Quarterly Performance Report

Q4 2021-2022 January - March

Contents

* [**Contact Us 3**](#_Toc105506913)
* [**Introduction 4**](#_Toc105506914)
* [**Key 5**](#_Toc105506915)
* [**Q4 Summary 6**](#_Toc105506916)
* [**Quadrant One – Service Provision 9**](#_Toc105506919)
* [**Quadrant Two – Corporate Health 16**](#_Toc105506920)
* [**Quadrant Three – Priority Programmes 25**](#_Toc105506921)
* [**Quadrant Four – Risk 33**](#_Toc105506924)
* [**Appendix A – Additional Data 51**](#_Toc105506927)
* [**Appendix B – 2021-22 Annual Objectives 56**](#_Toc105506928)
* [**Appendix C - Performance Measures and Definitions 57**](#_Toc105506929)

**Contact Us**

**Accessibility**

If you require any of the information contained within this document in a more accessible format, [please contact us](mailto:communications@rbfrs.co.uk). Please advise us which information you would like to access and provide your name and email address.

**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**

 Visit our website: [rbfrs.co.uk](http://www.rbfrs.co.uk/)

 Email us at: performance@rbfrs.co.uk

Call us on: 0118 945 2888

Write to us at: Newsham Court, Pincents Kiln, Calcot, Reading, Berkshire, RG31 7SD

**Introduction**

This is the Quarter Four 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, which 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 |

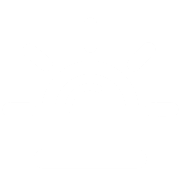
**Priority Programme Project Status**

|  |  |
| --- | --- |
| 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**

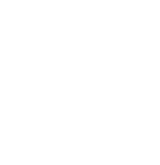
|  |  |
| --- | --- |
| 20 - 25 | Outside assumed Risk Appetite and requires mitigation to proceed |
| 19 | Inside Risk Appetite only because of extremely low probability. Mitigate if necessary and possible, accept only if no further action can be justified |
| 17 & 18 | Inside Risk Appetite. Mitigate 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 |

**Q4 Summary**



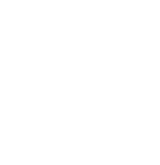
**1733**

Total number of incidents in Berkshire



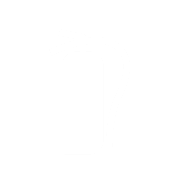
**76.3%**

% of occasions we responded within 10 minutes



**1743**

Safe and Well visits carried out



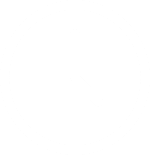
**226**

Total number of Fire Safety Audits completed



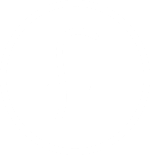
**4**

Number of complaints received



**7.1%**

% of working time lost to staff sickness across all groups



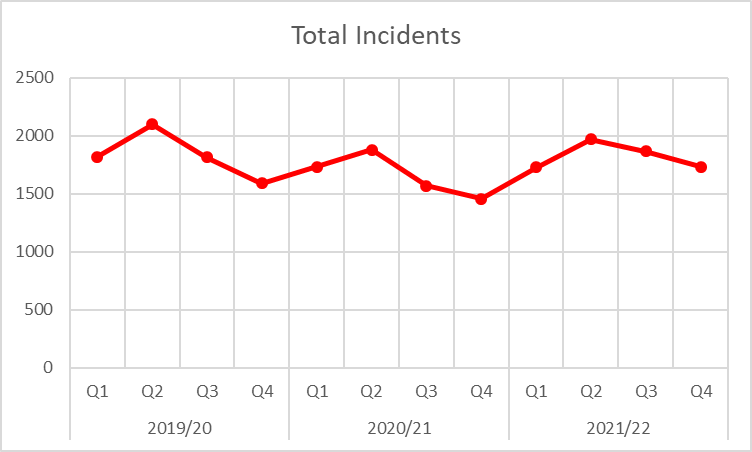
**100%**

Compliant spend as a % of overall spend

**Incident Trends**

The table below illustrates the number of emergency incidents we responded to in Quarter 4 2021/22 in comparison with previous years. This data is also presented in a graph.

| **Total Incidents** | | | | |
| --- | --- | --- | --- | --- |
|  | Q1 | Q2 | Q3 | Q4 |
| 2019/20 | 1821 | 2101 | 1816 | 1592 |
| 2020/21 | 1732 | 1880 | 1571 | 1459 |
| 2021/22 | 1728 | 1972 | 1867 | 1733 |



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 incidents in 2021/22 returned to pre-pandemic levels.

The return to pre-COVID-19 activity in our communities continues to be reflected in incident trends, with a rise in primary fires in industrial and commercial premises associated with increased on-site working.

The number of secondary fires this quarter continues at normal expected levels after very low numbers in summer 2021, which was related to a wetter summer across the South East of England.

The number of Automatic Fire Alarms (AFAs) calls received dropped in this quarter, as did the number of False Alarms attended. There are two main drivers of this trend, the first is explained by the increase in people returning to the workplace and available to deal with alarms. The second is changes to our AFA policy, which although went live in Q1 2022/23, engagement sessions were held with control in Q4 2021/22 that changed the perception of False Alarms. Evidence of this is in the increase in % of AFAs not attended in Q4, which is a record for the past 3 years.

Road Traffic Collisions (RTCs) have increased compared to 2020/21, as the effects of Covid-19 on economic activity began ease, but have not yet returned to pre-pandemic levels. Similarly, malicious calls have increased compared to 2020/21 but these have now returned to pre-pandemic levels.

**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.

**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.

There has unfortunately been an increase in the number of non-fatal fire casualties in accidental dwelling fires in Q4, with the total annual figures higher than the two previous years. However, 2021/22 has been slightly below the five year average. A decision was taken to focus Safe & Well Visits based on “risk to individuals” and increase the numbers of vulnerable people referred by partner agencies so that we can target those most at risk. It is our expectation that this will enable us to further reduce both fire fatalities and non-fatal fire casualties moving forward.

The majority of AFAs attended continue to be Unwanted Fire Signals (UwFS). There was a decrease in AFA calls received in Q4, which is due to the increase in people returning to the workplace and available to deal with alarms as well as changes to our AFA policy, as discussed further on Page 7. In line with our new UwFS Policy and guidance issued at the start of Q3, response crews are working with the Responsible Person (RP) at each incident to identify the cause of the alarm and prevent future false alarms. In addition, the Protection Teams will be working through records of UwFS and writing to RPs where trigger points have been reached. Where persistent UwFS are received, Hub Managers will consider further reasonable measures to avoid repetition.

Despite ongoing challenges in relation to wholetime appliance availability, we continued to see a high percentage of emergency incidents attended within our response standard of ten minutes. This is a response standard performance improvement from the last Quarter and when compared to this time last year. This Quarter we have attended 76.3% of incidents within ten minutes, which continues to exceed our target of 75%. We have succeeded in exceeding our response standard target each quarter in 2021/22.

Both On-Call and Whole-time appliance availability also remained a pressure during the quarter, although both saw partial recovery in Q4. A new Response Resourcing Group has been established to scrutinise the causes of the availability challenge closely to find solutions. Causes identified include courses needing to be delivered to maintain core skills following the cessation of courses during the pandemic and a higher than anticipated level of staff sickness. An additional transferee course has been agreed to bolster staff numbers with a further apprentice / recruit course also in planning. On-Call recruitment is ongoing and has been successful over the period, with six additional on-call recruits having undertaken their initial training during Q4. An additional six On-Call recruits begin their initial training in Q1 of 2022. Whilst this is positive, it is unlikely to yield significant improvements in availability for several months due to recruits having to complete the retained development pathway before impacting appliance availability

**Ukraine Donation**

On Tuesday 1 March 2022, RBFRS was contacted through the National Fire Chiefs Council (NFCC) following a request from the Home Office to support the humanitarian effort in Ukraine. The request focused on scoping out the potential to provide firefighting vehicles and equipment that would assist the Ukrainian fire and rescue service. The request was made to all UK fire and rescue services.

The NFCC, with the support of the charity Fire Aid, have managed to send three convoys of fire fighting vehicles and equipment to date. Support from multiple UK fire and rescue services has meant donations from across the fire sector have been successfully received in Ukraine, with many FRS personnel volunteering to drive across Europe as part of the convoys.

As a result of RBFRS’ main front line appliance replacement programme, 4 vehicles that were going to be sold were available to be donated.

The ancillary equipment donated included lengths of hose, used petrol generators and some personal protective equipment not required by RFBRS, all of which had a nominal residual or resale value.



**Rowe Court Fire - working in partnership following a devastating fire**

Our teams worked closely with Thames Valley Police, South Central Ambulance Service, and Reading Borough Council in responding to a devastating fire at a block of flats in Rowe Court, Reading.

In the early hours of Wednesday, 15 December 2021, our teams responded to this fire in the four-storey building, arriving within 8 minutes of receiving the 999 call. Upon arrival, they faced a challenging situation. Their priority was to locate casualties inside the building to evacuate them safely and ensure they received prompt treatment from our partners at South Central Ambulance Service while also working to extinguish the fire. During this incident, our firefighters were able to rescue one of the residents from the building using a ladder, and emergency call handlers also led a resident safely out of the property by providing fire survival guidance. However, despite their efforts on the scene, we know that two people, Richard Burgess and Neil Morris, tragically lost their lives.

At the height of the fire, there were around 50 firefighters at the scene from stations across Berkshire and Oxfordshire, supported by Officers and specialist equipment, including our Aerial Ladder Platform and the Urban Search and Rescue Team from Buckinghamshire Fire and Rescue Service. The fire caused extensive damage to the structure of the building, meaning recovery efforts had to be delayed until scaffolding installed could ensure the safety of staff onsite. In the meantime, our staff went to offer Safe and Well Visits in the nearby area to provide safety advice to local residents and regularly provide information.

It was vital that throughout the incident, we shared updates promptly, and the media reporting was accurate. We set up a dedicated website page with a rolling feed of information, updates were posted on partner agencies’ social media channels, interviews were provided to local media, and a joint press briefing was set up on the first day of the incident. These steps helped warn and inform our communities of the incident and reassured them about what was being done to keep them safe.

With court proceedings ongoing concerning this incident, our thoughts continue to be with those affected by this tragic fire. We recognise that this incident is very distressing, especially for the family and friends of those that lost their lives. Following the incident, the Service offered all staff support through its dedicated Employee Assistance Programme, through which they continue to be supported.

| **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 Q4 |
| Previous Year (19/20) | 1 | 0 | 1 | 1 | 3 |
| Previous Year (20/21) | 0 | 0 | 0 | 0 | 0 |
| Target | 0 | 0 | 0 | 0 | 0 |
| 2021/22 Actual | 1 | 0 | 0 | 2 | 3↓ |

|  |
| --- |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Number of non-fatal fire casualties in accidental dwelling fires** | | | | **2021/22 Target: 20 max** | |
|  | Q1 | Q2 | Q3 | Q4 | Year to Q4 |
| Previous Year (19/20) | 2 | 3 | 8 | 2 | 15 |
| Previous Year (20/21) | 2 | 10 | 5 | 7 | 24 |
| Target | 5 | 5 | 5 | 5 | 20 |
| 2021/22 Actual | 10 | 11 | 0 | 7 | 28↓ |

|  |
| --- |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Number of deliberate Primary Fires** | | | | **2021/22 Target: Reduce** | |
|  | Q1 | Q2 | Q3 | Q4 | Year to Q4 |
| Previous Year (19/20) | 50 | 44 | 36 | 35 | 165 |
| Previous Year (20/21) | 36 | 28 | 40 | 26 | 130 |
| Target (Max) | 35 | 27 | 39 | 25 | 129 |
| 2021/22 Actual | 30 | 27 | 37 | 35 | 129↑ |

|  |
| --- |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Number of deliberate Secondary Fires** | | | | **2021/22 Target: Reduce** | |
|  | Q1 | Q2 | Q3 | Q4 | Year to Q4 |
| Previous Year (19/20) | 84 | 110 | 40 | 35 | 269 |
| Previous Year (20/21) | 85 | 101 | 41 | 38 | 265 |
| Target (max) | 84 | 100 | 40 | 37 | 261 |
| 2021/22 Actual | 76 | 35 | 38 | 50 | 199↑ |

|  |
| --- |
|  |
| **Prevention Measures** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **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 Q4 |
| Previous Year (19/20) | 2288 | 1800 | 2070 | | 1352 | 7510 |
| Previous Year (20/21) | 302 | 542 | 581 | | 490 | 1915 |
| Target | 450 | 1750 | 1750 | | 1750 | 5700 |
| 2021/22 Actual | 1143 | 1453 | 1802 | | 1489 | 5887↑ |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **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 Q4 |
| Previous Year (19/20) | 416 | 702 | 685 | | 704 | 2507 |
| Previous Year (20/21) | 14 | 18 | 0 | | 2 | 34 |
| Target | 5 | 625 | 625 | | 625 | 1880 |
| 2021/22 Actual | 32 | 151 | 410 | | 254 | 847↑ |

|  |
| --- |
|  |

|  |  |
| --- | --- |
| 1. **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 Q4 |
| Previous Year (19/20) | 75.0% | 100.0% | 94.7% | 75.0% | 87.5% |
| Previous Year (20/21) | 100% | 100% | 97.20% | 100% | 99.1% |
| Target | 100% | 100% | 100% | 100% | 100% |
| 2021/22 Actual | 100.0% | 100.0% | 100.0% | 100.0% | 100.0%↑ |
|  | | | | | |
| **Protection Measures** | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Total number of Full Fire Safety Audits carried out in premises in Berkshire** | | | | **2021/22 Target: 1100** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |
| Previous Year (19/20) | 470 | 319 | 321 | | 283 | 1393 |
| Previous Year (20/21) | 32 | 158 | 141 | | 66 | 397 |
| Target | 50 | 350 | 350 | | 350 | 1100 |
| 2021/22 Actual | 235 | 230 | 256 | | 226 | 947↑ |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Percentage of Full Fire Safety Audits with a ‘Broadly Compliant’ result** | | | | | **2021/22 Target: 60% max** | |
|  | Q1 | Q2 | Q3 | Q4 | | Year to Q4 |
| Previous Year (19/20) | 67.9% | 61.8% | 55.8% | 64.3% | | 63.0% |
| Previous Year (20/21) | 40.6% | 55.7% | 39.7% | 62.1% | | 49.9% |
| Target (max) | 60% | 60% | 60% | 60% | | 60% |
| 2021/22 Actual | 56.2% | 57.4% | 63.3% | 51.3% | | 57.2%↓ |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Percentage success when cases go to court** | | | | **2021/22 Target: 80%** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |
| Previous Year (19/20) | 0 cases | 0 cases | 100% (2 cases) | | 0 cases | 100% (2 cases) |
| Previous Year (20/21) | 0 cases | 0 cases | 100% (1 case) | | 0 cases | 100% (1 case) |
| Target | 80% | 80% | 80% | | 80% | 80% |
| 2021/22 Actual | 0 cases | 100% (1 case) | 0 cases | | 0 cases | 100% (1 case) |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Percentage of Statutory fire consultations completed within the required timeframes** | | | | **2021/22 Target: 95%** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |
| Previous Year (19/20) | 92% | 95% | 90% | | 85.5% | 90.4% |
| Previous Year (20/21) | 95.6% | 97.1% | 95.5% | | 98.7% | 96.8% |
| Target | 95% | 95% | 95% | | 95% | 95% |
| 2021/22 Actual | 94.1% | 97.7% | 98.4% | | 97.2% | 96.7% |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **The number of Automatic Fire Alarm calls received** | | | | **2021/22 Target: Monitor** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |
| Previous Year (19/20) | 707 | 801 | 821 | | 623 | 2952 |
| Previous Year (20/21) | 497 | 698 | 733 | | 567 | 2495 |
| Target | - | - | - | | - | - |
| 2021/22 Actual | 622 | 853 | 868 | | 698 | 3041↓ |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Percentage of Automatic Fire Alarm calls where RBFRS did not attend** | | | | **2021/22 Target: Improve** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |
| Previous Year (19/20) | 25.5% | 25.3% | 25.7% | | 26.3% | 25.7% |
| Previous Year (20/21) | 15.3% | 21.3% | 25.9% | | 18.5% | 20.8% |
| Target | - | - | - | | - | - |
| 2021/22 Actual | 23.8% | 22.0% | 21.2% | | 28.1% | 23.5%↓ |

|  |
| --- |
|  |
| **Response Measures** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **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 Q4 |
| Previous Year (19/20) | 76.7% | 74.0% | 76.6% | | 78.6% | 76.3% |
| Previous Year (20/21) | 78.4% | 76.6% | 78.0% | | 80.1% | 78.2% |
| Target | 75% | 75% | 75% | | 75% | 75% |
| 2021/22 Actual | 76.1% | 77.0% | 79.4% | | 76.3% | 77.2%↓ |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **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 Q4 |
| Previous Year (19/20) | 100% | 100% | 98.4% | | 100% | 99.6% |
| Previous Year (20/21) | 100% | 98.9% | 89.7% | | 98.9% | 96.8% |
| Target | 100% | 100% | 100% | | 100% | 100% |
| 2021/22 Actual | 98.9% | 84.8% | 71.7% | | 92.8% | 87.0%↓ |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Percentage of hours where there is adequate crewing on on-call frontline pumping appliances** | | | | **2021/22 Target: 60%** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |
| Previous Year (19/20) | 35.9% | 28.2% | 32.7% | | 34.7% | 32.9% |
| Previous Year (20/21)\*\* | 72.4% | 60.9% | 61.1% | | 68.2% | 65.6% |
| Target | 60% | 60% | 60% | | 60% | 60% |
| 2021/22 Actual\*\* | 59.8% | 34.7 % | 36.5% | | 43.8% | 43.6%↓ |
| \*\*excluding Pangbourne | | | | | | |

|  |
| --- |
| **Customer Experience Measures** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Percentage of domestic respondents satisfied with the overall service (fire incident)** | | | | **2021/22 Target: 100%** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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% | 100% | 100% |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Percentage of commercial respondents satisfied with the overall service (fire incident)** | | | | **2021/22 Target: 95%** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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% | 100% | 100% |
|  | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Percentage of respondents satisfied with the service with regards to Fire Safety Audits** | | | | **2021/22 Target: 90%** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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% | 100% | 100% | 98.7% |
|  | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Percentage of domestic respondents satisfied with the service – Safe and Well Visits** | | | | **2021/22 Target: 100%** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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% | No Returns | 100% | 99.2% |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Number of complaints received** | | | | **2021/22 Target: Monitor** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |
| Previous Year (19/20) | 7 | 11 | 14 | | 5 | 37 |
| Previous Year (20/21) | 5 | 3 | 9 | | 5 | 22 |
| Target | - | - | - | | - | - |
| 2021/22 Actual | 7 | 8 | 9 | | 4 | 27↓ |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Number of compliments received** | | | | **2021/22 Target: Monitor** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |
| Previous Year (19/20) | NA | NA | NA | | NA | NA |
| Previous Year (20/21) | 2 | 4 | 2 | | 2 | 10 |
| Target | - | - | - | | - | - |
| 2021/22 Actual | 5 | 3 | 1 | | 5 | 14↑ |

|  |
| --- |
|  |

**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.

**Finance**

The 2021/22 Revenue Budget agreed by Members in February 2021 was set on the basis that expenditure would exceed income by £29,000 (on a budget of £35.779m). This deficit was to be funded from reserves.

The actual revenue outturn for 2021/22 is shown in Appendix A. The outturn position shows a deficit of £40,000, to be funded from reserves – which is an addition of £11,000 from the budget setting position. Variances against individual revenue lines are explained below.

Whilst staffing salary budgets were set based on the Government position of a public sector pay freeze, the NJC subsequently agreed a grey book pay award of 1.5%, effective from 1 July 2021, which cost an additional £232,000. The final green book pay award of 1.75% backdated to 1 April 2021 cost an additional £129,000.

In relation to Station based employees, Covid has resulted in increased overtime both to cover sickness absences and to cover staff undertaking training to maintain operational competence. There was also additional overtime required to cover vacancies during the year. Set against these pay pressures, there were savings from the re-phasing of the Nucleus Crewing project and reduced costs as a result of lower overall availability on on-call stations.

As well as the unbudgeted pay awards, the other pressure in the Non-Station employee cost line related to the salary costs of new recruits while undergoing their training. This was £53,000 higher than expected as the budget was set for 14 recruits, and 18 were taken on.

Pressure on the Repairs and Maintenance expenditure line has led to costs exceeding the budget by £77,000. Major costs include roof repairs at four stations, a water leak at the training centre, chiller repairs at HQ and work on the extractor unit at the Firehouse.

On a more positive note, the Authority has been working with a property specialist to appeal business rate charges applied to our properties. This has proven to be successful and has resulted in rebates totalling £321,000 for 16 stations. £245,000 of this amount relates to previous years. Against these saving the business rates for the new station in Theale have been confirmed and the cost in 2021/22 was £53,000.

Over the year, we have been fortunate to benefit from hedging by our energy supplier meaning that utility cost rises have been relatively subdued. However, price rises have fed in during the final quarter of this financial year, and will increase further next year.

The IS Equipment & Licences line includes additional costs for the deployment of Microsoft Office 365, to enable flexible working, which was planned but was accelerated due to Covid.

There have been supply chain delays in meeting our clothing orders under the National Uniform Framework. Kent FRS are working with the supplier to resolve all issues which affect FRSs signed up to the framework agreement.

The Community Fire Safety Supplies line is underspent due to restrictions in the early part of the year on in-person Safe & Well visits due to Covid restrictions and latterly there have been supply delays for smoke detectors (particularly affected by the shortage of semiconductors).

Thames Valley Fire Control Service (see Appendix B) shows an adverse variance of £36,000, which is mainly due to the un-budgeted pay award. The Authority’s share of this is £14,000.

There have been some additional one-off cost pressures in relation to legal fees, with costs exceeding the allocated budget by £70,000.

Cross border charges are £20,000 lower (under Contracts Other) and income is £102,000 higher than the budgeted amounts (under Income Other).

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. This has been partly offset by additional small government grants received in the year.

Pension costs pressures continue to be seen as a result of the McCloud judgement. Based on the latest guidance, further provisions have been made to dealing with future liabilities meaning that costs outstripped the budget by £148,000.

At the point of budget setting, there was uncertainty about the final level of funding the Authority would receive via the Berkshire unitary authorities, section 31 grants and the other council tax and business rates COVID related support measures that the Government implemented. Confirmed final figures and funding were not received until quarter 4, and the Authority received an additional £296,000.

Spend subject to competition decreased in Q4 as we saw an increase in low level spend which is not subject to competition and reduced levels of spend on projects requiring competitive processes.

**HR**

Although the levels of working time lost due to sickness has reduced slightly this quarter, the level remains high. Whilst last year’s annual average working time lost due to sickness figure (3.1%) was particularly low, this year’s figure (5.8%) is also higher than 2019/20’s (4.5%). The reasons for sickness absence are actively monitored. The three major categories of sickness absence are discussed in detail below.

Absence due to confirmed COVID-19 cases made up just under one third of all sickness absences, with a much smaller additional number of sickness absences due to coronavirus symptoms. Long Covid was newly introduced as a category this quarter and should embed in Q1 2022/23.

Musculoskeletal (MSK) sickness continues to remain one of the top causes of sickness absence, equating to nearly a fifth of total days lost. The number of episodes remain consistent.

Mental health sickness has reduced a large amount this quarter, but still equates to nearly a fifth of total days lost and remains much higher than the same period last year.

The percentage of eligible staff receiving a Personal Development Review (PDR) meeting this quarter remains high and is only a very small reduction from the same quarter last year. Likewise, the percentage of eligible operational staff in qualification also remains high. This measure has shown an increase on the previous quarter and an increase in performance compared to the same quarter last year.

The number of employees from an ethnic minority background in the service does not reflect the diversity of Berkshire’s population and remains a challenge, however, there has been a small increase in the percentage of staff from ethnic minority backgrounds this quarter. Likewise, the number of female firefighters employed in the Service remains a challenge and is the same as last quarter. The number of staff employed by RBFRS declaring a disability has reduced by one this quarter.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Royal Berkshire Fire Authority** | | |  |  |
| **Budget Update - Revenue Position Quarter 4 2021/22** | | |  |  |
|  |  |  |  |  |
|  |  | **Budget** | **Outturn** | **Variance** |
|  |  | **£'000** | **£'000** | **£'000** |
|  | **EMPLOYEES** |  |  |  |
|  | STATIONS | 16,858 | 17,019 | 161 |
|  | NON-STATIONS | 11,153 | 11,341 | 188 |
|  | TRAINING | 529 | 528 | (1) |
|  | OTHER | 264 | 278 | 14 |
|  |  | **28,804** | **29,166** | **362** |
|  | **PREMISES** |  |  |  |
|  | REPAIRS & MAINTENANCE | 738 | 815 | 77 |
|  | RATES | 920 | 649 | (271) |
|  | CLEANING | 249 | 266 | 17 |
|  | UTILITIES | 460 | 509 | 49 |
|  |  | **2,367** | **2,239** | **(128)** |
|  | **SUPPLIES** |  |  |  |
|  | INSURANCE | 385 | 385 | 0 |
|  | EQUIPMENT | 575 | 586 | 11 |
|  | IS EQUIPMENT & LICENCES | 681 | 750 | 69 |
|  | CLOTHING/PPE | 336 | 314 | (22) |
|  | COMMUNICATIONS | 764 | 762 | (2) |
|  | OCCUPATIONAL HEALTH | 198 | 214 | 16 |
|  | PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTIONS | 139 | 138 | (1) |
|  | COMMUNITY FIRE SAFETY SUPPLIES | 151 | 99 | (52) |
|  | SUPPLIES OTHER | 199 | 180 | (19) |
|  |  | **3,428** | **3,428** | **0** |
|  | **CONTRACTS** |  |  |  |
|  | CONTRIBUTION TO TVFCS & COLLABORATION | 911 | 925 | 14 |
|  | LEGAL | 50 | 122 | 72 |
|  | CONTRACTS OTHER (incl Professional Services) | 721 | 690 | (31) |
|  |  | **1,682** | **1,737** | **55** |
|  | **TRANSPORT** |  |  |  |
|  | VEHICLE RUNNING COSTS | 698 | 688 | (10) |
|  | TRAVEL | 200 | 181 | (19) |
|  |  | **898** | **869** | **(29)** |
|  | **PENSIONS** |  |  |  |
|  | PENSIONS | 331 | 479 | 148 |
|  |  | **331** | **479** | **148** |
|  | **INCOME** |  |  |  |
|  | GRANTS | (2,620) | (2,594) | 26 |
|  | RENTAL INCOME | (199) | (211) | (12) |
|  | TVFCS RECHARGE INCOME | (324) | (324) | 0 |
|  | INCOME OTHER | (355) | (476) | (121) |
|  |  | **(3,498)** | **(3,605)** | **(107)** |
|  | **NET COST OF SERVICES** | **34,012** | **34,313** | **301** |
|  | DEBT CHARGES INTEREST | 374 | 380 | 6 |
|  | INVESTMENT INTEREST | (11) | (11) | 0 |
|  | REVENUE FUNDING OF CAPITAL | 600 | 600 | 0 |
|  | APPROPRIATION TO/(FROM) RESERVES | 213 | 213 | 0 |
|  | FINANCING COSTS | 620 | 620 | 0 |
|  | **NET EXPENDITURE** | **35,808** | **36,115** | **307** |
|  | GOV GRANTS/PRECEPTS | (35,779) | (36,075) | (296) |
|  | **DEFICIT / (SURPLUS) BEFORE USE OF RESERVES** | **29** | **40** | **11** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Royal Berkshire Fire Authority** |  |  |  |
| **Quarter 4 Budget Monitoring Report 2021/22** |  |  |  |
|  |  |  |  |
| **Thames Valley Fire Control Service (TVFCS)** |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | **Budget** | **Outturn** | **Variance** |
|  | **£'000** | **£'000** | **£'000** |
|  |  |  |  |
| **EMPLOYEES** | 1,798 | 1,850 | 52 |
| **CORPORATE RECHARGES TO TVFCS FROM RBFRS** | 324 | 324 | 0 |
| **SUPPLIES/ OTHER** | 38 | 36 | (2) |
| **TECHNOLOGY** | 250 | 236 | (14) |
|  |  |  |  |
| **NET COST OF TVFCS** | **2,410** | **2,446** | **36** |
|  |  |  |  |
| **RBFRS Share of Costs (37.8%)** | 911 | 925 | 14 |

**Equality, Diversity and Inclusion Objectives Progress Update**

The end of year Equality, Diversity and Inclusion summary update has been reported through Fire Authority. The table below illustrates progress against our Equality, Diversity and Inclusion Objectives.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | 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 | A | G |
|  | | | | | | |
| **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 | G | 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 | A | A |
|  | | | | | | |
| **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 | G | G |
|  | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **QUADRANT TWO – CORPORATE HEALTH** | | | | | | | | **DATA SUMMARY** | | | | |
| 1. **Percentage of working time lost to sickness across all staff groups** | | | | | | | | | **2021/22 Target: 4% max** | | | |
|  | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 | |
| Previous Year (19/20) | 4.3% | | 3.9% | | 5.3% | | | | 4.7% | | 4.5% | |
| Previous Year (20/21) | 2.8% | | 3.0% | | 3.4% | | | | 3.3% | | 3.1% | |
| Target (21/22) | 4% | | 4% | | 4% | | | | 4% | | 4% | |
| 2021/22 Actual | 3.4% | | 5.5% | | 7.3% | | | | 7.1% | | 5.8%↓ | |
|  | | | | | | |  | | | | | |
| 1. **Percentage of eligible operational staff successfully completing fitness test** | | | | | | | **2021/22 Target: 100%** | | | | | |
|  | | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 |
| Previous Year (19/20) | | 96.6% | | 99.8% | | 96.0% | | | | 98.5% | | 98.5% |
| Previous Year (20/21)\* | | -- | | -- | | 99.2% | | | | 99.2% | | 99.2% |
| Target | | 100% | | 100% | | 100% | | | | 100% | | 100% |
| 2021/22 Actual | | 99% | | 99% | | 93.7% | | | | 98.6% | | 98.6%↓ |
| \* timeframes for testing impacted by COVID-19 | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| 1. **Percentage of eligible staff with Personal Development Appraisals** | | | | | | | **2021/22 Target: 100%** | | | | | |
|  | | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 |
| Previous Year (19/20) | | 47.5% | | 81.9% | | 92.0% | | | | 92.0% | | 92.0% |
| Previous Year (20/21) | | 78.9% | | 95.3% | | 99.7% | | | | 99.7% | | 99.7% |
| Target | | 100% | | 100% | | 100% | | | | 100% | | 100% |
| 2021/22 Actual | | 76.0% | | 93.8% | | 98.2% | | | | 98.7% | | 98.7%↓ |
|  | | | | | | | | | | | | |
| 1. **Percentage of eligible operational staff in qualification** | | | | | | | **2021/22 Target: 100%** | | | | | |
|  | | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 |
| Previous Year (19/20) | | 98.8% | | 99.3% | | 99.1% | | | | 99.2% | | 99.1% |
| Previous Year (20/21) | | 97.3% | | 96.9% | | 96.9% | | | | 96.4% | | 96.4% |
| Target | | 100% | | 100% | | 100% | | | | 100% | | 100% |
| 2021/22 Actual | | 96.7% | | 95.9% | | 96.0% | | | | 97.0% | | 97.0%↑ |
|  | | | | | | | | | | | | |
| 1. **Number of formal grievances** | | | | | | | **2021/22 Target: Monitor** | | | | | |
|  | | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 |
| Previous Year (19/20) | | 3 | | 0 | | 8 | | | | 1 | | 12 |
| Previous Year (20/21) | | 0 | | 0 | | 1 | | | | 1 | | 2 |
| Target | | -- | | -- | | -- | | | | -- | | -- |
| 2021/22 Actual | | 2 | | 1 | | 4 | | | | 0 | | 7↓ |
|  | | | | | | | | | | | | |
| 1. **Number of RIDDOR accidents** | | | | | | | **2021/22 Target: 6 max** | | | | | |
|  | | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 |
| Previous Year (19/20) | | 1 | | 0 | | 0 | | | | 1 | | 2 |
| Previous Year (20/21) | | 0 | | 1 | | 1 | | | | 0 | | 2 |
| Target (max) | | 1 | | 1 | | 1 | | | | 1 | | 6 |
| 2021/22 Actual | | 2 | | 1 | | 1 | | | | 1 | | 5↓ |
|  | | | | | | | | | | | | |
| 1. **Percentage of spend subject to competition** | | | | | | | **2021/22 Target: 85%** | | | | | |
|  | | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 |
| Previous Year (19/20) | | 95.4% | | 91.4% | | 95.1% | | | | 93.6% | | 94.7% |
| Previous Year (20/21) | | 91.7% | | 92.1% | | 95.2% | | | | 89.6% | | 93.3% |
| Target | | 85% | | 85% | | 85% | | | | 85% | | 85% |
| 2021/22 Actual | | 94.7% | | 92.3% | | 89.9% | | | | 83.8% | | 91.0%↓ |
|  | | | | | | | | | | | | |
| 1. **Compliant spend as a percentage of overall spend** | | | | | | | **2021/22 Target: 100%** | | | | | |
|  | | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 |
| 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% | | | | 100% | | 100%↔ |
|  | | | | | | | | | | | | |
| 1. **Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation\*** | | | | | | | **2021/22 Target: 0** | | | | | |
|  | | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 |
| Previous Year (19/20) | | 0 | | 0 | | 1 | | | | 0 | | 1 |
| Previous Year (20/21) | | 0 | | 0 | | 0 | | | | 0 | | 0 |
| Target | | 0 | | 0 | | 0 | | | | 0 | | 0 |
| 2021/22 Actual | | 0 | | 0 | | 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.

This quarter we have seen a number of project statuses move in a positive direction, from Red to Green, or from Amber to Green. This includes our work to develop Protection quality assurance processes as part of our CRMP action plan. Also as part of our CRMP action plan, our work to focus activities on Children and Young People through our road and water safety education programmes, Fire Cadets and FireSafe is back on track. As part of the People Strategy, we have made positive progress moving forward on our Equality, Diversity and Inclusion objectives. We have also completed the project to deliver a new tri-service station at Theale, which is reflected in the Strategic Asset Investment Framework Update.

**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](https://www.rbfrs.co.uk/your-service/our-performance/), which reflects the priorities and requirements of the [Fire and Rescue National Framework for England](https://www.gov.uk/government/publications/fire-and-rescue-national-framework-for-england--2).

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 | | 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 | | 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 | | 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 | | A | | A | |
| Develop a programme of follow up Safe and Well Visits to the most vulnerable. | R |  | R | | | A | | G | | G | |
| 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 | | A | | G | |
| Carry out targeted road safety activity, including for motorcyclists. | A |  | A | | | G | | G | | G | |
| Further develop local safety initiatives, campaigns and events to target risk at a local level and evaluate their effectiveness. | A |  | G | | | G | | G | | G | |
| Ensure a high standard of service through the quality assurance of our Prevention activities | New |  | A | | | A | | 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 | | G | | G | |
| Through our built environment programme, implement the learning from the phase one Grenfell Tower inquiry. | G  (revised) |  | G | | | G | | 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 | | G | | G | |
| Ensure a high standard of service through the quality assurance of our Protection activities | New |  | R | | | R | | R | | G | |
|  | | | | | | | | | | | |
| **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 | | 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 | | R | | A | |
| 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 | | R | | A | |
| Conduct a review of our Incident Command provision to ensure alignment to National Operational Guidance and best practice. | New |  | A | | | A | | G | | G | |
|  | | | | | | | | | | | |
| **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 | | 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 | | 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 | | G | | G | |
|  | | | | | | | | | | | |

**People Strategy**

The purpose of our [People Strategy 2018-2021](https://www.rbfrs.co.uk/your-service/about-us/) 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 | G | G |
| Expand on alternative ways of delivering learning and development through improved use of technology | A |  | A | | G | G | 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 | 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 | A | G |
| Develop and implement the Chairman’s Internship which will target young people from under-represented groups in Berkshire | NEW |  | G | | G | 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 | G | G |
| Deliver a framework for coaching and mentoring | A |  | A | | A | G | G |
|  | | | | | | | |
| **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 | G | G |
| Continue to develop the Fire Authority Member Development Programme | G |  | | G | G | G | G |
| Develop and deliver a programme of staff engagement to inform our People Strategy, policies, processes and improvements | G |  | | G | 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 | A | R |
| We will explore the options for use of digital resources for our Protection services | NS |  | | G | A | A | 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 | A | A |
| Deliver the requirements of the 2021/22 mental health action plan | G |  | | G | 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 | G | C |
| On Budget | G | G | G | G | C |
| Minor Capital Works Programme | On Track | G | G | G | G | G |
| On Budget | G | G | G | G | G |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Fleet and Equipment** | | | | | | |
|  |  | Status | | | | |
|  | Q4 20/21 | Q1 | Q2 | Q3 | Q4 |
| Fleet: Fire Appliances | On Track | G | G | G | C | C |
| On Budget | G | G | G | C | C |
| Fleet: Special Appliances | On Track | A | A | A | A | A |
| On Budget | G | G | G | G | G |
| Fleet: Aerial Ladder Platform | On Track | G | G | C | C | C |
| On Budget | G | G | C | C | C |
| Fleet: Other Ancillary Vehicles | On Track | G | G | G | G | G |
| On Budget | G | G | G | G | G |
| Equipment | On Track | G | G | G | G | G |
| On Budget | G | G | G | G | G |

| **ICT** | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | Status | | | | |
|  | Q4 20/21 | Q1 | Q2 | Q3 | Q4 |
| Hardware | On Track | G | G | G | A | A |
| On Budget | G | G | G | G | G |
| Software | On Track | G | G | G | G | G |
| On Budget | G | G | G | G | G |
| Services | On Track | G | G | G | G | A |
| On Budget | G | G | G | G | G |
| Networks | On Track | G | G | G | G | G |
| On Budget | G | G | G | G | G |
| Security Resilience | On Track | G | G | G | G | A |
| On Budget | G | G | G | G | A |
| ESMCP | On Track | G | G | G | G | A |
| On Budget | G | A | A | A | G |

**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. 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:** Good progress towards the goal of completing return visits on the 97 premises identified with fire safety issues during phase 1 continues. | n/a |  | G | G | G | G |
| **Interim Measures Premises:** Operational crews continue to perform monthly visits on HRRBs in Interim Measures. The HRRB team have performed a site visit on each of the 33 HRRB’s in interim Measures in order to provide assurance to RBFRS that Interim Measures remain sufficient to mitigate the risk. Visits to premises in interim measures continue with a 14 having been removed from IM following remediation. | n/a |  | G | G | 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 Four. To ensure the most up to date picture for risk, the updates include information about progress since the end of the quarter.

| **Key Risk: Management of Cyber Security (Risk: 629)** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **Risk Owner: Deputy Chief Executive** | | | | | |
|  | | **End of Q3 Risk Score** | **End of Q4 Risk Score** | **Direction of travel** | **Risk score as at May 22** |
| **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. | | 18 | 18 | ↑ | 21 |
| This risk, increased in risk score shortly after the end of Q4 2021/22. This risk captures the challenge of protecting the security of our IT systems.  The risk score has been increased to reflect the general increase in threat level due to external global factors, primarily associated with the conflict in Ukraine, which started in Q4 2021/22, and the potential for state sponsored attacks on states visibly supporting the Ukraine, such as the UK.  Current mitigations are focused on continuing education campaigns around Cyber Security for staff and regular checking of our IT systems. Annual IT Health Checks and Cyber Security Audits are undertaken by independent and accredited external actions and we ensure that any actions generated by these are expedited to minimise any risk to the organisation. | | | | | |
| **Current Mitigations** | **Progress on Mitigations** | | | | |
| 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. Most critical and high actions completed. Approach to mitigate remaining findings to be determined based on cost/benefit analysis. The importance of increased vigilance due to global factors is being reinforced via standard communications channels. Said global events and the resultant heightened threat level are the reason the risk has been revised up to 21 for the time being. | | | | |
| 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. The importance of increased vigilance due to global factors is being reinforced via standard communications channels. Said global events and the resultant heightened threat level are the reason the risk has been revised up to 21 for the time being. | | | | |
| 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. The importance of increased vigilance due to global factors is being reinforced via standard communications channels. Said global events and the resultant heightened threat level are the reason the risk has been revised up to 21 for the time being. | | | | |
| Carry out 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 along with global heightened threat levels and awareness is the reason for the risk current score increasing to 21 from 18. Expect the score to reduce as the action plan is worked through and global tensions ease. ICT continue to address areas for focus on ITHC action plan, the approach to mitigate remaining findings to be determined based on cost/benefit analysis. | | | | |
| Ensure actions plans arising from annual health check are expedited to minimise exposure | Current Status: Report received, analysis underway and action plan in progress. 61% of critical findings resolved, 31% high priority findings resolved. Progress being tracked at weekly ICT meetings. Approach to mitigate remaining findings to be determined based on cost/benefit analysis. The importance of increased vigilance due to global factors is being reinforced via standard communications channels. Said global events and the resultant heightened threat level are the reason the risk has been revised up to 21 for the time being. | | | | |
| Carrout Cyber Security Audits, to be delivered by an independent and accredited audit organisation to ensure exposure to RBFA and appropriate sub-committees | Current Status: 2022 Cyber Security audit to be carried out in Q4 2021/22 municipal year, tentatively scheduled with Auditors. Audit underway, findings expected imminently. Audit completed, awaiting report. The importance of increased vigilance due to global factors is being reinforced via standard communications channels. Said global events and the resultant heightened threat level are the reason the risk has been revised up to 21 for the time being. | | | | |

| **Key Risk: NOG Implementation Resourcing (Risk: 746)** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **Risk Owner: Area Manager Collaboration and Policy** | | | | | |
|  | | **End of Q3 Risk Score** | **End of Q4 Risk Score** | **Direction of travel** | **Risk score as at May 2022** |
| **Risk Description:** 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 | 12 | ↓ | 12 |
| This risk, alongside the National Operational Guidance Risk 669, have both reduced in risk score in early 2022. This Risk reduced in risk score in Q4 2021/22, whilst Risk 669 reduced in risk score shortly after the end of Q4 2021/22. These risks capture the challenges the service faces in aligning to National Operation Guidance.  The National Operational Guidance Project started in 2020 to fully adopt, implement and embed National Operational Guidance into RBFRS. After Phase 1 completion in January 2021, we moved into Phase 2 and 3 which would run concurrently. The risk score on these risks has reduce due to the progress of work in both the implementation and embedding phases. The project is due to finish on time and on budget.  Current mitigations are focused on implementing training to all operational staff on how to deliver the new Operational Learning Plan to ensure that National Operational Guidance is embedded, whilst also implementing a new template for learning outcomes. We will also be working with our Learning and Development team to ensure that Operational Training Programme is aligned to National Operational Guidance. | | | | | |
| **Current Mitigations** | **Progress on Mitigations** | | | | |
| R&Rs to review all Operational Assurance work and align to N.O.G & NOL best practice. | The Operational Assurance Project has started and has highlighted issues, actions and treatments. Actions have owners and work has started. Policies and guidance are being produced. New forms have been completed and published on Siren. 50% of new guidance is ready for stakeholder review. | | | | |
| All Operational staff to receive training on how to deliver the new Operational learning plan to ensure N.O.G is embedded into the service. | This has not started yet as policy is still being produced. | | | | |
| L&D to align all current learning outcomes to N.O.G using new Learning Outcomes template | L&D have designed the new template for learning outcomes. 2 new Learning Outcome documents have been published and incident command learning outcomes are due to be rolled out in Q2. | | | | |
| L&D to highlight gaps in current OTP and align to N.O.G | The assessment has been started on the known gaps in the OTP, a project plan has been put into place, with resources advertised to ensure full compliance to NOG. | | | | |

**Corporate Risk Register risks as at 7th June 2022**

**Strategic Risks**

| **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 | 21 | 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 | 21 | 12 |
| 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 increasing 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 | 17 | 10 |
| 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 is respect of delivery statutory duties and legislative responsibilities | 18 | 14 | 12 |
| 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 |
| 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 |
| 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 |
| 798 | Environmental/Sustainability | If RBFRS fails to develop, fund and implement an environmental and sustainability plan, then we can expect an increase in financial pressure with rising energy costs, and RBFRS' reputation as a public sector organisation to be negatively impacted through being out of alignment to wider societal progress towards creating a more sustainable future which will significantly impact our ability to deliver our statutory duties and strategic objectives. | 23 | 21 | 6 |
| 831 | Service Delivery Policy | If we do not develop, deliver and maintain coherent service delivery policy and guidance, which is likely given existing legacy arrangements, we can expect to have contradictory, duplicated, erroneous or out of date policy which is significant in respect of supporting staff to provide a safe and effective Response service, aligned to our statutory duties. | 16 | 16 | 6 |
| 833 | Fire Investigation - Collaboration | If we are unable to provide the support and resource required to deliver a multi-service approach to ISO 17020 accreditation, which is becoming increasingly likely due escalating costs and increasing complexity and demand, then we can expect to encounter issues in supporting criminal prosecutions which is significant in respect of public safety and the reputation of RBFRS | 21 | 18 | 12 |

**Service Plan Risks**

| **Risk ID** | **Risk Short Name** | **Risk Description** | **Inherent Score** | **Current Score** | **Treated Score** |
| --- | --- | --- | --- | --- | --- |
| 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 | 21 | 16 |
| 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 |
| 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 |
| 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, then 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 |
| 827 | Driver Training | If we fail to recruit Driving Instructors or new instructors are insufficiently qualified and require significant development, which is increasingly likely given the requirements of the professional standard and the national shortage of HGV drivers, our ability to train and develop staff to drive blue light emergency vehicles will be compromised and we we can expect to see reduced operational capability and an increased demand on existing drivers presenting welfare issues leading to a reduction in our service provision and reputational risk. | 21 | 18 | 12 |

**Project Risks**

| **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 | 15 |
| 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 |

**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 4, 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. | 30/04/2022 | Low | **C** | **Closed** |
| **Progress:** The evolving pressure on pensions resulting from the McCloud/Seargeant 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. Revised date provided of 30/4/22 | | | | | |
| **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. | 28/02/2022 | Low | **C** | **Closed** |
| **Progress:** LMS course for Risk Management has gone live and has been targeted advertised to middle managers and SLT. A list of the staff included in this target advertising has been compiled and they have been given a deadline of the end of June 2022 to have completed this training. Data & Performance are able to run reports off the LMS system and will chase anyone who doesn't meet this deadline for completion. | | | | | |
| **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. | 28/02/2022 | Low | **C** | **Closed** |
| **Progress:** Internal PDR completed, with findings fed back into the training materials being developed for staff and managers. PDR form has been revised and will be published in line with the training materials prior to the commencement of the next round of PDRs (commencing 1 April 2022) | | | | | |
| **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 | **C** | **Closed** |
| **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. | | | | | |
| **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 | **C** | **Closed** |
| **Progress:** Service Delivery Area Managers 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 | **C** | **Closed** |
| **Progress:** New terms of reference / ways of working formed for RSG. RSG now reformed as OLAB, chaired by Area Manager Collaboration and Policy | | | | | |
| **Performance Management Hubs**  05/10/2021 | 2021: PMH: 07  The RSG terms of reference should be formally reviewed. | 31/12/2021 | Low | **C** | **Closed** |
| **Progress:** New terms of reference / ways of working formed for RSG. RSG now reformed as OLAB, chaired by Area Manager Collaboration and Policy | | | | | |
| **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 | **C** | **Closed** |
| **Progress:** Refocus on station plans being more community focused, with non-quantitative measures. Discussions on re-branding Station Plans to Community Plans in 2022/23 will influence/create local community measures | | | | | |
| **Firefighter Pension Administration**  08/03/2022 | 2021: FPA:1  WYPF will ensure the review of the Retirement Quote and Retirement Actual checklist by an independent checker is documented on UPM. WYPF will document the pre-paper and reviewer | 17/12/2021 | Low | **C** | **Closed** |
| **Progress:** this action is owned by WYPF and now complete | | | | | |
| **Firefighter Pension Administration**  08/03/2022 | 2021: FPA:2  WYPF will remind staff to close the process in UPM once overpayments have been recovered. | 17/12/2021 | Low | **C** | **Closed** |
| **Progress:** this action is owned by WYPF and is now complete | | | | | |
| **Firefighter Pension Administration**  08/03/2022 | 2021: FPA:3  We will develop written succession plans for the Royal Berkshire Fire and Rescue Service once the changes to the workforce structure have been implemented (provisionally in Q4 2020/21). | 31/03/2022 | Low | **C** | **Closed** |
| **Progress:** Revised completion date as above, succession plan has been provided by WYPF. | | | | | |
| **Payroll Provider - DataPlan**  08/03/2022 | 2021: PP: 1  Dataplan will include version control on the Operational Guide to Royal Berkshire Fire Authority Payroll | 24/01/2022 | Low | **C** | **Closed** |
| **Progress:** this action is owned by WYPF and is now complete | | | | | |

**HMICFRS ACTION PLAN**

The HMICFRS report for RBFRS 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 | A | A |
| Prevention quality assurance | Collaboration and Policy Service Plan | | A |  | A | A | A | A |
| Protection quality assurance | Collaboration and Policy Service Plan | | A |  | R | R | R | A |
| Addressing the burden of false alarms | Collaboration and Policy Service Plan | | A |  | A | A | G | G |
| Keeping the public informed during ongoing incidents | Corporate Services Service Plan | | G |  | G | G | G | G |
| Effective system to use for learning and debriefs | Collaboration and Policy Service Plan | | G |  | A | A | 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 | 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 | G | G |
| Effective use of competence recording system | | HR & L&D Service plan | G |  | G | G | G | G |
| Effective grievance procedures in place | | HR & L&D Service plan | G |  | G | G | G | C |
| Staff are confident in using feedback mechanisms | | Corporate Services Service plan | G |  | G | G | G | G |
| Process to identify, develop and support high-potential staff and aspiring leaders | | HR & L&D Service plan | A |  | A | A | A | A |

**Fire Standard Implementation Tracking**

Updated 6th May 2022

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | **Fire Standard** | **Owner** | **FS consultation** | **FS publication date** | **Gap analysis** | **SLT Review** | **Action Plan in progress** | **Commentary** |
| Standards in progress | 1 | Emergency Response Driving | Becci Jefferies | **C** | **Feb-21** | **C** | **C** | **A** | Action plan in place and being worked to, however due to lack of staff risk of progress in all areas and unknown impact on qualification status of any new staff successfully recruited. Risk on corporate register. |
| 2 | Operational Response - Preparedness | Doug Buchanan | **C** | **Feb-21** | **C** | **C** | **A** | Action plan in place and being worked to. Review across Ops Competence, learning and preparedness needed to establish priorities. Majority of actions covered in competence and learning fire standards. Work still required to confirm where actions not covered and progress. |
| 3 | Operational Response - Competence | Becci Jefferies | **C** | **Feb-21** | **C** | **C** | **G =** | Action plan in place and being worked to. Review across Ops Competence, learning and preparedness underway, further meetings scheduled to prioritise and co-ordinate actions. |
| 4 | Operational Response - Learning | Jim Powell | **C** | **Feb-21** | **C** | **C** | **G =** | Action plan in place and being worked to. Review across Ops Competence, learning and preparedness underway, further meetings scheduled to prioritise and co-ordinate actions. |
| 5 | Code of Ethics | Nikki Richards | **C** | **May-21** | **C** | **C** | **G =** | Action plan in place and being worked to |
| 6 | Community Risk Management Planning | Katie Mills | **C** | **May-21** | **C** | **C** | **NS** | Gap analysis completed and awaiting review. |
| 7 | Fire Protection | Trig Thomas | **C** | **Sep-21** | **A =** | **NS** | **NS** | Gap analysis being completed and aiming for submission to May SLT. |
| 8 | Prevention | Trig Thomas | **C** | **Jul-21** | **A =** | **NS** | **NS** | Gap analysis being completed and aiming for submission to April SLT. |
| 9 | Safeguarding | Jim Powell | **C** | **Jan-22** | **C** | **C** | **G =** | Gap analysis prepared and being checked against the published standard, went to March 30th SLT review. |
| 10 | Fire Investigation | Trig Thomas | **C** | **Apr-22** | **G =** | **NS** | **NS** | Fire standard published and gap anlaysis template reviewed with Jess. Review underway. |
| 11 | Emergency Planning and Resilience | Jim Powell | **C** | Mar-22 | **NS** | **NS** | **NS** | FSB consultation opened 12 Jan 2022. Response submitted |
|  | 12 | Data requirements and management | Katie Mills | **G =** | May-22 | **NS** | **NS** | **NS** | Consultation now opened |
|  |  |  |  |  |  |  |  |  |  |
| Not published | 13 | Leadership: Well led organisation |  |  |  |  |  |  |  |
| 14 | Leadership: Developing Leaders |  |  |  |  |  |  |  |
| 15 | Workforce Management | Becci Jefferies |  | Aug-22 |  |  |  |  |

**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 Q4 |
| Previous Year (19/20) | 98.2% | 97.7% | 99.2% | | 97.6% | 98.4% |
| Previous Year (20/21) | 98.4% | 98.3% | 99.1% | | 98.9% | 98.7% |
| Target | 97% | 97% | 97% | | 97% | 97% |
| 2021/22 Actual | 98.8% | 98.4% | 99.1% | | 97.8% | 98.6%↓ |
|  | | | | | | |
| **Percentage of occasions where time to mobilise is within 90 seconds** | | | | **2021/22 Target: 80%** | | |
|  | Q1 | Q2 | Q3 | | Q4 | Year to Q4 |
| Previous Year (19/20) | 72% | 73.5% | 74.5% | | 72.1% | 73.1% |
| Previous Year (20/21) | 71.6% | 70.8% | 68.1% | | 70.9% | 70.4% |
| Target | 80% | 80% | 80% | | 80% | 80% |
| 2021/22 Actual | 70.6% | 72.7% | 74.4% | | 67.6% | 71.4%↑ |
|  | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Percentage of occasions where wholetime duty system crew turnout time is under 90 seconds** | | | | | | | | **2021/22 Target: 90%** | | | | |
|  | | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 |
| Previous Year (19/20) | | 91.9% | | 93.4% | | 94.2% | | | | 94.5% | | 93.4% |
| Previous Year (20/21) | | 95.9% | | 95.4% | | 95.3% | | | | 94.4% | | 95.3% |
| Target | | 90% | | 90% | | 90% | | | | 90% | | 90% |
| 2021/22 Actual | | 94.5% | | 94.6% | | 93.6% | | | | 94.3% | | 94.2%↓ |
|  | | | | | | | | | | | | |
| **Percentage of occasions where On Call crews turnout is within the agreed timeframes** | | | | | | | | **2021/22 Target: 90%** | | | | |
|  | | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 |
| Previous Year (19/20) | | 69.4% | | 74.1% | | 74.2% | | | | 81.1% | | 75.1% |
| Previous Year (20/21) | | 94.2% | | 86.3% | | 91.4% | | | | 86.4% | | 89.5% |
| Target | | 90% | | 90% | | 90% | | | | 90% | | 90% |
| 2021/22 Actual | | 91.5% | | 91.9% | | 81.1% | | | | 85.9% | | 88.2%↓ |
|  | | | | | | | | | | | | |
| **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 Q4 |
| Previous Year (19/20) | | 63.0% | | 61.6% | | 62.8% | | | | 73.3% | | 65.5% |
| Previous Year (20/21) | | 62.7% | | 56.2% | | 65.9% | | | | 57.5% | | 60.5% |
| Target | | -- | | -- | | -- | | | | -- | | -- |
| 2021/22 Actual | | 64.9% | | 60.5 % | | 62.5% | | | | 46.5% | | 59.0%↓ |
|  | | | | | | |  | | | | | |
| **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 Q4 | |
| Previous Year (19/20) | 55.3% | | 54.0% | | 52.3% | | | | 58.3% | | 54.5% | |
| Previous Year (20/21) | 55.6% | | 52.7% | | 63.6% | | | | 55.3% | | 56.6% | |
| Target | -- | | -- | | -- | | | | -- | | -- | |
| 2021/22 Actual | 69.8% | | 42.3% | | 37.8% | | | | 40.4% | | 48.2%↓ | |
|  | | | | | | | | | | | | |
| **Percentage of Safeguarding Referrals made to local authorities within 24 hours** | | | | | | | **2021/22 Target: 100%** | | | | | |
|  | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 | |
| 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% | | | | 100% | | 100%↔ | |
|  | | | | | | | | | | | | |
| **Number of Formal and Informal Fire Safety activities** | | | | | | | **2021/22 Target: Monitor** | | | | | |
|  | Q1 | | Q2 | | Q3 | | | | Q4 | | Year to Q4 | |
| Previous Year (19/20) | NA | | NA | | NA | | | | NA | | NA | |
| Previous Year (20/21) | 4 | | 58 | | 88 | | | | 19 | | 169 | |
| Target | -- | | -- | | -- | | | | -- | | -- | |
| 2021/22 Actual | 99 | | 94 | | 98 | | | | 77 | | 368↑ | |
|  | | | | | | | | | | | | |

**Equality, Diversity and Inclusion Data Summary**

The overall percentage of female staff in post has remained the same compared with last quarter, while the percentage of staff from an ethnic minority background has increased by 0.2 percentage points. The number of staff with a disability decreased by one, resulting from two leavers and one employee joining on a dual contract. There are also some changes to note across the organisational age profile – whilst most categories remain broadly comparable with changes in totals of five or less, if at all, it can be noted that there an increase of 16 in the 25 and under category.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Measure** | | **Q1**  **Actual** | **Q2**  **Actual** | **Q3**  **Actual** | **Q4**  **Actual** | **2021/22 YTD** |
| **Q4 20/21** | **Authorised establishment at the end of Q4 2021/22 (Number of authorised posts)** | |
| **STAFF IN POST** | Wholetime | 360 | 364 | 366 | 375 | 375 | 354 | 362 | |
| Retained | 71 | 68 | 59 | 62 | 62 | 73 | 78 | |
| Control | 43 | 42 | 40 | 42 | 42 | 43 | 39 | |
| Green Book | 184 | 175 | 172 | 171 | 171 | 174 | 168 | |
| **Total Number of Staff in Post** | **658** | **649** | **637** | **650** | **650** | **644** | **647** | |
|  | | Q1 | Q2 | Q3 | Q4 | **2021/22 YTD** | **Q4 20/21** |  | |
| **STAFF TURNOVER** | Wholetime | 7 | 8 | 10 | 12 | 37 | 26 |
| Retained | 1 | 4 | 5 | 3 | 13 | 18 |
| Control | 0 | 1 | 2 | 4 | 7 | 3 |
| Green Book | 4 | 16 | 9 | 10 | 39 | 17 |
| Total Number of Leavers (Heads) | 12 | 29 | 26 | 29 | 96 | 64 |
| Staff in Post (SIP) | 658 | 649 | 637 | 650 | 649 | 649 |
| **Percentage of Leavers vs. SIP** | **1.82%** | **4.47%** | **4.08%** | **4.46%** | **14.79%** | 9.86% |
|  | | Q1 | Q2 | Q3 | Q4 | **2021/22 YTD** | **Target** | **YTD Q4 20/21** |
| **FEMALE STAFF** | Wholetime | 4.2% | 5.8% | 5.5% | 5.3% | 5.3% | 4% | 4.5% |
| Retained | 15.5% | 16.2% | 16.9% | 16.1% | 16.1% | 16.4% |
| Control | 67.4% | 69% | 70.0% | 73.8% | 73.8% | 67.4% |
| Green Book | 57.6% | 57.1% | 56.4% | 56.7% | 56.7% | 57.5% |
| **Total**  **Total** | **24.5%** | **24.8%** | **24.3%** | **24.3%** | **24.3%** | **24%** |
|  | | Q1 | Q2 | Q3 | Q4 | **2021/22 YTD** | **Target** | **YTD Q4 20/21** |
| **ETHNICITY FIGURES** | Wholetime | 5.0% | 4.7% | 4.1% | 4.3% | 4.3% | 5% | 5.4% |
| Retained | 2.8% | 1.5% | 1.7% | 3.2% | 3.2% | 4.1% |
| Control | 4.7% | 4.8% | 5.0% | 4.8% | 4.8% | 4.7% |
| Green Book | 13.6% | 13.7% | 12.8% | 12.9% | 12.9% | 13.2% |
| **Total** | **7.1%** | **6.8%** | **6.3%** | **6.5%** | **6.5%** | **7.3%** |

|  | **Measure** | **Q1**  **Actual** | **Q2**  **Actual** | **Q3**  **Actual** | **Q4**  **Actual** | **2021/22 YTD** | **Target** | **2020/21 YTD** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **STAFF AGE PROFILE** | 25 and Under | 39 | 34 | 33 | 49 | 49 | 38 | 36 |
| 26-35 | 174 | 178 | 168 | 168 | 168 | 162 | 168 |
| 36-45 | 213 | 209 | 206 | 201 | 201 | 209 | 215 |
| 46-55 | 188 | 181 | 177 | 182 | 182 | 191 | 184 |
| 56-65 | 39 | 42 | 48 | 44 | 44 | 33 | 37 |
| 66 and Over | 5 | 5 | 5 | 6 | 6 | 1 | 4 |
| **Total** | **658** | **649** | **637** | **650** | **650** | **634** | **644** |

**Staff Ethnicity Profile**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Ethnicity** | **Wholetime** | **Retained** | **Control** | **Green Book** | **All Staff** |
| White British | 359 | 60 | 39 | 146 | 604 |
| Other Ethnicity | 16 | 2 | 2 | 22 | 42 |
| Unknown | 0 | 0 | 1 | 3 | 4 |
| **Total** | 375 | 62 | 42 | 171 | 650 |

Number of Staff and their Ethnicity 

**Staff Age Profile**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Age Group** | **Wholetime** | **Retained** | **Control** | **Green Book** | **Grand Total** |
| 25 and Under | 21 | 7 | 8 | 13 | 49 |
| 26 - 35 | 93 | 24 | 14 | 37 | 168 |
| 36 - 45 | 136 | 18 | 8 | 39 | 201 |
| 46 - 55 | 113 | 9 | 11 | 49 | 182 |
| 56 - 65 | 12 | 4 | 1 | 27 | 44 |
| 66 and Over | 0 | 0 | 0 | 6 | 6 |
| **Grand Total** | **375** | **62** | **42** | **171** | **650** |

**Staff Gender Profile**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Gender** | **Wholetime** | **Retained** | **Control** | **Green Book** | **All Staff** |
| Female | 20 | 10 | 31 | 97 | 158 |
| Male | 355 | 52 | 11 | 74 | 492 |
| Other | 0 | 0 | 0 | 0 | 0 |
| **Total** | 375 | 62 | 42 | 171 | 650 |

# 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:   * 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-cal 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](http://fireprofessionalframework.co.uk/strategic-areas/operational-competence/), 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(*Reporting of Injuries Diseases and Dangerours Occurrences Regulations*) 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). |