alarm calls received					2021/22 Target: Monitor
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	707	801	821	623	1508
Previous Year (20/21)	497	698	733	567	1195
Target	-	-	-	-	-
2021/22 Actual	622	859			1481↑

13. Percentage of Automatic Fire Alarm calls where RBFRS did not attend					2021/22 Target: Improve
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	25.5%	25.3%	25.7%	26.3%	25.4%
Previous Year (20/21)	15.3%	21.3%	25.9%	18.5%	18.8%
Target	-	-	-	-	-
2021/22 Actual	24.0%	21.9%			22.8%↑

Response Measures

14. Percentage of occasions where the first fire engine arrives at an emergency incident within 10 minutes from time the emergency call was answered					2021/22 Target: 75%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	76.7%	74.0%	76.6%	78.6%	75.3%
Previous Year (20/21)	78.4%	76.6%	78.0%	80.1%	77.5%
Target	75%	75%	75%	75%	75%
2021/22 Actual	76.1%	77.0%			76.6%↓

15. Percentage of full shifts where there is adequate crewing on all wholetime frontline pumping appliances					2021/22 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	100%	100%	98.4%	100%	100%
Previous Year (20/21)	100%	98.9%	89.7%	98.9%	99.5%
Target	100%	100%	100%	100%	100%
2021/22 Actual	98.9%	86.4%			91.8%↓



16. Percentage of hours where there is adequate crewing on on-call frontline pumping appliances					2021/22 Target: 60%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	35.9%	28.2%	32.7%	34.7%	32.0%
Previous Year (20/21)**	72.4%	60.9%	61.1%	68.2%	66.6%
Target	60%	60%	60%	60%	60%
2021/22 Actual**	59.8%	34.7 %			47.2%↓
**excluding Pangbourne					
Customer Experience Measures					
17. Percentage of domestic respondents satisfied with the overall service (fire incident)					2021/22 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	NA	NA	NA	NA	NA
Previous Year (20/21)	NA	NA	NA	NA	NA
Target	100%	100%	100%	100%	100%
2021/22 Actual	100%	100%			100%
18. Percentage of commercial respondents satisfied with the overall service (fire incident)					2021/22 Target: 95%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	NA	NA	NA	NA	NA
Previous Year (20/21)	NA	NA	NA	NA	NA
Target	95%	95%	95%	95%	95%
2021/22 Actual	100%	No Returns			100%
19. Percentage of respondents satisfied with the service with regards to Fire Safety Audits					2021/22 Target: 90%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	NA	NA	NA	NA	NA
Previous Year (20/21)	NA	NA	NA	NA	NA
Target	90%	90%	90%	90%	90%
2021/22 Actual	95.8%	100%			97.6%
20. Percentage of domestic respondents satisfied with the service – Safe and Well Visits					2021/22 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	NA	NA	NA	NA	NA
Previous Year (20/21)	NA	NA	NA	NA	NA
Target	100%	100%	100%	100%	100%
2021/22 Actual	98.2%	100%			98.9%
21. Number of complaints received					2021/22 Target: Monitor
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	7	11	14	5	18
Previous Year (20/21)	5	3	9	5	8
Target	-	-	-	-	-
2021/22 Actual	7	8			15↓



22. Number of compliments received					
					2021/22 Target: Monitor
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	NA	NA	NA	NA	NA
Previous Year (20/21)	2	4	2	2	6
Target	-	-	-	-	-
2021/22 Actual	3	3			6↔



Quadrant Two – Corporate Health

The Corporate Health Quadrant monitors the wellbeing of the organisation. Performance is monitored in relation to staffing levels, health and safety and finances within RBFRS, to ensure the organisation is being run safely, efficiently and is cost effective.

Performance and Development Reviews (PDRs)

The PDR process is important for enhancing an engaged, competent and effective workforce and enables RBFRS to deliver its services successfully. Having a PDR process demonstrates the Services commitment to developing an environment that promotes continuous improvement and innovation and improves the effectiveness of our organisation by contributing to achieving an engaged and high performing workforce.

It also has close links with our Behavioural Competency Framework which provides a method of individual performance monitoring for all employees, allowing them to identify through the PDR process the behaviours that have helped them drive successful performance and deliver an effective service.

There are two key challenges with regard to the PDR process at RBFRS:

1. A need to improve understanding regarding setting SMART and behavioural objectives for station based staff. This issue was identified early on in the 2021 PDR process.
2. An ongoing challenge with ensuring meetings are recorded in a timely fashion on FireWatch.

In addition, RBFRS underwent a PDR audit in Spring 2021 which made recommendations regarding the setting of objectives and the inclusion of two deadlines as part of the PDR process – one for completing the meetings and one for returning the endorsed paperwork.

Interim guidance was issued on setting behavioural and SMART objectives, including relevant examples for station based staff. This was then incorporated into the revised PDR policy.

HR undertakes a monthly PDR completion audit and chases individual managers where PDRs have not been completed. This is escalated to Head of Service where appropriate.

A revised policy was issued in October 2021 which included further information and examples on setting SMART and behavioural objectives and two deadline dates for completion – one for completing the PDR interviews (30 June) and one for returning the endorsed paperwork to HR (31 July). This will ensure that staff are receiving the completed and endorsed paperwork in a timely fashion, which will enable them to understand and continue to work on their objectives.

In line with the policy revision, the training for managers will be revised, with more emphasis on setting objectives and revised section on the Behavioural Competency Framework.



Sickness Management

Monitoring and managing sickness is a key priority for the service and linked to our strategic objectives of - ensuring a swift and appropriate response when called to emergencies; seeking opportunities to contribute to a wider safety, health and wellbeing agenda, whilst delivering our core functions and ensuring RBFRS provides good value for money. It also supports the Health, Safety and Wellbeing Core Competency within RBFRS' Behavioural Competency Framework.

Whilst our levels of sickness absence are comparable with other services, sickness and absence management is an ongoing challenge within the Service.

The COVID-19 pandemic provided a particular challenge in terms of short term and longer term absences. Due to the limits placed on social contact during the peak of the pandemic in 2020, overall levels of sickness reduced significantly, which followed the national trend. However this has risen again in line with pre-COVID-19 levels. In particular the Service has seen an increase in Musculoskeletal (MSK) sickness and Mental Health (MH) sickness, and these consistently continue to be the top causes of sickness absence within the Service.

Human Resources continue to monitor and undertake active management of staff absence. These activities include, among others not listed:

- Establishing quarterly Service Delivery Hub meetings with Hub Managers to review sickness within the Hubs. This will be further extended to Control management
- Establishing an internal Wellbeing Working Group and Sickness Working Group within HR to discuss the promotion of wellbeing and sickness initiatives throughout the service and gain feedback/input from the wider HR team as to any particular areas of concern or trends
- Flu vaccinations were offered to all staff in 2020 and 2021 to mitigate the risk and impact of flu – particularly in the context of the COVID-19 pandemic
- Developing manager guides to support managers with absent staff. These include Managing Long Term Sickness, Managing Short Term Sickness, Restricted Duties, Managing Employees with a Disability and Suicide Guidance.
- Reviewing the Restricted/Light Duties Policy and associated rehabilitation form to enable managers to develop a tailored rehabilitation plan for staff returning to work as a result of injury or illness
- Taking a preventative approach to address MSK issues before they lead to sickness absence
- Establishing a network of Blue Light Champions to drive a change in culture around Mental Health awareness and reducing stigma. Part of the rise in absence could be linked to staff feeling more comfortable to talk about & disclose MH issues. We said in the initial strategy that we'd expect an increase as the culture changed.



Finance

The 2021/22 Revenue Budget agreed by Members in February 2021 was set at £35.779m. Expenditure was anticipated to exceed income by £29,000, meaning that the Fire Authority was reliant on its reserves to balance the budget.

Whilst staffing salary budgets were set based on the central Government position of a public sector pay freeze, the NJC have subsequently agreed a grey book pay award of 1.5%, effective from 1 July 2021, which will cost an additional £240,000. A final offer of 1.75% has also been made for green book staff. If agreed, this will be effective from 1 April 2021 and will cost an estimated additional £132,000. Set against these pay pressures there are in-year savings as a result of reduced availability on on-call stations as well as some short-term vacancies. Finally, following a review of corporate priorities, the implementation of the Nucleus Crewing project has been delayed – with one-off in-year savings of £174,000.

Pressure on the Repairs and Maintenance line has continued in quarter 2, leading to projected expenditure being £94,000 over budget. Major costs include roof repairs at four stations, a water leak at the training centre and work on the extractor unit at the Firehouse.

On a more positive note, the Authority has been working in collaboration with a property specialist to appeal business rate charges applied to our properties. This has proven to be successful and confirmation has recently been received of the value of the back-dated refunds amounting to £319,000 for fifteen stations, which will be received in 2021/22. £243,000 relates to previous years. The process is ongoing in relation to one other station. Business rates for the new station in Theale are yet to be confirmed but a part-year estimate has been included in the outturn forecast.

As has been reported previously, the Authority is facing significant cost pressures in relation to supplies and services. To this point we have been fortunate to benefit from hedging by our energy supplier meaning that cost rises have been subdued. However, price rises will feed in during the second half of the financial year and will increase further next year.

The Equipment line includes additional costs related to Covid and BA equipment. More generally, we are seeing notifications of price rises coming through due to increased fuel and import costs.

The Communications line includes an increase in the BT contract due to improved capacity of network services which will increase resilience and bandwidth and enhance the management of security and firewalls.

As stated in the quarter 1 report, there is an additional cost pressure in relation to legal fees which are forecast to exceed the allocated budget by £70,000.



There are various pressures in relation to the Vehicle Running Costs line, including rising fuel and one-off fleet maintenance costs.

Cross border charges data have been agreed with Thames Valley partners for the first two quarters of the year and the estimated outturn position is that charges will be £41,000 lower (under Contracts Other) and income £34,000 higher than the budgeted targets.

The Grants line is showing an adverse variance as the Home Office miscalculated the Firelink grant due to fire and rescue services. In our case, the Home Office paid us £47,000 too much in 2020/21, which is being recovered in the current year.

At the point of budget setting, there was uncertainty about the final level of funding the Authority would receive via the Berkshire unitary authorities and section 31 grants. Final confirmation was received after the budget was set and the Authority will be receiving an additional £251,000.

In summary, the forecast year-end outturn shows a deficit of £67,000 to be funded from reserves, an increase of £38,000 from the budget setting position.



Royal Berkshire Fire Authority

APPENDIX
A

Budget Update - Revenue Position Quarter 2 2021/22

	Annual Budget £'000	Sep-21 Outturn £'000	Forecast to YE £'000	Fcast - Budget Variance £'000
EMPLOYEES				
STATIONS	16,820	8,473	16,863	43
NON-STATIONS	11,404	5,626	11,560	156
TRAINING	543	163	544	1
OTHER	258	149	269	11
	29,025	14,411	29,236	211
PREMISES				
REPAIRS & MAINTENANCE	712	267	806	94
RATES	920	469	654	(266)
CLEANING	236	57	241	5
UTILITIES	458	148	520	62
	2,326	941	2,221	(105)
SUPPLIES				
INSURANCE	385	224	385	0
EQUIPMENT	539	242	565	26
IS EQUIPMENT & LICENCES	692	558	708	16
CLOTHING/PPE	374	137	375	1
COMMUNICATIONS	776	280	803	27
OCCUPATIONAL HEALTH	198	122	198	0
PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTIONS	139	95	153	14
COMMUNITY FIRE SAFETY SUPPLIES	180	61	180	0
SUPPLIES OTHER	220	82	218	(2)
	3,503	1,801	3,585	82
CONTRACTS				
CONTRIBUTION TO TVFCS & COLLABORATION	911	458	922	11
LEGAL	50	18	120	70
CONTRACTS OTHER (incl Professional Services)	689	228	654	(35)
	1,650	704	1,696	46
TRANSPORT				
VEHICLE RUNNING COSTS	694	348	736	42
TRAVEL	217	81	213	(4)
	911	429	949	38
PENSIONS				
PENSIONS	406	180	410	4
	406	180	410	4
INCOME				
GRANTS	(2,257)	(2,240)	(2,210)	47
RENTAL INCOME	(173)	(93)	(173)	0
TVFCS RECHARGE INCOME	(324)	(162)	(324)	0
INCOME OTHER	(311)	(35)	(351)	(40)
	(3,065)	(2,530)	(3,058)	7



NET COST OF SERVICES	34,756	15,936	35,039	283
DEBT CHARGES INTEREST	374	163	380	6
INVESTMENT INTEREST	(10)	(5)	(10)	0
REVENUE FUNDING OF CAPITAL	600	0	600	0
CAPITAL CONTRIBUTIONS TO STAFFING COSTS	(163)	(69)	(163)	0
APPROPRIATION TO/(FROM) RESERVES	(359)	0	(359)	0
FINANCING COSTS	610	0	610	0
NET EXPENDITURE	35,808	16,025	36,097	289
GOV GRANTS/PRECEPTS	(35,779)	(21,573)	(36,030)	(251)
(SURPLUS)/DEFICIT BEFORE USE OF RESERVES	29	(5,548)	67	38



Equality, Diversity and Inclusion Objectives Progress Update

	End 20/21		Q1	Q2	Q3	Q4
Objective: Increasing the diversity of staff at all levels We will take actions to increase the diversity of job applicants to help us reflect the community by focusing particularly on under-represented groups.				A		
Objective: Leadership and corporate commitment This objective aligns with the NFCC Framework which centres on leadership, partnership and commitment. Leadership and corporate commitment means we will be strong and visible in our leadership and that all employees have confidence in our commitment to equality, diversity and inclusion.				G		
Objective: Improving our service delivery by knowing the communities we serve through a partnership and risk-based approach This objective will focus on promoting equality by knowing our diverse communities and understanding their needs, ensuring that our prevention, protection and response activities target the most vulnerable people with the greatest risk.				NS		
Objective: Promoting a culture of equality, diversity and inclusion We will continue to take action to ensure we have a culture where everyone feels valued and is treated with dignity and respect by creating an inclusive working environment that will enable us to maximise the potential of a diverse workforce.				G		



QUADRANT TWO – CORPORATE HEALTH

DATA SUMMARY

23. Percentage of working time lost to sickness across all staff groups

2021/22 Target: 4% max

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	4.3%	3.9%	5.3%	4.7%	4.3%
Previous Year (20/21)	2.8%	3.0%	3.4%	3.3%	2.9%
Target (21/22)	4%	4%	4%	4%	4%
2021/22 Actual	3.4%	5.5%			4.5%↓

24. Percentage of eligible operational staff successfully completing fitness test

2021/22 Target: 100%

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	96.6%	99.8%	96.0%	98.5%	96.6%
Previous Year (20/21)*	--	--	99.2%	99.2%	--
Target	100%	100%	100%	100%	100%
2021/22 Actual	99%	99%			99%

* timeframes for testing impacted by COVID-19

25. Percentage of eligible staff with Personal Development Appraisals

2021/22 Target: 100%

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	47.5%	81.9%	92.0%	92.0%	47.5%
Previous Year (20/21)	78.9%	95.3%	99.7%	99.7%	95.3%
Target	100%	100%	100%	100%	100%
2021/22 Actual	76%	93.8%			93.8%↓

26. Percentage of eligible operational staff in qualification

2021/22 Target: 100%

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	98.8%	99.3%	99.1%	99.2%	98.9%
Previous Year (20/21)	97.3%	96.9%	96.9%	96.4%	96.9%
Target	100%	100%	100%	100%	100%
2021/22 Actual	96.7%	95.9%			95.9%↓

27. Number of formal grievances

2021/22 Target: Monitor

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	3	0	8	1	3
Previous Year (20/21)	0	0	1	1	0
Target	--	--	--	--	--
2021/22 Actual	2	1			3↓

28. Number of RIDDOR accidents

2021/22 Target: 6 max

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	1	0	0	1	1
Previous Year (20/21)	0	1	1	0	1
Target (max)	1	1	1	1	2
2021/22 Actual	2	1			3↓

29. Percentage of spend subject to competition

2021/22 Target: 85%

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	95.4%	91.4%	95.1%	93.6%	95.4%
Previous Year (20/21)	91.7%	92.1%	95.2%	89.6%	91.9%
Target	85%	85%	85%	85%	85%
2021/22 Actual	94.7%	92.3%			93.2%↑



30. Compliant spend as a percentage of overall spend					2021/22 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	100%	100%	100%	100%	100%
Previous Year (20/21)	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%
2021/22 Actual	100%	100%			100%↔
31. Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation*					2021/22 Target: 0
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	0	0	1	0	0
Previous Year (20/21)	0	0	0	0	0
Target	0	0	0	0	0
2021/22 Actual	0	0			0
*Freedom of Information Act, Environmental Regulations or Data Protection Legislation					



Quadrant Three – Priority Programmes

Our Priority Programmes Quadrant brings together progress updates on our areas of work where we are delivering defined outcomes that are different to, or improve on, current working practices, policies and procedures.

Updates are provided on our CRMP, People Strategy, Strategic Asset Investment Framework, and the HRRB Project, assessing progress against the projects and objectives set in our 2021/22 Annual Plan.

Replacement of the Aerial Ladder Platform (ALP)

The Aerial Ladder Platform (ALP) previously used by RBFRS was a Cela/Magirus ALP, mounted on a Daimler Benz Econic chassis. This was the only ALP of its type in the UK, after the retirement of a similar design of vehicle from LFB. The vehicle was becoming increasingly unreliable with the availability of spare parts becoming more difficult to obtain causing the speed of repairs to be prolonged.

In-line with the intent set out in the Strategic Asset Investment Framework (SAIF), Fire Authority approved the replacement of the ALP in the 2018-19 financial year.

The replacement of this appliance was in collaboration with Oxfordshire Fire & Rescue Service who were also looking to replace their existing ALP. The collaborative nature of the project worked well with opportunities to learn and share best practice with the partners in the project. The tender evaluation was also more robust with multiple parties able to challenge the responses and each other to ensure that all areas were well understood and fairly marked.

By forming a user group made up from end users and ALP instructors from Whitely Wood fire station from the earliest stages it was possible to fully capture their needs and involve them in the decision making process.

End user engagement revealed that the previous ALP was limited at incidents by a lack of horizontal outreach. The vehicle specification was developed after the Grenfell Tower fire which enabled lessons to be drawn from that incident. A review of the current and planned building stock in Berkshire showed a trend towards taller buildings being built across the service area where height would be an advantage to the vehicle. It also revealed a trend for large area commercial buildings to be developed along the main transport corridors where outreach would be an advantage. The specification was developed to meet these requirements.

The vehicle build was tracked closely by the project delivery team with a robust acceptance testing program put in place. This uncovered several deficiencies with the quality of the build and provided ample opportunity for those deficiencies to be corrected before the vehicle ownership was transferred to RBFRS. This meant that they were corrected prior to final invoicing and no additional costs were incurred as well as reducing likelihood of the vehicle having to be removed from service for a prolonged period of time after becoming operationally available, due to a quality issue.

Despite the production delays caused by the pandemic, the vehicle became fully operational in August 2021. The user group were central to the final delivery of the



vehicle onto station and in delivering the training required to bring the vehicle into operation. The residents of Berkshire now have a 45m Bronto Skylift ALP on a Volvo chassis that provides improvements in height and reach capabilities from the previous 32m ALP.

Implementation of National Operational Guidance (NOG)

National Operational Guidance is the foundation for developing operational policies, procedures and training for firefighters to deal with incidents effectively and safely. It is 'industry good practice' for everybody in fire and rescue services to draw on. It is based on the latest technical expertise which is reviewed and updated through the National Operational Learning (NOL) platform.

In 2020, Royal Berkshire Fire & Rescue Service initiated a project to adopt, implement and embed NOG into the service to ensure its operational staff are working to this “industry best practice”. This has ensured the service has committed the right resources and developed focused plans to achieve this and the project is currently on track in delivering key elements of the work plan. This includes a structured approach to undertaking Strategic Gap Analyses against all the operational elements that make up NOG.

The Operational Policy & Guidance team have worked with colleagues from across the service, representative bodies and regional partners such as Kent Fire & Rescue Service. It is an integral part of the Thames Valley Operational Alignment project which is working to align the operational practice and equipment across the Thames Valley.

Our strategy for implementation of NOG has since been adopted by a number of services across UK Fire Services and has been noted as exemplary by the National Fire Chiefs Council Implementation Team.

Completion of Theale Community Fire Station

One of the high profile projects within Phase 1 of the Strategic Asset Investment Framework in terms of property was the successful delivery of a new tri-service community wholetime station at Theale. This station will strengthen the Service's reach into West Berkshire, as well as playing its part in supporting an efficient delivery of operational response to the whole county. Providing a new blue light hub will also support opportunities for closer working and property sharing with our colleagues within the police and ambulance services; further strengthening the emergency response to the local communities. In line with the Authority's vision, this station will also provide facilities that will support community use of public assets.

The Capital Projects team were able to build on the previous capital investment successes at Hungerford and Crowthorne. Utilising the lessons learned from these two projects, the team were able to fine tune the collaborative design aspects to further enhance working relationships between all site users. In terms of wider



Service requirements, the new station fully aligns with our People Strategy, by providing facilities that support a more diverse workforce and the entire station is fully accessible to any user. Ensuring that the station is fully utilised, there are areas for any member of staff to use as a touchdown or team space, further strengthening the ties between operational and non-operational members of staff. Another key area of focus was with regard to introducing suitable work flows around the station to avoid the potential for contamination transfer between operational and non-operational areas. This station now sets a strong best practice baseline for the Service, clearly separating key areas to ensure the best possible working conditions.

This project can be held up as a success story for Royal Berkshire Fire Authority, in that it was delivered on time through the second wave of the Covid-19 pandemic as well as through the outcome of the EU transition process. Both impacted the project in various ways, but the in-house and external consultant team were able to work closely with the main contractor to overcome each hurdle as it arrived. The project is nearing final completion and we are quietly optimistic that it will be also be delivered on budget. In terms of the golden triangle of project delivery – cost, time and quality, we fully anticipate delivering successfully on all three aspects.



CRMP

RBFA is required to publish a Community Risk Management Plan (CRMP – formerly known as an Integrated Risk Management Plan). In 2018, we consulted on and published an [IRMP for 2019-23](#), which reflects the priorities and requirements of the [Fire and Rescue National Framework for England](#).

The below shows progress against our CRMP (IRMP) commitments published in our 2021-22 Annual Plan.

Project 1: Risk Analyses						
	End 20/21		Q1	Q2	Q3	Q4
Continued development of our existing Risk Methodology and Risk Modelling capability to ensure we have an even better understanding of all foreseeable fire and rescue related risks.	Revised		BAU	BAU		
Continue to maintain a theoretical response model for the Thames Valley, in collaboration with our Thames Valley Fire and Rescue partners to ensure our Risk Methodology and Risk Modelling aligns to theirs.	A		A	A		
Continue to engage with and drive the National Fire Chiefs' Council (NFCC) work to develop national best practice in this area.	G		G	G		
Project 2: Prevention						
	End 20/21		Q1	Q2	Q3	Q4
Continue to work towards the delivery of our 'Risk to Individuals' and 'Risk to Household' Safe and Well Visits, working in collaboration with our Berkshire partners to identify the most vulnerable people in our society.	BAU		G	A		
Develop a programme of follow up Safe and Well Visits to the most vulnerable.	R		R	A		
Focus our activities in support of Children and Young People through our road and water safety education programmes, Fire Cadets and FireSafe.	A		A	G		
Carry out targeted road safety activity, including for motorcyclists.	A		A	G		
Further develop local safety initiatives, campaigns and events to target risk at a local level and evaluate their effectiveness.	A		G	G		
Ensure a high standard of service through the quality assurance of our Prevention activities	New		A	A		
Project 3: Protection						
	End 20/21		Q1	Q2	Q3	Q4
Develop our risk-based inspection programme to ensure that we are identifying and targeting our resources at the areas of highest risk, in line with our Protection Strategy.	A		G	G		



Through our built environment programme, implement the learning from the phase one Grenfell Tower inquiry.	G (revised)		G	G		
Visit all high rise residential buildings 18m and above within Berkshire, supporting the safety of residents through the appropriate use of our regulatory powers and professional influence	revised		G	G		
Ensure a high standard of service through the quality assurance of our Protection activities	New		R	R		
Project 4: Response Resource Deployment						
	End 20/21		Q1	Q2	Q3	Q4
Continue to evaluate future developments in housing and infrastructure to ensure that our resource deployments match predicted future demands.	A		A	A		
Undertake a review of our specialist water rescue capability to ensure it continues to be aligned to local risk and reflects national best practice.	R		A	R		
Commence a project to consider the feasibility of introducing dynamic risk-based daytime nucleus crewing in the West of the County to improve emergency incident response times.	R		A	R		
Conduct a review of our Incident Command provision to ensure alignment to National Operational Guidance and best practice.	New		A	A		
Project 5: Response Safe Systems of Work Development						
	End 20/21		Q1	Q2	Q3	Q4
Align our systems of work and training to National Operational Guidance and National Operational Learning.	G		G	G		
Work with the NFCC and other key stakeholders to adopt new technologies, which support effective and efficient safe systems of work.	G		G	G		
Continue our investment of resource and expertise in the Thames Valley Breathing Apparatus Replacement project, conducting an effective and efficient join procurement prior to implementation in 2022/23.	New		G	G		



People Strategy

The purpose of our [People Strategy 2018-2021](#) is to support RBFRS staff to become the best public servants they can be, creating a workforce that can deliver efficient and effective service on behalf of the Fire Authority, to manage all foreseeable fire and rescue related risks that could affect the people of Berkshire.

Objective 1: Recruit, train and develop people to ensure we create a safe, professional and capable workforce, who can provide a fit for purpose service, 24/7, 365 days a year						
	End 20/21		Q1	Q2	Q3	Q4
Undertake Fire Fighter recruitment using Apprenticeships	NEW		G	G		
Expand on alternative ways of delivering learning and development through improved use of technology	A		A	G		
Objective 2: Increase the diversity of our workforce to better represent and therefore serve our local communities						
	End 20/21		Q1	Q2	Q3	Q4
Continue to support the Leonard Cheshire Change 100 programme to work with disabled graduates on a 100-day intern programme.	G		G	G		
Review and consult on our Equality, Diversity and Inclusion objectives and deliver associated actions, including taking positive action to ensure job and career opportunities in our service are accessible to all individuals and groups in our communities	NEW		G	A		
Develop and implement the Chairman's Internship which will target young people from under-represented groups in Berkshire	NEW		G	G		
Objective 3: Develop people and recruit talent to take personal responsibility for leadership in the organisation to ensure a public service ethos, support collaboration and effectively deliver service improvement						
	End 20/21		Q1	Q2	Q3	Q4
Integrate and embed our behavioural competency framework and values at all levels of the service	G		G	G		
Deliver a framework for coaching and mentoring	A		A	A		
Objective 4: Develop a diverse and inclusive 'one team' culture where everyone's contribution is valued and positive behaviours are used to describe how we work together						
	End 20/21		Q1	Q2	Q3	Q4
Develop a Communications and Engagement strategy	NS		G	G		
Continue to develop the Fire Authority Member Development Programme	G		G	G		
Develop and deliver a programme of staff engagement to inform our People Strategy, policies, processes and improvements	G		G	G		



Objective 5: Change policies, processes and systems to ensure they enable and support the delivery of a fit for purpose, efficient and effective service to the community						
	End 20/21		Q1	Q2	Q3	Q4
Develop our approach on equality of access to services and employment for potential staff and communities	NEW		NS	A		
We will explore the options for use of digital resources for our Protection services	NS		G	A		
Objective 6: Continue to support both the physical and mental health and wellbeing of our people.						
	End 19/20		Q1	Q2	Q3	Q4
Learn and adapt to different ways of working during and after the COVID-19 pandemic	G		G	G		
Deliver the requirements of the 2021/22 mental health action plan	G		G	G		



Strategic Asset Investment Framework

The Strategic Asset Investment Framework sets out how we will maintain and renew the vital capital assets, necessary to support our services. Our capital assets include our fire stations and HQ, fleet and equipment and our ICT systems. All together, they represent a major capital investment.

Buildings						
		Status				
		Q4 20/21	Q1	Q2	Q3	Q4
New Fire Stations: Theale	On Track	G	G	G		
	On Budget	G	G	G		
Minor Capital Works Programme	On Track	G	G	G		
	On Budget	G	G	G		
Fleet and Equipment						
		Status				
		Q4 20/21	Q1	Q2	Q3	Q4
Fleet: Fire Appliances	On Track	G	G	G		
	On Budget	G	G	G		
Fleet: Special Appliances	On Track	A	A	A		
	On Budget	G	G	G		
Fleet: Aerial Ladder Platform	On Track	G	G	C		
	On Budget	G	G	C		
Fleet: Other Ancillary Vehicles	On Track	G	G	G		
	On Budget	G	G	G		
Equipment	On Track	G	G	G		
	On Budget	G	G	G		
ICT						
		Status				
		Q4 20/21	Q1	Q2	Q3	Q4
Hardware	On Track	G	G	G		
	On Budget	G	G	G		
Software	On Track	G	G	G		
	On Budget	G	G	G		
Services	On Track	G	G	G		
	On Budget	G	G	G		



ICT						
Networks	On Track	G	G	G		
	On Budget	G	G	G		
Security Resilience	On Track	G	G	G		
	On Budget	G	G	G		
ESMCP	On Track	G	G	G		
	On Budget	G	A	A		



Built Environment Programme – High Rise Residential Project

The HRRB (High Rise Residential Building) project was initiated to undertake fire safety audits of 198 identified high rise premises within Royal Berkshire over a 6 month period. Phase one of the project was completed in Quarter 1 (see case study). Progress against the Phase two objectives will be reported below.

Phase 2 HRRB Project Objectives: 1. Perform a Fire Safety revisit for each of the 97 identified HRRBs within Royal Berkshire that received an unsatisfactory audit during Phase 1. 2. Perform regular site visits of Interim Measures Buildings where frequency is based upon risk.						
	End 20/21		Q1	Q2	Q3	Q4
HRRB Revisits: HRRBs moving to Phase 2 have been defined and site revisits are being planned.	n/a		G	G		
Interim Measures Premises: Operational crews have started to perform monthly visits on HRRBs in Interim Measures. The HRRB team intends to perform a site visit on each of the 33 HRRB's in interim Measures in the first month of Phase 2 and will be following a detailed process to provide assurance to RBFRS that Interim Measures are sufficient to mitigate risk. Thereafter, each premises will be categorized by risk and visited at an appropriate frequency. This could be weekly, monthly, bi-monthly, and quarterly.	n/a		G	G		



Quadrant Four – Risk

Risk Register

RBFRS has developed a comprehensive Organisational Risk Management Policy, along with a framework for monitoring and managing risks and uncertainties to ensure that organisational objectives can be achieved. Strategic Risks and those with a current score of 17 or above, are escalated to the Corporate Risk Register and monitored monthly by the Senior Leadership Team.

Risk Movement Highlights

This section highlights organisational risks which have been added, closed or substantially changed risk score over the course of Quarter Two. To ensure the most up to date picture for risk, the updates include information about progress since the end of the quarter.

Key Risk: COVID-19 Third Wave (Risk: 731)				
Risk Owner: Deputy Chief Executive				
	End of Q1 Risk Score	End of Q2 Risk Score	Direction of travel	Risk score as at Dec 2021
Risk 731 Risk Description: If we see a significant rise in infection rates of Covid-19 and/or the introduction of new variants of the disease, which may become increasingly likely as restrictions continue to lift, then we can expect to see a reduction in staff availability, which is significant in respect to our ability to deliver core services.	18	18	↔	18
<p>This risk was opened at the end of Quarter 4 2020/21, alongside the closure of the previous COVID-19 risk, which had focused on ongoing impacts through autumn 2020/21. This risk addresses the possibility of a rise in cases associated with the relaxation of COVID-19 restrictions through 2021/22.</p> <p>Mitigations in Q2 were focused on continuing to ensure COVID-19 secure workplaces, whilst supporting hybrid working where possible. All Service Delivery activities resumed, excepting station open days, whilst there was continued vigilance to ensure alignment with government guidance and monitoring of sickness levels. Regular communications with staff were circulated and a review of learning from the pandemic continued with staff engagement.</p>				
Current Key Controls and Mitigations	Risk Movement			
Ensure any changes to internal guidance regarding covid secure workplaces align to the Government roadmap for recovery.	Current hygiene (hand sanitizers/desk cleaning materials) to remain in place indefinitely. Decision taken by CEMT to increase capacity at HQ from 6th Sept but not to remove all distancing measures. This is to be reviewed at end of October. External guidance to be monitored. Internal guidance and RAs have been reviewed and communications have been developed to reflect changes. CO2 monitoring will carry on and results will be monitored by facilities for significant changes to levels following increase of capacities.			



Key Risk: COVID-19 Third Wave (Risk: 731)	
Risk Owner: Deputy Chief Executive	
Where a change in activity is required to comply with covid security guidance, ensure a risk assessment is carried out and shared with all affected stakeholders	The covid secure risk assessment has been updated as part of the August review and will be republished ahead 6 September.
Regularly review internal covid secure roadmap communications and update stakeholders of any changes	Communications have been issued in relation to self-isolation changes on 16 August. Review undertaken of Service position and communication and engagement programme underway in August and September.
Continue to monitor sickness absence closely to monitor trends, including reporting to NFCC	Sickness working group in place to monitor sickness trends and activity. Monitoring of symptomatic individuals in relation to reporting and the activation of the outbreak plan still in place. Impact of cases considered in relation to nature and control measures and weekly updates shared with key individuals and CEMT as appropriate. Supporting document reviewed as appropriate and as a result of any learning.
Develop and implement systems to improve remote working and collaborative working including hybrid meetings to maintain flexibility	Hybrid meeting technical solutions for both large and small meeting rooms identified, Home Office grant funding secured for implementation, supply and installation contract currently under tender. UPDATE: Purchase order for equipment and implementation raised, delivery and implementation scheduling underway
Complete review from previous locks downs, share learning and implement recommendations where appropriate	meeting scheduled in early November to ensure all relevant feedback is captured and actioned
Regularly report expenditure against the Covid grant funding and manage opportunities for additional funding	Grants fully committed and external reporting continues on a quarterly basis.
Review Service Delivery activities in line with Government guidelines and re-introduce restrictions on movement as appropriate.	All SD activities being delivered with the exception of station open days. Continual monitoring of sickness figures and government guidelines to ensure appropriateness of activities.



Key Risk: On-Call Operational Availability, Crewing and Capabilities (Risk: 682)				
Risk Owner: Assistant Chief Fire Officer				
	End of Q1 Risk Score	End of Q2 Risk Score	Direction of travel	Risk score as at Dec 2021
Risk 682 Risk Description: If we do not sustain activity to ensure our on-call provision has the appropriate numbers of personnel with the necessary skills, knowledge and availability then we risk undermining organisational resilience in our response capability and this could impact community safety and organizational reputation.	13	18	↑	18
<p>This risk increased during Q2 due to direct and indirect impacts of the Covid-19 pandemic on wholetime and on-call availability.</p> <p>For mitigations please see availability section on page 8.</p>				
Current Key Controls and Mitigations	Risk Movement			
Ensure the provision of, and attendance at RDS working group meetings. Ensure that these meetings are held regularly to identify issues and resolutions to support the maintenance of, and the enhancement of the On Call establishment	RDS Working Group meeting 29/09/21. Meeting to explore and discuss impact through Summer Months as well as current pressures and support required going forward. Continued support from Stn M West and Hub GM's through this period. Task and Finish crewing themes/issues are frequently discussed each week and will expect more feedback during next meeting to capture Actions/Recommendations to take forward.			
Weekly Crewing Task and Finish Group established to ensure the effective and efficient flexible management across On Call Station. This will include reporting on impacts of short term contracts, leave, courses and other absences.	Weekly T&F group has now paused as crewing reaches a more steady state moving through September into October and November. Comparative study of impact versus prediction for August carried out showing some were reasonably accurate but for many, there has been a significant negative impact on appliance availability which has been compounded by other reasons too.			



Key Risk: Management of Cyber Security (Risk: 629)				
Risk Owner: Deputy Chief Executive				
	End of Q1 Risk Score	End of Q2 Risk Score	Direction of travel	Risk score as at Dec 2021
Risk 682 Risk Description: If we fail to ensure compliance with Cyber Security best practices and guidelines, which is increasingly likely due to ongoing evolution in the sophistication of attack methodologies, we may be exposed to operational degradation, financial loss and/or reputational damage due to reduced availability, integrity or currency of our data and systems.	15	18	↑	18
The score for risk 629 rose in this quarter as a result of a full IT Health Check, carried out by an accredited external assessor, which identified a number of areas for action to remediate potential vulnerabilities. The score will reduce when the resultant IT Health Check action plan is completed, which is expected in Q4 this year.				
Current Key Controls and Mitigations	Risk Movement			
Certify and renew against government and industry accreditation schemes where available.	Current Status: IT Health Check report received and recommendations being analysed for remediation before undertaking Cyber Essentials Plus accreditation. Expect accreditation to be completed by end of municipal year 2021/22.			
Establish and execute an ongoing communications and education campaign focussing on Cyber Security in the workplace to be delivered across RBFRS.	Current Status: Established information channel on Workplace has yielded some successes, with staff members successfully identifying attempted scams/attacks and reporting to ICT for action. Protecting Information eLearning successfully migrated to LMS portal			
Ensure adequate expert resource is available to RBFRS to carry out IT Security activities	Current Status: Information Governance Manager now recruited and brings extensive ICT Security management experience to RBFRS. Senior Infrastructure position still under recruitment process.			
Carry out 2020 annual IT Health check exercises, to be delivered by independent and accredited external organisations	Current Status: IT Health check completed in August 2021, findings report has been delivered with a comprehensive set of recommendations for implementation. ICT are working to analyse and prioritise the action plan to remediate. The report raises some areas for attention and this treatment is the reason for the risk current score increasing to 18 from 15. Expect the score to return to 15 as the action plan is worked through. ICT continue to address areas for focus on ITHC action plan. More detailed update expected in January.			
Ensure actions plans arising from 2020 annual health check are expedited to minimise exposure	Current Status: Report received, analysis underway and action plan prioritisation being undertaken as a matter of urgency by ICT. More detailed update analysis expected in January 2022			
Carry out 2021 Cyber Security Audits, to be delivered by an independent and accredited audit organisation to ensure exposure to RBFA and appropriate sub-committees	Current Status: Value of Cyber Security Audit brought into question by the outcome of the IT Health Check process. As all audit actions had been completed, the ITHC should not have raised as many areas for remediation as it did. Consider eliminating Cyber Security Audit from schedule or refocussing			



Key Risk: Management of Cyber Security (Risk: 629)	
Risk Owner: Deputy Chief Executive	
	an ICT audit into another area of operation. Discussions regarding Cyber Security audit value ongoing.



Corporate Risk Register risks as at 24th December 2021

Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
417	Firefighter Safety	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.	25	19	19
418	ESMCP	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.	18	17	10
506	Volatility of funding	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.	24	22	16
629	Management of Cyber Security	If we fail to ensure compliance with Cyber Security best practices and guidelines, which is increasingly likely due to ongoing evolution in the sophistication of attack methodologies, we may be exposed to operational degradation, financial loss and/or reputational damage due to reduced availability, integrity or currency of our data and systems.	21	18	12



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
641	Collaboration	If collaboration activity is not appropriately commissioned, prioritised, resourced and coordinated, which is likely due to the complexity of working across different organisations and the capacity to manage additional demand, then we can expect impacts on delivery of the expected benefits, efficiencies and improvements which is significant in respect of our legal duties and the Authority's commitments in the IRMP and annual plan.	21	15	12
651	Grenfell - Phase 1	If we do not respond to the recommendations made within the Grenfell Inquiry phase 1 report which is becoming increasingly likely given the additional changes/information being received through a number of channels then we can expect potential impact to the safety of our staff and members of the public which is significant in respect to our public reputation and managing our community risk.	24	18	15
663	Capital Projects - Effective Estate Management	If we fail to effectively manage our property assets to ensure they are fit for purpose and in the right locations, which may become increasingly likely given the funding challenges and the increasing age of our fire stations, then we can expect our revenue expenditure to increase, our services to be less effective and our stations to further decline which would be significant in respect to our strategic objectives; to ensure value for money and ensure fire stations are suitable and accessible for our own staff and the communities they serve.	23	16	10
664	Management of Budget Pressures	If we fail to accurately capture budget pressures over the medium term, which is becoming more likely given the volatility in the macro-economic environment, then resource allocation will become sub-optimal, impacting negatively on our ability to deliver an efficient and effective service to the public.	24	22	16
669	National Operational Guidance	If we do not ensure operational documentation is up to date, accessible and aligned to national best practice then there is the potential for personnel to train in or deploy operational procedures that do not maximise safety and operational effectiveness which is significant in respect of delivery statutory duties and legislative responsibilities	18	15	12
674	Communication between Incident Ground & TVFCS	If we do not ensure that we review our policies and our operational crews and Control staff are suitably trained to ensure effective communication between TVFCS and the incident ground during an incident then we are likely to be sharing incorrect or irrelevant information which could then risk the safety of our staff and members of the public.	18	18	15



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
675	Handling FSG calls simultaneously	If we are unable to process large volumes of Fire Survival Guidance calls simultaneously then we can expect callers not to be able to speak with us and /or be diverted to other control rooms whereby they may not receive the Fire Survival Guidance advice required. This will impact on the safety of residents within these buildings and our operational response	18	18	12
676	Workforce Planning	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, then we can expect to fail to deliver against our statutory requirements and broader organisational development objectives	21	18	10
681	WDS Operational Availability, Crewing and Capabilities	If we do not maintain the necessary numbers, skills and knowledge requirements of WDS personnel, which requires constant attention with our lean operating model, we may see adverse impacts on the provision of appliance availability, delivery of our response standard and our wider service plans and this could significantly impact community safety and our organizational reputation.	23	16	12
682	On-Call Operational Availability, Crewing and Capabilities	If we do not sustain activity to ensure our on-call provision has the appropriate numbers of personnel with the necessary skills, knowledge and availability then we risk undermining organisational resilience in our response capability and this could impact community safety and organizational reputation.	21	18	12
685	Pensions Case Law	If we do not keep informed of pension case law and prepare records and establish adequate arrangements to meet the expected changes to pension regulations and ensure the Pensions Administrator undertakes the necessary action; which is becoming increasingly difficult due lack of understanding and clear direction, the technical complexity associated with changes and competing demands, then we can expect to be in breach of the regulations, subject to potential legal challenge and adversely impact employees and pensioners, which are significant in respect to our financial security, employer duties and our reputation.	24	22	18



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
686	Pensions Governance	If we do not employ an effective pension governance, management and administration strategy; which is becoming increasingly important given the complexity and changes made to pension regulations, limited pensions expertise and capacity within the HR department, then we can expect to fail in our employer duties, breach regulations, be subject to legal challenge and scrutiny from The Pensions Regulator resulting in potential for enforcement and penalty notices, which are significant in respect to our financial security, statutory duty and our reputation.	21	21	15
693	Understanding of risk taking hold in external walls of high rise building	If we fail to develop and assure the knowledge and understanding of our staff in recognising and reacting to fire development in external walls of high rise buildings, we can expect a potential impact to the safety of our staff and members of the public.	18	18	10
694	Fire Survival Guidance	If we fail to differentiate between a caller seeking advice and a caller who is trapped and requiring rescue, it is likely that we will give inconsistent or inaccurate guidance which could harm operational effectiveness and impact public safety	21	18	15
697	Radio Assurance	If we fail to assure the effectiveness of BA and fireground radio comms in high rise buildings, we could significantly increase the risks to crews and building occupants during an incident	21	18	15
699	Command Unit effectiveness	If we fail to assure the effectiveness and resourcing of our command support units, we are likely to attend an incident in which the command unit would be unavailable or operating sub-optimally which could impact our operational response, and affect the safety of our staff and members of the public	18	18	10
700	Evacuation Training	If we fail to establish effective procedures and training for operational crews on the evacuation of complex and high-rise buildings, the delivery of the tactical plan could be compromised which would adversely impact staff and public safety	21	18	15
731	Covid-19 Third Wave	If we see a significant rise in infection rates of Covid-19 and/or the introduction of new variants of the disease, which may become increasingly likely as restrictions continue to lift, then we can expect to see a reduction in staff availability, which is significant in respect to our ability to deliver core services.	22	18	15



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
732	Capita Secure Solutions and Services sale	If Capita SSS is sold and the purchaser makes unfavourable decisions on software development and provision of support, which is likely given commercial uncertainties around the sale, then we can expect TVFCS to experience substantial impacts on their ability to deliver an efficient, effective and resilient service which is significant in respect of delivering our statutory fire and rescue functions.	21	18	12
737	Fire Transformation	If the fire transformation programme brings significant change within the sector, which is becoming increasingly likely with the Government's fire reform agenda, then we face a period of increasing uncertainty which may affect the organisation's strategic direction.	21	21	11
742	Management of premises risk information	If we do not manage the capture, processing, storage and access of premises risk information which is increasingly likely due to the quantity and complexity of the data involved, staff may be unaware of hazards within the built environment or be presented with inaccurate or out of date information which may result reduced staff safety and or a breach of GDPR.	18	15	12
746	N.O.G. implementation resourcing	If we fail to appropriately align both operational assurance activities and station based training to National Operational Guidance (N.O.G) then we can expect to experience delays to full N.O.G implementation which could have a negative impact to achieve full compliance with the fire standards for operational competence and learning	17	15	7
767	TVFCS staffing resilience	If we do fail to develop and implement resilient TVFCS staffing arrangements, which is becoming likely due to the impacts of crewing deficiencies on managerial capacity, the we can expect to experience impacts on service delivery in the control room and the health and wellbeing of our staff, which is significant in respect of FRS delivering their statutory duties.	18	18	12
774	Comms Resource	If we fail to resource the Communications and Engagement Team adequately, in line with our current and anticipated work demands, then this could significantly impact the effectiveness of the support provided across the Service and risk delivery against our strategic objectives as set out in the Annual Plan and Corporate Plan	21	18	15



Audit Plan

Audits provide assurance that the Service is run properly and in ways that have been agreed by our Officers and Members. They demonstrate that the business is conducted in accordance with relevant legislation, government expectations, good practice and organisational policy.

Our Audit Programme is agreed by the Audit and Governance Committee at the start of the year. Progress against all actions open at the start of Quarter 2, or opened during the quarter, is detailed below.

Audit title and date	Audit Action	Date due (revised where applicable)	Priority	Status	Open / Closed
Firefighter Pension Administration 11/01/2021	2020:FFPA:01 We will develop written succession plans for the Royal Berkshire Fire and Rescue Service once the changes to the workforce structure have been implemented.	31/03/2022	Low	A	Open
Progress: The evolving pressure on pensions resulting from the McCloud/Sergeant ruling has meant that further staff are being recruited to WYPF to deal with forthcoming impacts, therefore altering staffing needs. This will impact succession plans and the view/ status of this will be picked up in the next audit with revised completion dates. The succession planning work was put on hold due to their restructure and bringing in new senior posts. Due to factors outside of the pension fund's control this exercise has taken far longer than anticipated. Assurances provided that although there is no documented succession plan in place, WYPF regularly review staffing levels, knowledge and experience of staff, training requirements at management team meetings.					
Capital Projects 11/03/2021	2020: CapProj:02 We will ensure that the Terms of Reference for the Strategic Performance Board/Project Development Working Group are reviewed and updated where required, with the updated date of review documented and the required date of next review detailed.	31/05/2021	Med	G	Closed
Progress: The ToR for the PDWG have been reviewed and updated therefore this action is complete. They are also now scheduled for annual review going forwards.					
Governance and Risk Management 17/03/2021	2020: Gov&RM:03 As part of the implementation of the risk management course, we will identify all staff responsible for risk management within the organisation. An exercise will then be completed to ensure appropriate risk training has been provided and a formal record will be retained to evidence this.	31/12/2021	Low	G	Open
Progress: Development of LMS course for Risk Management in progress.					



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Audit title and date	Audit Action	Date due (revised where applicable)	Priority	Status	Open / Closed
Performance Development Reviews 01/07/2021	2020: PDR:01 Following the completion of the 2021 PDR appraisal period, we will review and update the PDR policy. We will review current processes and responsibilities and compare these to the content of the current PDR policy. Any inconsistencies identified will be updated within the policy to ensure it reflects current practice.	30/09/2021	Low	G	Closed
Progress: The PDR policy has been reviewed and revised and consultation undertaken. The policy will be published at beginning of Q3 (14 October 2021).					
Performance Development Reviews 01/07/2021	2020: PDR:02 We will update the training materials, including the PDR slides, to provide detailed information and guidance regarding SMART objectives, including examples of these. Emphasising that objectives are SMART will also be covered within the appraisal communications to staff and line managers.	31/12/2021	Low	G	Open
Progress: Training materials will be updated to provide further information on setting objectives. An internal PDR audit is currently underway to quality check the objectives set and identify whether any additional information needs to be built into the training slides. This work is also linked to the revision of the current Behavioural Competency Framework/ Employee Code of Conduct, which will likely result in additional amendments being made to the training material (including Core Skills courses).					
Performance Development Reviews 01/07/2021	2020: PDR:03 The HR Team will devise and implement an escalated approach to reminding/chasing overdue appraisals. The HR Team will also consider identifying those manager/directorates for targeted reminders where appraisals were returned late in the previous year.	31/10/2021	Med	G	Open
Progress: Targeted reminders were sent out in July to managers and HofS to highlight PDRs that had not been recorded on FireWatch. A further targeted reminder will be sent out at the beginning of Q3 to capture any outstanding PDRs and associated paperwork (with Heads of Service informed).					



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Audit title and date	Audit Action	Date due (revised where applicable)	Priority	Status	Open / Closed
Performance Development Reviews 01/07/2021	2020: PDR:04 We will consider implementing two deadline dates for the PDR process, an earlier date by which PDR meetings must be confirmed to have taken place and a later date by which PDR forms must be received by HR.	30/09/2021	Low	G	Closed
Progress: The revised PDR policy now includes two deadlines dates and has been consulted upon. The revised policy will be published at the beginning of Q3 (14 October 2021).					
Performance Management Hubs 05/10/2021	2021: PMH: 01 The SDMT terms of reference should be updated to reflect its responsibilities. The SDMT action logs should demonstrate management oversight of performance information ahead of SPB meetings.	31/12/2021	Low	G	Open
Progress: Draft ToRs circulated for comment.					
Performance Management Hubs 05/10/2021	2021: PMH: 02 The RSG and SDMT should meet on a monthly basis as outlined in their terms of reference.	31/12/2021	Low	G	Open
Progress: Set out in revised ToRs					
Performance Management Hubs 05/10/2021	2021: PMH: 03 The Service will provide additional training to the Station Managers to ensure that objectives set in Station Plans are specific and measurable.	31/12/2021	Med	G	Open
Progress: Stations refreshed on SMART objectives and will be taken forward for LSP and Station plan review going forward in line with the RSM risk audited services feedback.					
Performance Management Hubs 05/10/2021	2021: PMH: 04 The Hub Managers will review a sample of PDRs and confirm that they are aligned to Station Plan objectives	31/12/2021	Med	G	Open
Progress: Objectives were reviewed with an extension given for re-submitting. PDRs audited by HR and subsequently no longer being part of Station audit process as emailed by R,R&S. Endorsing managers to ensure objectives smart going forward into 2022/23.					



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Audit title and date	Audit Action	Date due (revised where applicable)	Priority	Status	Open / Closed
Performance Management Hubs 05/10/2021	2021: PMH: 05 The Service plan for 21/22 should be reviewed in a timely manner, with a progress update noted, within two weeks of the end of the relevant quarter.	31/12/2021	Low	A	Open
Progress: SD AM's to do so at end of each Quarter					
Performance Management Hubs 05/10/2021	2021: PMH: 06 Actions noted in the RSG Action and Decisions Log will be clearly followed up when they are overdue to ensure that they are completed in a timely manner. Any overdue actions will be followed up and comments noted on the log to evidence this.	31/12/2021	Low	G	Open
Progress: New terms of reference / ways of working formed for RSG					
Performance Management Hubs 05/10/2021	2021: PMH: 07 The RSG terms of reference should be formally reviewed.	31/12/2021	Low	G	Open
Progress: Review of TORs underway					
Performance Management Hubs 05/10/2021	2021: PMH: 08 The functional accountability chart will be updated in a timely manner to ensure that reporting responsibilities are understood prior to the start of the next six monthly rotation.	31/12/2021	Low	C	Closed
Progress: Complete and published					
Performance Management Hubs 05/10/2021	2021: PMH: 09 The Service should ensure that responsibilities for information sharing is clearly assigned, so that performance information is collated in a timely manner and the RSG and SDMT meeting packs are sent out one week prior to the meetings.	31/12/2021	Low	G	Open
Progress: To follow from ToRs review					



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Audit title and date	Audit Action	Date due (revised where applicable)	Priority	Status	Open / Closed
Performance Management Hubs 05/10/2021	2021: PMH: 10 The Service should review its local performance measures to ensure that they are relevant and can be actioned where appropriate. Any local actions assigned should be clearly separated from analysis in the performance reports.	31/12/2021	Low	G	Open
<p>Progress: Started discussions with DB and TT (S&W measures) risk, capture of data and informing a revised wording on measures.</p> <p>Refocus on station plans being more community focused, non-quantitative measures and how we capture this.</p> <p>Discussions on re-branding Station Plans to community plans 2022/23 influencing/creating local community measures</p>					



HMICFRS ACTION PLAN

The HMICFRS report for RBFPS was published in 2019 rating us good in each of the three areas of effectiveness, efficiency and people. Improvements were identified within the report and the actions to address these are being tracked through this plan.

Section One: Effectiveness							
Improvement	Delivered via	Status					
		End 20/21		Q1	Q2	Q3	Q4
Prevention evaluation to better understand benefits	Service Plans (Service Delivery & Collaboration and Policy)	A		A	A		
Prevention quality assurance	Collaboration and Policy Service Plan	A		A	A		
Protection quality assurance	Collaboration and Policy Service Plan	A		R	R		
Addressing the burden of false alarms	Collaboration and Policy Service Plan	A		A	A		
Keeping the public informed during ongoing incidents	Corporate Services Service Plan	G		G	G		
Effective system to use for learning and debriefs	Collaboration and Policy Service Plan	G		A	A		
Section two: Efficiency							
Improvement	Delivered via	Status					
		End 20/21		Q1	Q2	Q3	Q4
Best use of available technology	ICT Strategy	G		G	G		
Section three: People							
Improvement	Delivered via	Status					
		End 20/21		Q1	Q2	Q3	Q4
Values and behaviours understood and demonstrated	HR & L&D Service Plan	G		G	G		
Effective use of competence recording system	HR & L&D Service plan	G		G	G		
Effective grievance procedures in place	HR & L&D Service plan	G		G	G		
Staff are confident in using feedback mechanisms	Corporate Services Service plan	G		G	G		
Process to identify, develop and support high-potential staff and aspiring leaders	HR & L&D Service plan	A		A	A		



Fire Standard Implementation Tracking

Last updated 23rd November 2021

Fire Standard	Owner	Contributors	Fire Standards Consultation	Standard Publication Date	RBFRS Gap Analysis	Summary of progress to date
Emergency Response Driving	Becci Jefferies		Complete	Feb 2021	Completed	Action plan, gap analysis reviewed and agreed at SLT on 6th July. Action plan underway.
Operational response - preparedness	Jim Powell/ AM response		Complete	Feb 2021	In progress	Gap analysis in progress
Operational response - competence	Becci Jefferies	AM Response/ Jim Powell	Complete	Feb 2021	In progress	Gap analysis in progress
Operational response - learning	Jim Powell		Complete	Feb 2021	In progress	Gap analysis and actions signed off by SLT on 29 Sept. Action plan underway.
Code of Ethics	Nikki Richards	Becci Jefferies	Complete 2 Nov 2020	May 2021	In progress	Signed off by SLT on 27 th Oct. Action plan underway
Community Risk Management Planning	Katie Mills		Complete 7 Dec 2020	May 2021	In progress	GAP analysis in progress.
Fire Protection	Trig Thomas		Completed	Sept 2021	In progress	GAP analysis in progress.



Fire Standard	Owner	Contributors	Fire Standards Consultation	Standard Publication Date	RBFRS Gap Analysis	Summary of progress to date
Prevention	Trig Thomas		Completed	July 2021	In Progress	GAP analysis is in progress
Data requirements and management	Katie Mills		Not started	Expected May 2022	Not started	Not started
Leadership: well led organisation	Nikki Richards		Not started	Expected November 2021	Not started	Not started
Safeguarding	Jim Powell		Completed (due 01/10/21)	Expected Dec 2021	Not started	Consultation response submitted by Oct deadline.
Fire Investigation	Trig Thomas		Not started	Expected Mar 2022		Fire Standards consultation Started 2 nd Nov
Leadership: Developing leaders	Nikki Richards		Not started	Expected April 2022		
Emergency Planning and Resilience	Jim Powell		Not started	Expected May 2022		
Workforce Management	Becci Jefferies		Not started	Expected August 2022		



Appendix A – Additional Data

REPORTABLE SERVICE MEASURES					
Percentage of occasions where time to answer emergency calls is within 10 seconds				2021/22 Target: 97%	
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	98.2%	97.7%	99.2%	97.6%	97.9%
Previous Year (20/21)	98.4%	98.3%	99.1%	98.9%	98.4%
Target	97%	97%	97%	97%	97%
2021/22 Actual	98.8%	98.4%			98.6%↑
Percentage of occasions where time to mobilise is within 90 seconds				2021/22 Target: 80%	
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	72%	73.5%	74.5%	72.1%	72.8%
Previous Year (20/21)	71.6%	70.8%	68.0%	70.9%	71.6%
Target	80%	80%	80%	80%	80%
2021/22 Actual	70.6%	71.8%			71.3%↑
Percentage of occasions where wholetime duty system crew turnout time is under 90 seconds				2021/22 Target: 90%	
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	91.9%	93.4%	94.2%	94.5%	92.7%
Previous Year (20/21)	95.9%	95.4%	95.3%	94.4%	95.9%
Target	90%	90%	90%	90%	90%
2021/22 Actual	94.5%	94.6%			94.5%↓
Percentage of occasions where On Call crews turnout is within the agreed timeframes				2021/22 Target: 90%	
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	69.4%	74.1%	74.2%	81.1%	72.1%
Previous Year (20/21)	94.2%	84.7%	91.4%	86.4%	94.2%
Target	90%	90%	90%	90%	90%
2021/22 Actual	91.3%	91.7%			91.6%↑
Percentage of occasions a second fire appliance attending a dwelling fire arrives within 2 minutes of the first appliance to arrive				2021/22 Target: Monitor	
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	63%	61.6%	62.8%	73.3%	62.3%
Previous Year (20/21)	62.7%	56.2%	65.9%	57.5%	62.7%
Target	--	--	--	--	--
2021/22 Actual	65.8%	60.0%			62.7%↑
Percentage of occasions a second fire appliance attending a road traffic collision arrives within 2 minutes of the first appliance to arrive				2021/22 Target: Monitor	
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	55.3%	54.0%	52.3%	58.3%	54.6%
Previous Year (20/21)	55.6%	52.7%	63.6%	55.3%	55.6%
Target	--	--	--	--	--
2021/22 Actual	69.2%	42.3%			55.8%↑



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Percentage of Safeguarding Referrals made to local authorities within 24 hours					2021/22 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	NA	NA	NA	NA	NA
Previous Year (20/21)	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%
2021/22 Actual	100%	100%			100%↔
Number of Formal and Informal Fire Safety activities					2021/22 Target: Monitor
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (19/20)	NA	NA	NA	NA	NA
Previous Year (20/21)	4	58	88	19	62
Target	--	--	--	--	--
2021/22 Actual	98	92			190↑



Accident Investigations

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2021/22 YTD
Accidents Requiring Investigation	Minor	7	3			10
	Moderate	4	2			6
	Major	0	0			0
Near Misses Requiring Investigation	Minor	4	3			7
	Moderate	5	2			7
	Major	0	0			0
*Accident Investigations Outstanding	Minor	0	0			0
	Moderate	0	0			0
	Major	0	0			0
*Near Miss Investigations Outstanding	Minor	0	0			0
	Moderate	0	0			0
	Major	0	0			0

*Accident Investigation Officers (AIO) have two months within which to submit their reports, unless an extension to this has been agreed due to the complexities of the investigation. The figures in the table relating to accident investigations or near misses outstanding, refer to investigation reports that were due to be submitted within that quarter but had not been received at that time.

Minor - an accident which causes only a slight injury, 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 causing a death or a specified injury; or a near miss event, including Dangerous Occurrences as defined under RIDDOR, with 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 definition: 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.



Equality, Diversity and Inclusivity Data Summary

The overall percentage of female staff in post has increased from the previous quarter by 0.3%, with increases in wholetime, retained and control.

The percentage of staff from an ethnic minority background has overall decreased by 0.3%, balancing slight increases in control and green book staff with slight decreases in wholetime and retained staff.

The number of staff with a disability decreased from 41 to 36 this quarter, with 5 individuals leaving the Service and no new starters this quarter sharing information regarding a disability.

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2020/21 YTD	Q2 20/21	Authorised establishment at the end of Q2 2021/22 (Number of authorised posts)
STAFF IN POST	Wholetime	360	364			364	361	362
	Retained	71	68			68	75	78
	Control	43	42			42	43	39
	Green Book	184	175			175	168	166
	Total	658	649			649	647	645
		Q1	Q2	Q3	Q4	2021/22 YTD	Q2 20/21	
STAFF TURNOVER	Wholetime	7	8			15	8	
	Retained	1	4			5	9	
	Control	0	1			1	0	
	Green Book	4	16			20	7	
	Total Number	12	29			41	24	
	Staff in Post	658	649			654	647	
	Percentage	1.82%	4.47%			6.26%	3.71%	
		Q1	Q2	Q3	Q4	2021/22 YTD	Target	YTD Q2 20/21
FEMALE STAFF	Wholetime	4.2%	5.8%			5.8%		4.4%
	Retained	15.5%	16.2%			16.2%		16%
	Control	67.4%	69%			69%		69.8%
	Green Book	57.6%	57.1%			57.1%		57.1%
	Total	24.5%	24.8%			24.8%		23.8%



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		Q1	Q2	Q3	Q4	2021/22 YTD	Target	YTD Q2 20/21
ETHNICITY FIGURES	Wholetime	5.0%	4.7%			4.7%		5.3%
	Retained	2.8%	1.5%			1.5%		2.7%
	Control	4.7%	4.8%			4.8%		2.3%
	Green Book	13.6%	13.7%			13.7%		13.7%
	Total	7.1%	6.8%			6.8%		7.0%

	Measure	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2021/22 YTD	Target	YTD Q2 20/21
STAFF AGE PROFILE	25 and Under	39	34			34		43
	26-35	174	178			178		169
	36-45	213	209			209		208
	46-55	188	181			181		187
	56-65	39	42			42		39
	66 and Over	5	5			5		1
	Total	658	649			649		647



Staff Ethnicity Profile Ethnicity Data

Ethnicity	Wholetime	Retained	Control	Green Book	All Staff
White British	347	67	39	148	601
Other Ethnicity	17	1	2	24	44
Unknown	0	0	1	3	4
Total	364	68	42	175	649

Ethnicity	Number of Staff
Asian or British Asian: Indian	4
Asian or British Asian: Other	3
Black or Black British African	3
Black or Black British Caribbean	4
Black or Black British other	1
Chinese	1
Mixed White and Asian	1
Mixed White and Black Caribbean	2
Other	1
Other Mixed	4
Unknown	4
White British	601
White Irish	3
White Other	15
Asian or British Asian: Pakistani	1
Mixed White and Black African	1
Grand Total	658



Staff Age Profile

Age Group	Wholetime	Retained	Control	Green Book	Grand Total
25 and Under	8	5	5	16	34
26 - 35	91	32	17	38	178
36 - 45	141	19	8	41	209
46 - 55	113	9	12	47	181
56 - 65	11	3	0	28	42
66 and Over	0	0	0	5	5
Grand Total	364	68	42	175	649

Staff Gender Profile

Gender	Wholetime	Retained	Control	Green Book	All Staff
Female	21	11	29	100	161
Male	343	57	13	75	488
Other	0	0	0	0	0
Total	364	68	42	175	649



Appendix B – 2021-22 Annual Objectives

- 1) We will provide education and advice on how to prevent fires and other emergencies.
- 2) We will ensure a swift and effective response when called to emergencies.
- 3) We will provide advice, consultation and enforcement in relation to fire safety standards in buildings.
- 4) We will seek opportunities to contribute to a broader safety, health and wellbeing agenda, whilst delivering our core functions.
- 5) We will ensure that Royal Berkshire Fire and Rescue Service provides good value for money.
- 6) We will work with Central Government and key stakeholders in the interests of the people of Royal Berkshire.
- 7) We will recruit, train and develop our people to ensure we create a safe, professional and capable workforce that are supported to become the best public servants they can be for the residents of Berkshire.
- 8) We will manage RBFRS in accordance with best practice, understanding and continuous improvement, learning from events and being transparent in our compliance.
- 9) We will be strong and visible in our leadership in developing a diverse and inclusive 'one team' culture where everyone's contribution is valued and positive behaviours are recognised.
- 10) We will explore collaboration opportunities to ensure we deliver effective and efficient services to the people we serve.



Appendix C - Performance Measures and Definitions

Service Provision

ID	Measure	Definition
1	Number of fire deaths in accidental dwelling fires	The number of deaths that occur as a result of an accidental dwelling fire, even when the death occurs weeks or months later.
2	Number of non-fatal fire casualties in accidental dwelling fires	The number of non-fatal 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	The number of deliberate primary fires	The total number of primary fires, where it has been identified that the fire was started deliberately.
4	The number of deliberate secondary fires	The total number of secondary fires, where it has been identified that the fire was started deliberately.
Prevention		
5	Number of Safe and Well Visits (S&Ws) delivered to those with individual characteristics making them at higher risk of death in the event of an accidental dwelling fire	A Safe and Well Visit is a free service that we provide to eligible residents. Safe and Well Visits are tailored to individual needs, relating to health and wellbeing, as well as fire risk reduction. A Safe and Well Visit will take place in the home and can be arranged at a convenient time.
6	Number of Safe and Well Visits (S&Ws) delivered to those who live in households with characteristics associated with higher risk of injury in accidental dwelling fires.	A Safe and Well Visit is a free service that we provide to eligible residents. Safe and Well Visits are tailored to individual needs, relating to health and wellbeing, as well as fire risk reduction. A Safe and Well Visit will take place in the home and can be arranged at a convenient time.
7	Percentage of Safe and Well 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 Safe and Well Visit should be conducted, wherever possible, within 48 hours.



ID	Measure	Definition
Protection		
8	Total Number of Full Fire Safety Audits carried out	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. 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.
9	Percentage of Fire Safety Audits with a 'Broadly Compliant' result.	The percentage of closed Fire Safety Audits carried out in commercial premises, where the result was 'Broadly Compliant' (satisfactory) and no further action or follow-up was required.
10	Percentage success when cases go to court.	The percentage of cases prosecuted following Fire Safety Audits that result in a successful outcome.
11	Percentage of statutory fire safety consultations completed within the required timeframes	Statutory fire consultations have a legally defined timeframe in which they must be completed and include: <ul style="list-style-type: none"> • Licensing • Building regulations • Building regulations approved supplier
12	The number of Automatic Fire Alarm calls received	Automatic Fire Alarm calls are calls from Alarm systems and have a higher likelihood of being a false alarm.
13	The percentage of Automatic Fire Alarm calls where RBFRS did not attend.	This is the number of Automatic Fire Alarm calls received where we did not attend. In some circumstances we are able to seek confirmation that this is not a false alarm, before attending.



ID	Measure	Definition
Response		
14	Percentage of occasions where the first fire engine arrives at an emergency incident within 10 minutes from the 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.
15	Percentage of full shifts where there is adequate crewing on all wholetime frontline pumping appliances	This is the percentage of shifts (day or night) where there is sufficient minimum qualified firefighters (four personnel) on all wholetime pumping appliances (fire engines). A wholetime frontline pumping appliance is available 24/7, 365 days a year.
16	Percentage of hours where there is adequate crewing on on-call frontline pumping appliances (based on 24/7 crewing)	This is the percentage of hours where there is sufficient minimum qualified firefighters (four personnel) on on-call pumping appliances (fire engines). On-call 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		
17	Percentage 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.
18	Percentage 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.
19	Percentage 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.



20	Percentage of domestic respondents satisfied with the service regards their Safe and Well Visit	Results are from a customer feedback questionnaire which is sent to a sample of individuals who have received a Safe and Well Visit and asks about their satisfaction and experience with the service they received from RBFRS.
21	Number of complaints received	The number of complaints made to RBFRS about any aspect of our service or staff.
22	Number of compliments received	The number of compliments received by RBFRS about any aspect of our service or staff.

Corporate Health

ID	Measure	Definition
Human Resources and Learning & Development		
23	Percentage 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. This will not include COVID-19 related absences where an individual is isolating but not symptomatic.
24	Percentage 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.
25	Percentage of eligible staff with Personal Development Reviews	This measure reflects the percentage of eligible employees who have had a Personal Development Review meeting. Eligible staff are those who have completed their initial probation period, before the end of the PDR 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 PDR.
26	Percentage of eligible operational staff in qualification	This measure examines performance in the key qualifications, outlined in the eight core areas of the Fire Professional Framework , required by staff to maintain effective service delivery.



ID	Measure	Definition
27	Number of formal grievances	The number of formal grievances raised by staff under the Grievance, Bullying and Harrassment Policy.
Health and Safety		
28	Number of RIDDOR accidents	RIDDOR(<i>Reporting of Injuries Diseases and Dangerous Occurrences Regulations</i>) are more serious injury accidents.
Finance and Procurement		
29	Percentage of spend subject to competition	This measure looks 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.
30	Compliant spend as a percentage of overall spend	This measure calculates the supplier spend that is in a compliant contract as a percentage of the total spend to external bodies and suppliers (as per RBFA contract regulations).
Freedom of Information		
31	Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act, Environmental Information Regulations or Data Protection Legislation)	RBFRS are required to conform to Data Protection and Freedom of Information legislation. The Information Commissioner is responsible for determining compliance and issuing advice or penalties. This measure includes only incidents where there is a finding of a breach (not complaints which are subsequently dismissed).

