



Quarter 1 2017/18



Strategic Performance Report Q1 2017/18

Introduction







Contents

Key to Icons and Colours	3
Introduction.....	3
Quadrant One Key Highlights: Service Provision	4
Quadrant Two Key Highlights: Corporate Health	5
Quadrant Three Key Highlights: Priority Programmes	6
Quadrant Four Key Highlights: Risk.....	7
Quadrant One Appendices	8
Appendix A: Service Provision Performance	8
Appendix B: Service Measures Performance	15
Appendix C: Establishment Planned vs. Actual at RDS Stations	17
Appendix D: RDS Appliance Availability by Station	18
Appendix E: Service Plans.....	19
Appendix F: Update on Progress of the ICT Strategy Year Two.....	20
Appendix G: Update on Progress of the Fleet Strategy	21
Appendix H: Service Provision Measure Definitions	22
Quadrant Two Appendices	24
Appendix I: Corporate Health Performance	24
Appendix J: Financial Position as at June 2016-17 (Revenue).....	29
Appendix K: Revenue Financial Position Explanatory Notes	29
Appendix L: Financial Position as at June 2017 (Capital)	30
Appendix M: Transition Bids Spend Summary as of 10 July 2017	32
Appendix N: Closed Transition Bids Spend Summary Q4 2016/17 (Rolling)	37
Appendix O: Procurement Plan as of 28 July 2017	40
Appendix P: Forthcoming Contract Procurements.....	42
Appendix Q: Completed Contract Procurements.....	45
Appendix R: Human Resources Performance	46
Appendix S: HR Supporting Charts	49
Appendix T: Information Governance Report (April-June 2017)	54
Appendix U: Corporate Health Measure Definitions	55
Quadrant Three Appendices.....	56
Appendix V: Priority Programmes Integrated Risk Management Plan (IRMP)	56
Appendix W: Closed IRMP Projects	58
Appendix X: Key Programme Risks	59
Appendix Y: Organisational Development Programme.....	60
Quadrant Four Appendices.....	61
Appendix Z: Corporate Risk Register	61
Appendix AA: Accident Investigations	76
Appendix BB: Audit Recommendations.....	77

This version of the report was updated on 19 September 2017

Strategic Performance Report Q1 2017/18

Introduction

 <p>We will ensure appropriate fire safety standards in buildings</p>	 <p>We will seek opportunities to contribute to a broader safety, health and wellbeing agenda</p>	 <p>We will educate people on how to prevent fires and other emergencies, and what to do when they happen</p>	 <p>We will ensure that Royal Berkshire Fire and Rescue Service provides good value for money</p>	 <p>We will ensure a swift and effective response when called to emergencies</p>	 <p>We will work with Central Government to ensure a fair deal for Royal Berkshire</p>
--	--	--	--	---	---

Key to Icons and Colours

Target / last year comparison exceeded by more than 10%	
Target / last year comparison met or exceeded by up to 10%	
Target / last year comparison missed by up to 10%	
Target / last year comparison missed by more than 10%	
NA or data accuracy issues affect confidence in reporting	
Improvement in performance compared to either previous quarter or same time period from last year	↑
Maintenance of performance compared to either previous quarter or same time period from last year	↓
Decline in performance compared to either previous quarter or same time period from last year	
There is additional information available in the Appendices	★

Introduction

This Strategic Performance Board Quarterly Report retrospectively presents information from the Performance Management Framework and Corporate Measures and Targets for 2017-18, with the exception of Corporate Risks, which are current at the time of publishing. The purpose of RBFRS' Performance Management Framework is to provide structure and governance that enables us to measure, monitor and manage outputs and outcomes in a timely manner; allowing us to respond and make informed decisions to ensure that our statutory obligations and the Fire Authority's Strategic Commitments are successfully delivered.

This report contains performance across four Quadrants:

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

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

This report has been reviewed by the Strategic Performance Board chaired by DCFO Steve Foye to ensure issues and corrective actions are discussed and owned by Heads of Service. This report has also been reviewed and discussed at Senior Leadership Team (SLT) to ensure any strategic issues are addressed. Summaries for each Quadrant can be found at the beginning of this report, and supporting documentation can be found in the appendices.

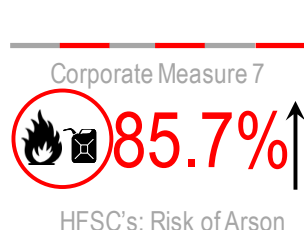
Quadrant One Key Highlights: Service Provision

Five residents were injured in dwelling fires in Q1; a small improvement on the same time period last year (six) and within the target maximum of seven (★A.2). We have undertaken 269 / 2500 Home Fire Safety Checks so far this year that are directed at groups known to be at greater risk of being injured in an accidental dwelling fire, alongside assessing those at risk from living in a high rise residence (★A.5). As we transition our prevention management arrangements to localised area hubs, our Community Safety Advisors will form partnerships to generate targeted initiatives, based on local risk.



We have a statutory obligation to report safeguarding issues to the Local Authority, and our new corporate target for 2017/18 reflects this (★A.3). All of the 47 children and vulnerable adults we identified through our robust procedures as facing safeguarding issues this quarter were reported within 24 hours. Strict adherence to our policy by the Duty Officers is having a positive impact on this requirement.

Our new Response Standard is to arrive at a minimum of 75% of emergency incidents within 10 minutes of the call being answered. Whilst the target is not being met currently, performance is up when compared to this time period last year, from 66.5% (★A.14) and the individual service measures that make up this target (call handling, mobilising and turning out) have also all improved compared to the first quarter of 2016/17 (★B.3-9).



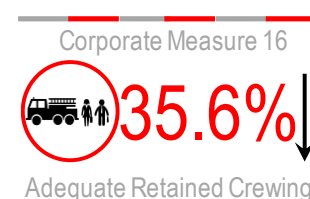
Category One Home Fire Safety Checks, referred from Thames Valley Police for those residents at increased risk of arson, should be carried out within three working days. We achieved 85.7% of those checks within these timescales (6/7), which although is below target (★A.7), is recognised as a significant improvement compared to previous reporting periods. One resident was unavailable during the three day period. This process is to be administered through the Duty Officer and operational crews going forward, facilitating an immediate response to our Police colleagues.

Completed Commercial Audits did not meet the target of 350, at 233 (★A.8 +.9). However, there are three positive points to take from this: first, following the Grenfell Tower fire, the audit team's focus has been to ensure that all high rise residences are identified and audited. Secondly, whilst inspection numbers are currently below target and lower than the same time period last year, the increase in completed unsatisfactory audits shows that we are targeting the correct properties, to remedy and/or prosecute. Thirdly, there are a further 144 completed, but not yet 'closed' audits in the system.



Our ongoing goal is to achieve zero fire deaths; however there have been two confirmed, and one unconfirmed dwelling fire death in Q1, all within the high risk group (★A.1). This target is a considerable challenge because of the complexities of identifying and working with our most vulnerable residents. We will continue to identify the most at risk residents through the Adult Referral Programme (ARP) and Home Fire Safety Checks (HFSC), to reduce their vulnerability and future likelihood of dying in a fire (★A.4).

The 50% target for availability of retained appliances was not achieved this quarter, at 35.6%; down from 45.9% in Q1 2016 (★A.16, C & D). Projects are being run in conjunction with HR in order to improve recruitment, assessment pass rate and retention of retained firefighters, as a priority for 2017-18, and availability of RDS crews will then increase as a result of this (★V).



Quadrant Two Key Highlights: Corporate Health



Fitness levels amongst our eligible staff have improved both compared to last quarter, and last year as a whole, at 99.8% (★I.2). Two members of operational staff are not currently at the required fitness levels; however one is being supported through ongoing training and testing, whilst the other is subject to reasonable adjustments under the Equalities Act.

Spend Compliance has improved significantly over the previous reporting periods and we are continuing to increase competitive and collaborative procurement processes wherever required. We have exceeded our target of 70% of our spend being subject to competition, at 88.35% in Q1, and whilst we are just under our 100% compliant spend target (99.4%), early identification and resolution to non-complaint spend is in place, with it being subject to competition during Q2 (★I.6 & 7, O, P & Q).



Capital spend against budget continues to remain on track, with no overspend in Q1. The two most significant capital budgets are allocated to the Theale Fire Station build at £7.2m, due for completion in Q3 2019/20, and the procurement of new fire appliances by Q4 2019/20, with a budget of £2.9m (★L). A fundamental piece of work is currently being carried out to realign revenue budgets in relation to the Service Delivery restructure. A high level report will be presented to Management Committee

in November and Audit & Governance Committee in December in relation to the Q2 revenue position and detailed reporting based on the new structure will commence in Q3 (★J & K).

The Information Governance team supports the Freedom of Information (FOI) Act requests process, ensuring that our information is disseminated correctly and in a timely manner. Whilst no requests have been referred to the Information Commissioner in Q1, a request for an Internal Review was undertaken and upheld, offering assurance to RBFRS that its information governance procedures are correct and proportionate (★I.8). Since the Grenfell Tower Incident on 14 June, the number of FOI requests has increased, with six of the 11 requests in June being related to the incident (★T).



The transition spend summary (★M) provides an update on spend and associated delivery. Of note is the Apprenticeship Project, which is looking at the viability of RBFRS supporting an apprenticeship scheme going forwards, and key courses such as Coaching and Mentoring are now taking place, with the remainder of the bids largely for temporary personnel resources to support delivery of Vision 2019. Benenden Healthcare is resourced through the transition funding to provide

discretionary private healthcare to staff, in order to have a positive impact on staff sickness levels (★I.1, R & S).

There has been a downturn in performance against our sickness targets since last quarter, rising from 3.04% to 4.59% (★I.1). The most significant cause for this increase is longer term sick leave, specifically related to mental health and muscular skeletal problems (★R & S). The Movement Specialist provides a movement screen and/or structural integration sessions to individuals where appropriate, although for some cases it is not appropriate for the Movement Specialist to be involved due to nature of the injury or the treatment being received by individuals. A dedicated Mental Health Adviser post has also been advertised and will be employed for a fixed term with the specific focus of furthering mental health supports in RBFRS in conjunction with the health, safety and wellbeing action plan. This individual, once appointed, will focus on the provision of awareness training, health promotion and mental health initiatives. The Occupational Health provider has indicated that the number of mental health cases is low compared to other clients, and much of the downturn in performance is related to sick leave that was not preventable.



Quadrant Three Key Highlights: Priority Programmes

RBFRS has historically faced difficulties in recruiting to and retaining Retained Firefighters, which has a detrimental impact on Retained crew availability (★A.16, C, D & Z.419). A project to review training, assessments and turnover of RDS staff is currently under way under IRMP (Integrated Risk Management Programme), with a planned outcome to be a more focussed, and supported recruitment process thereafter (★V). Demographic and Lifestyle software, as well as a focussed and empirical approach to getting local businesses on board will assist in increasing our RDS crewing and availability going forward.

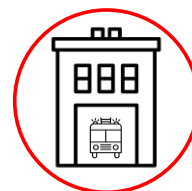


The Organisational Development Programme (ODP) assists RBFRS to develop a workforce that continuously professionalises, supports and nurtures its staff, including the recruitment in May of an Apprenticeship Scheme Co-ordinator, and an ongoing assessment of our performance against the Investors In People (IIP) criteria, resulting in the development of a list of priorities to be achieved in the forthcoming months. The Leadership Development Programme for Middle Managers under (ODP) continues to be developed and evaluated, with the pilot scheme held in early 2017 now evaluated and a proposal and Project Initiation Document being prepared for forthcoming approval over the summer period (★Y).



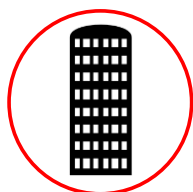
The Emergency Services Mobile Communications Programme (ESMCP) covers a wide remit of deliverables (IRMP), and dominates the Priority Programme Risk Register because of the nature of the programme. The key risks cover the risk of high costs and lack of ESN capacity, and the cost of the Programme to RBFRS across its lifetime (★V, X & Z.418 & 425). 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, which could significantly impact on the effectiveness of our operational mobilisation and response.

The availability and locations from which our Whole Time and Retained fire crews operate are key in delivering the highest possible service for the residents of Berkshire, whilst simultaneously delivering Best Value within our budgets. Over the next few years, the look and locations of the fire stations in Berkshire will change and adapt to ensure that we continue to do so. The Service Redesign Project (IRMP) is on track to be delivered within the required timeframes (★V), and a recent consultation on station closures was concluded with 1050 responses captured, coded and then analysed for a report putting forward proposals that were recently approved by the Fire Authority.



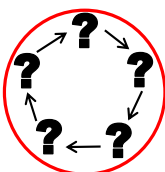
The Hungerford Station Refurbishment Project (IRMP) was completed and reopened on time, with the Retained Crew returning to its Station from their temporary Station location in late June 2017 (★V). An Open Day to mark the reopening took place on the 8 July, with a snagging taking place thereafter across July. The Theale Fire Station Project (IRMP) is underway, with a site investigation and end user/key stakeholder workshops held to refine design and layout. There is some slippage on this project's RAG status due to the delays outside of the control of RBFRS. The next steps of the project will be to complete the negotiations for the site, and if successful, review the outcome of the planning application and complete a review of the remit of the Dee Road site.

Quadrant Four Key Highlights: Risk



Following on from the Grenfell Tower fire in London, RBFRS has ensured that the risks associated with flammable buildings in Royal Berkshire are visible and prioritised on our Corporate Risk Register (★Z.408), with appropriate treatments around identifying and auditing the relevant buildings, and capturing the flammability test results via a dedicated Operational Support Room (OSR), to shape our next steps as a Fire Service. Providing reassurance to both the public and Fire Authority, and taking steps to prevent incidents of this nature are of paramount local and national importance and the impact of the Grenfell fire can be seen across our organisation, affecting everything from Home Fire Safety Checks (★A.4 & .5) to the numbers of completed staff appraisals (★I.3) where resources have been diverted to the OSR.

The challenge of managing a fast and effective response as an emergency service whilst ensuring the safety of our firefighters is a balance that continues to present itself as high-risk on our register (★Z.417). Whilst there have been no incident-related deaths of firefighters nationally since 2013, there is an ongoing emphasis on the importance of delivering up to date and effective policies and training around firefighter safety to reduce this risk in the future, as well as to continue driving down incidents of injury amongst our crews (★I.5 & AA). The reporting of accident investigation recommendations is also being reviewed currently, and this information has been presented in a new and more meaningful format from Q2 onwards.



We can expect to see a serious impact on the Fire Authority's Medium Term Financial Plan with the current four year financial settlement, future funding uncertainty, the volatility of aspects of local funding and the financial impacts of new and emerging burdens, all as a result of the Government's programme of deficit reduction. This may result in a failure of the Authority to meet its statutory duty to balance the budget and its ability to deliver the Vision (★Z.420). Additionally, if collaboration, partnership working and shared service opportunities are not considered, developed and embedded (which may become increasingly likely with the complexity and volatility in the current political and financial landscape), then we can expect impacts on the effectiveness of our service provision and on our financial position which would then affect the delivery of our legal duties and the Authority's strategic objectives (★Z.410).

The availability of our crews and appliances, from well located and modernised premises, is a vital part of our vision to place stations at the heart of communities, and there are two key risks of on the Corporate Risk Register that capture this: Crew Availability (★Z.419) and the Capital Investment Strategy. (★Z.233). The Crew Availability treatments focus on achieving and maintaining higher levels of RDS availability, with proactive, targeted recruitment campaigns, flexible approaches to training and a remittance review (★V). The Capital Investments Strategy has appropriate treatment plans in place to ensure that our fire stations are suitable for a range of community based activities and located in optimum positions to ensure we can achieve our response standard (★A.14 & V).



We can expect to see more payroll issues arising if the provider of the service (Dataplan) fails to provide payroll services in line with the contract standard and work is not accurate, or they determine they are no longer able to fulfil the contract which is becoming increasingly more likely given there appears to be insufficient resilience in their provision and a reliance on RBFRS checking the accuracy of their work then with incorrect payments, impacting potentially on the accuracy of pension records, a failure to comply with legislative requirements, incorrect information to inform budget monitoring, the potential need to source another payroll provider and an increased work demand on RBFRS HR and Finance staff which are significant in respect to our financial management, our reputation with internal staff and the effectiveness and efficiency of HR and Finance departments delivering their wider services (★Z.364).



Quadrant One Appendices

Appendix A: Service Provision Performance

★ See Appendix H for Definitions

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Dwelling Fire Deaths and Safeguarding											
1	Number of Fire Deaths in Accidental Dwelling fires	0	2				2	0	0	0	
		<p>(Source: Scorecard Corporate Measures (P&P) / IRS9.06a)</p> <p>In the 15 months preceding this quarter, there were no accidental dwelling fire deaths in Berkshire. In our previous commentary, we have stated that a small variance in the figures is, of course, very significant and our performance can appear to change rapidly. In the previous five years, there have been 20 fire deaths in Berkshire, with an average therefore of four deaths per year; a direct reflection of the national picture (in accordance with Home Office figures) and without significant pattern or variation over that time period.</p> <p>There have been two confirmed accidental dwelling fire deaths this quarter. These have been the subject of full fire investigations carried out by RBFRS and Thames Valley Police. This has prompted a significant amount of work to review our prevention arrangements and to understand the circumstances that led to the deaths of the individuals. Both of the individuals met the key criteria identified through our IRMP (Integrated Risk Management Programme) research. We must also advise of a possible third accidental fire death currently under medical investigation, which may provide a change in our Q1 period return in future reports. Our IRMP prevention research highlighted two key target groups and in agreement with the Fire Authority, we target our fire prevention work in these two areas (★A.4 & 5). One of these groups concerns those who are most vulnerable to dying in the event of a fire in Berkshire. Our aim is zero fire deaths and we realise the only way we can achieve that is through working with other agencies. Most individuals who die as a result of a dwelling fire are known to other agencies. We need to share data with those agencies and then to carry out ‘Safe and Well’ visits where our staff visit these people in their homes, provide fire prevention advice and recommend the use or installation of additional fire safety measures and equipment. This might involve cooker shut off devices, water misting systems or fire sprinkler systems. The fitting of these additional items will come at a financial cost. RBFRS has funded some of these on a pilot basis but will need others responsible for care packages to meet the costs for the vast majority of these systems. RBFRS has commissioned an external peer review of our prevention activities surrounding one of the two fire deaths to see whether lessons can be learned. We have introduced an immediate action plan to revisit referrals made over the past months where vulnerable residents have not taken our offer of a Home Fire Safety Check. This has led to Prevention and operational staff visiting 439 properties across the county. We are developing partnership approaches with social service colleagues seeking a multi agency approach to engage vulnerable residents where consent for our offer of assistance has not received a response. Our staff will make further visits to these addresses during October to ensure we are doing everything possible to engage with the people who have not currently received a Home Fire Safety Check visit. We have requested an Adult Safeguarding Review through the local Adults Safeguarding Board to generate multi agency learning. This has been supported and is due to take place in September. We are also providing evidence for the Coroner’s Inquest and looking to support the development of any prevention of future deaths report. Our Adult Referral Programme has developed multi-agency working relationship across our unitary areas. This identifies persons vulnerable from fire through risk assessment by carers and other community workers who have access to these vulnerable individuals on a daily basis. During Q1, we have received 224 direct referrals from agencies to which we have provided training. We are promoting and providing training pan Berkshire to a wide range of care agencies increasing our partnership register. This is our most effective method to identify the vulnerable and keep them safe from fire. As part of this, we are now working with the organisation that has been commissioned to provide equipment for the most vulnerable in our communities. In addition, a training programme is to be delivered to all operational personnel in the very near future. It will explain who in our communities is most likely to die in the event of fire, based on the IRMP research, and how they can be protected. This will support the implementation of the changes we are making to the way we deliver our services across Berkshire.</p>									

Strategic Performance Report Q1 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
2	Number of Fire Casualties in Accidental Dwelling Fires	29 MAX	5↔				5	7 MAX	6	6	↑
		<p><i>Source: Scorecard Corporate Measures (P&P) / IRS9.06a)</i></p> <p>There have been a lower number of casualties in accidental dwelling fires than our year to date target. We are 29% below our quarterly target and 17% below this point last year. The Fire Authority's IRMP decisions mean that we are directing Home Fire Safety Checks towards community groups known to be at higher risk of having an accidental dwelling fire and being injured as a result. We are changing the way we provide our service prevention management arrangements which will be delivered from three area hubs across the county. The managers, supported by our team of Community Safety Advisors, will form partnerships and relationships with a range of other services who work in the community. These professional relationships along with the use of computer data will allow us to identify and provide a fire preventative service to people more at risk of having a fire in their home. We place a high priority to this work as we know that the groups of people in question produce our volume of fires. The fact they are generally from the younger spectrum of our communities means they are more likely to be able bodied and therefore able to escape when fire occurs, but not always without injury. They are also less likely to own, or where present, maintain smoke alarms within their homes. In identifying and working with these people, we will reduce fires, injuries and drive up smoke alarm ownership and maintenance (★A.5 & .6) We will continue to support our Home Fire Safety Check Programme with activities in educational and community establishments. We will continue to provide themed media messaging designed to promote fire safety awareness in the home.</p>									
3	% of safeguarding referrals made to Local Authorities within 24 hours	100%	100%				100%	100%	100%	100%	↓
		<p><i>(Source: Manual Input from Risk Reduction Manager)</i></p> <p>This is a new Corporate measure for 2017/18 which records performance in the discharge of our statutory responsibility to report Safeguarding issues involving children and vulnerable adults. We have generated 47 Safeguard referrals in Q1 managing them all within the required timeframe. We have a statutory duty to report safeguarding concerns to the appropriate authority where our staff encounter situations, environments or persons at potential risk. RBFRS recognises and acknowledges the importance of the duty placed on our service and staff. In recognition of the importance of this duty we have introduced this time bound measure. (The timeframe is not required or directed through legislation or guidance and may not be present within other organisations).</p>									

Strategic Performance Report Q1 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Prevention											
4	Risk of Death	7000	952				952	1750			
5	Risk of Injury	2500	136				136	625			
	TOTAL	9500	1088				1088	2375			
	Number of Home Fire Safety Checks (HFSC) delivered to those who are at heightened risk of dying/being injured in the event of an accidental dwelling fire (above)	(Source: SQL Reports-Stats-Scorecard-SC HFSC Corporate Measures Audit) *The difference between the figures discussed below and the figure in the Q1 box is due to a significant number of HFSC's being 'completed' but not yet 'closed', therefore not yet being counted in the official figures.* We have completed 2043 Home Fire Safety Checks in Q1 which is 332 checks below our combined target in ID areas 4 and 5. A significant amount of work has taken place to engage with those who were subject to referrals from partner agencies but that had not received a HFSC from RBFRS. These are all vulnerable people within our target group – those who would be more likely to die (★A.1) if they had a fire. It required a lot of work in Q1 and yet not all of the residents wanted a HFSC or were there to receive one. Hence the reduced figure in the quarter. However, this is our target group and those who did receive the HFSCs were exactly the people we would want to support and assist. The tragic events witnessed at Grenfell Tower have led to our direct engagement with persons in the 154 high rise residential buildings in Berkshire. A high rise building is defined as being greater than 18m or six storeys. Our operational crews and Prevention staff have provided face to face high rise living safety advice to a further 1351 residencies, not included in the figures above. We have a Prevention Plan of engagement activity which will continue to ensure we provide fire safety advice and reassurance to residents. This activity has and may continue to affect our Home Fire Safety Check total in coming months. Having stated this, the really important work being conducted at our high rise premises will not exclude our work with other residents and community groups. We will deliver balance in our Prevention activity with the capacity available from our Station based and Prevention staff. A good example of consideration of balancing our risk has already been highlighted in ID area 1 with the 439* property visits carried out in reviewing our vulnerable person referrals. (*Pending closure on System).									
6	% of dwelling fires attended where no working smoke alarm is installed, against the total number of dwelling fires	41% MAX	37.3%*↑				37.3%*	41% MAX	45.7%	45.7%	↑
		(Source: Scorecard Corporate Measures – IRS 5.0e) The definition of this measure has altered for the performance year 2017/18 to include incidents where an alarm was present but did not raise the alarm, helping us to gain a better understanding of how we can improve alarm ownership AND change behaviours associated with preventing an alarm from activating as it should. We attended 102 dwelling fires during Q1 and of these 55 (54%) had smoke alarms present which activated. Of the remaining 47 (46%): <ul style="list-style-type: none">9 (9%) had smoke alarms which operated correctly but did not raise the alarm. For three of these, the alarm was raised before system had time to operate and for a further three, the occupant did not respond. There were three 'other' occurrences.23 (22%) had a smoke alarm present which did not activate: four alerted by other means, one fault in system, six fire in area not covered by system, four fire not close enough to detector, two smoke alarm battery defective, two smoke alarm battery missing11 (11%) showed no alarm present, four 'other'.4 (4%) incidents where it is unknown if there was a smoke alarm present. We will immediately influence our recording performance by promoting the need for and delivery of more accurate returns from operational managers; this is to be progressed as a priority. Five incidents crews fitted detectors immediately after the fire, 10 have no permanent resident 'type' recorded so occupiers may be short term renters or transient households, making it difficult to profile them, 2 deliberate fires; occupants removed or covered detectors. We will ensure the societal groups associated with poor alarm ownership and maintenance are proactively sought for Home Fire Safety Check activity, in the relevant risk categories. We will achieve this by running monthly checks against our gathered IRS returns and our database selection fields allowing crews the most up to date information. *Excludes unknown if Smoke Alarm Present.									

Strategic Performance Report Q1 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
7	% of Category 1 HFSC referrals, where there has been a threat or incidence of arson, completed within three days	100%	85.7%↑				85.7%	100%	48%	48%	↑
<p>(Source: Manual input from Risk Reduction Manager)</p> <p>We received seven threat or incidence of arson referrals from Thames Valley Police this quarter. We responded to six of these referrals within our performance measure of three days (four completed within 24 hours of receipt and two completed within 48 hours). Due to circumstances beyond our control (the resident was unavailable for first three days) it proved impossible to deliver the other intervention in the time measure, although completion was achieved, subsequent to the three working days deadline.</p> <p>Work is almost complete allowing for this process to be administered through the Duty Officer, Thames Valley Police Control Room Inspector and operational crews giving an immediate response to our Police colleagues. We have also begun consultation with FRS colleagues to standardise our arson protection response approach across the Thames Valley footprint.</p>											
Protection											
8	Full Audits	1400	233				233	350	450	450	
9	Audits & Follow Ups		273				273				
	Total Number of Full Fire Safety Audits and follow-up visits carried out	<p>(Source: FSR 101 + FSR103 – Scorecard FSR Home Office Book)</p> <p>Measure 8 indicates the number of primary full fire safety audits conducted and it does not include any follow up visits that may be required. The figure provided above by Scorecard is 144 audits less than the figure reported by Fire Safety Inspecting Officers in their manually completed end of month returns (377). We are confident of this greater figure and that the numbers will configure by Q2. The discrepancy is believed to occur because of the manner in which our reporting system is only showing closed service audits. Additionally, due to the speed of reaction necessary in order to inspect specific buildings in response to the Grenfell Tower fire a number of the audits remain open awaiting further documentation before we are satisfied the audit is complete.</p> <p>The total number of 377 full fire safety audits completed is over the milestone target of 350 for the quarter and therefore is a positive indicator that we are on course to achieve the annual target of 1400.</p> <p>Recent activity within the Protection Department has seen Fire Safety Inspecting Officers engaged in activities outside of our planned business activity, including conducting Home Fire Safety Checks to support a priority Prevention Department target and the Service's response to the Grenfell Tower fire (★Z.408). Early indications suggest that the re-focusing of fire safety audits on high risk premises, including Houses in Multiple Occupancy, is taking more time per visit compared to the type of visits being completed in 2016/17. This is due to additional work needed to identify and make contact with the Responsible Person for the properties and increased level of work to ensure compliance. Last year we carried out more audits; the number was revised to 1400 in order that we would target our work to those places that were higher risk or failing to comply. Overall, we will do more work with these higher risk buildings and less with those that comply.</p> <p>Progress against target will continue to be monitored closely to ensure that it remains within milestone targets. On-going additional work, as a consequence of Grenfell Towers will be adequately resourced to ensure that it does not impact upon the completion rate towards the annual target. This includes working at a multi-agency level across the Unitary Authorities so that we ensure the most efficient and effective response that ensures public safety and creates public reassurance.</p> <p>9 is a new measure which indicates the total number of primary full fire safety audits completed combined with any follow-up audits that may be required. Reasons for follow-up visits include checking to ensure that remedial actions have been completed as directed.</p> <p>The 40 follow-up audits shows that there has been an increase in the percentage of full fire safety audits requiring a follow-up visit to 10% from a figure of 3% in the same period last year. Last year we visited more premises but very few of them required any form of enforcement. Our change of approach is borne out through the new figures. This change is indicative of the increasing level of deficiencies being identified as inspections become increasingly focused on those properties that are most likely to be non compliant with the Fire Safety Order.</p>									

Strategic Performance Report Q1 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
10	Satisfactory	50% max	65.7%↑				65.7%	50% max	80.7%	80.7%	↑
11	Informal Activity	45% min	30%↑				30%	45% min	19.6%	19.6%	↑
12	Formal Activity	5% min	1.3%↑				1.3%	5% min	0.04%	0.04%	↑
13	Success Rate	95% min	0↓				0	95% min	100%	100%	↓
	Audit Outcomes (above)	<p>(Source: FSR 102 – Scorecard FSR Home Office Book)</p> <p>These measures are useful to indicate that those commercial properties that are most likely to be non-compliant with the Fire Safety Order are being targeted. The lower the figure for satisfactory audits, the better the indicator that the correct properties are being inspected. Measure 10 is a significant improvement over the previous year of 80% and shows a clear direction of travel towards the target of 50%. One risk impacting on this figure in the next quarter will be the number of audits completed in high rise residential buildings following the Grenfell Tower fire. Whilst this work is essential due to the increased level of risk associated with these premises, we have identified that many of these audits result in a 'broadly compliant' score on the CFOA auditing form. It should be noted however that many fire safety improvements are still notified following audits that result in a 'broadly compliant' score.</p> <p>Measure 11 indicates the number audits of properties that result in an informal notice of deficiencies being issued. It is a useful measure to indicate the targeting of properties that are more likely to be non-compliant with the Fire Safety Order. The figure of 30% is a significant improvement over 19.6% for the same period last year, and indicates that changes to property types being targeted for inspection are leading to the desired focusing of activity on properties more likely to be non-compliant with the Fire Safety Order. This measure will continue to be monitored and it is expected that it will continue to move towards the 45% target. This will be ensured by continued targeting of premises where fire safety measures are expected to be unsatisfactory.</p> <p>Measure 12 indicates the number audits of properties that result in formal enforcement activity being taken. It is a useful measure to indicate the targeting of properties that are more likely to be non-compliant with the Fire Safety Order and indicates a greater level of non-compliance than measure 11 above. It is clear that this area of enforcement activity is the most valuable in relation to public safety since it covers the more dangerous offences under the Fire Safety Order. The figure of 1.3% is a significant improvement over 0.04% for the same period last year and indicates that changes to property types being targeted for inspection are leading to the desired focusing of activity on properties more likely to be non-compliant with the Fire Safety Order. This measure will continue to be monitored and it is expected that it will continue to move toward the 5% target. This will be ensured by the continued targeting of premises where fire safety measures are expected to be unsatisfactory. Sharing of information regarding enforcement activity with partner agencies will further assist in focusing Inspectors' activities.</p> <p>Finally, Measure 13 is a useful indicator that where prosecutions are necessary they are effectively targeted, prepared and prosecuted. No court cases have commenced during the first quarter, but there are currently five court case files being compiled for prosecution and subsequent cases are likely.</p>									

Strategic Performance Report Q1 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Response											
14	% of occasions where the first fire engine arrives at an emergency incident within 10 minutes, from time the emergency call was answered	75.0%	72.1%				72.1%	75.0%	66.5%	66.5%	↑
		<p>(Source: Scorecard incident recording system-section 3. /IRS30e (based on the total of all emergency incidents responded to, divided by the total of all emergency incidents responded to within 10 minutes)</p> <p>Including first Pump attendance by over-the-border (OTB) appliances, the Service attended 1963 'emergency incidents' within the county in Q1 (data correct as of 15/08/17), with 1415 (72.1%) recorded as meeting the attendance time measure. As a headline figure this is disappointing and sees a drop from 75% in Q4 last year.</p> <ul style="list-style-type: none">First Pump attendance by RBFRS Wholetime (WT) crews equated to 1,859 incidents, with 1387 (74.6%) recorded as meeting the attendance time measure.First Pump attendance by 'over-the-border' (OTB) appliances and / or RBFRS Retained Duty Service (RDS) crews equated to 104 incidents, with 31 (29.9%) recorded as meeting the attendance time measure. <p>Geographically, West Berkshire continues to provide travel distance challenges. Coupled with the current provided lack of RDS cover in the area, on occasions extended attendance times can be expected. Going forwards, however, the recent addition of new RDS personnel in the area will result in a positive change in RDS availability, subsequently leading to attendance time improvement.</p> <p>In regard to risk areas and geographical location, Station Commanders are reinforcing the importance of remaining available when away from the station and undertaking non-emergency activities. In addition, the onboard Mobile Data Terminal's (MDTs) will assist in providing an overall improvement to the attendance times seen during the next quarter.</p> <p>Service Delivery Managers will continue to liaise with the TVFCS Manager in the coming quarter in order to monitor progress and trends (★B .3-.9). Experience will continue to be gained by the recently joined new recruits in TVFCS, which will positively contribute to the maintenance of an effective and efficient call handling process, in turn leading to an improved overall attendance time figure.</p> <p>The impact of appliance turn-out times can be seen overleaf in Service Measures 8 and 9 (★B). Service Delivery managers already reinforce expectations around these measures; however this will be reiterated and robustly monitored as we move forwards into Hub working, with any remedial action taken as necessary.</p>									

Strategic Performance Report Q1 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
15	Whole Time	100.0%	100%↑				100%	100.0%	100.0%	100.0%	↑
16	RDS	50.0%	35.6%				35.6%	50.0%	45.9%	45.9%	
	% of hours where there is adequate crewing on frontline fire engines (above)	<p>(Source: Scorecard Central Team (CT) Book – (CTT07a) based on shifts worked at planned appliance crewing for WT (56) and a manual check of FireWatch)</p> <p>The Service's target was achieved again in Q1 through a combination of effective local and central management of resources. Absence due to leave increased resulting in a corresponding reliance on pre-arranged overtime to maintain minimum crewing. The percentage of time appliances crewed with five reduced to 23% (down from 54% over the previous quarter) reflecting the reduction in available on-duty personnel due to the increase in leave taking particularly during peak periods such as the school Easter holidays. Crewing continues to be managed locally on station with a view to the global situation to ensure that any personnel not required to achieve minimum crewing on the home station are utilised before pre-arranged overtime is used. Whilst we have maintained the 100% availability we know that we can now make informed decisions about establishment planning. Over the coming months we will continue to use Pre-Arranged Overtime (PAOT) and temporary contract opportunities to offset gaps in our establishment. We will also be substantively recruiting new firefighters and to roles including vacant middle manager positions. This will ease pressure across watches and stations. It should be noted that even with all station based establishment positions occupied crewing in the service is highly efficient and there is little spare capacity (★C & D).</p> <p>Availability of RDS appliances across the Service has dropped from the Q4 average of 43% with the main causal factor still being the low establishment number – for most stations a relatively small decrease in an individual's availability has a significant impact on the station availability and this is the reason for the reduction in availability in Q1. A combination of factors resulted in the sharp drop in April and May including retirements, sickness, fitness test failures and a number of personnel being selected for wholetime Firefighter vacancies.</p> <p>Availability rallied on average across the Service in June, up to 39%, with Wargrave noticeably demonstrating an increase to 18% cover for June (from an average of 10% for the last quarter).</p> <p>The Service's focus on support for the RDS has intensified with several initiatives being developed and integrated (★R, S, V & Z.231). . These include a training collaboration with Oxfordshire FRS, support for potential RDS recruits from Service Physical Training Instructors.</p>									
Customer Service											
17	Domestic Respondents	100%	100%↑				100%	100%	98%	98%	↑
18	Commercial Respondents	95%	Pending				Pending	95%			
19	Fire Safety Audit Respondents	90%	Pending				Pending	90%			
	% of Questionnaire respondents satisfied with the overall service (above)	<p>(Source: Owned by Risk & Performance - manual calculation from results of postal surveys returned)</p> <p>Of our returns 86.4% (57 of 66 respondents) were Very Satisfied whilst 13.6% (9 of 66) respondents were Satisfied. We are able to analysis the feedback further for any specific learning.</p> <p>Since reporting the above figures, a "Dissatisfied" response was received in the Q2 period. This highlighted the need for managing negative feedback so that it is properly considered and addressed to improve future performance. Going forward, a dissatisfied response will be treated as a complaint, and handed to the IG Team for further action/distribution for action. Outstanding commercial Questionnaires are currently being sent out, will be returned from August 2017 onwards and will be reported on in Q2 report.</p>									



Appendix B: Service Measures Performance

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Response Service Measures											
1	Dwelling Fire		52.5%↑				52.5%		50.0%	50.0%	↑
2	Road Traffic Collision		53.2%				53.2%		45.7%	45.7%	↑
	The percentage of occasions a second fire appliance attending arrives within 2 minutes of the first appliance to arrive (above)	<i>(Source : Scorecard IRS Book Section 3. Unitary Attendance Measures IRS 3.0f and IRS 3.0g)</i> It is pleasing to see a 2.5% improvement since the last quarter of 2016/17. Response GM's have stressed the importance of location awareness, planning of 'off station' activities with TVFCS and appliance availability with Station Commanders over the last three months. This information is being cascaded to operational crews, both Wholtime and Retained Duty System. As we increase RDS personnel and consequently appliance availability, this figure will improve. An improvement of 7.5% in the second appliance arriving at an RTC within two minutes, is really good progress for RBFRS. Initial analysis of this data indicates that the improvement is down to the excellent work that Central Team undertake, to keep the optimum number of appliances on the run, especially at the busiest periods. Group Managers have also stressed to the Station Managers, the importance of working closer with their RDS stations to increase their availability, wherever possible. This will be enhanced further, due to the steady increase of RDS personnel (at all stations) who have been recruited since the start of the financial year. As these new recruits become available to crew appliances, it will result in increased availability of RDS appliances. This will assist in us making improvements to Response Service Measures 1 and 2.									
3	Within 5 seconds	92%	88.8%				88.8%	92%	86.2%	86.2%	↑
4	Within 10 seconds	97%	97.5%				97.5%	97%	97.4%	97.4%	↑
	% of occasions where time to answer emergency calls is (above)	<i>Source : Scorecard Corporate Measures Book Section Response Measures IRS 2.0 a, b and f</i> Whilst TVFCS is narrowly missing out on its target to answer 92% of all emergency calls within five seconds, it is exceeding the target to answer 97% of these calls within 10 seconds in Q1, and has made improvements in both call answering measures, compared to the same time period last year. Performance is affected by: <ul style="list-style-type: none">Control Room staffing levels; below Establishment (36.5 Vs.38), and Establishment will increase in September to 39. Control, alongside many RBFRS departments, is currently facing additional challenges around long term sickness, career breaks and performance related absence, which impacts on staffing levels not reflected in the staffing figures above. This shortfall and its impact on performance has already been identified, resulting in an additional five posts being recruited to September, bringing staffing levels in line with the revised establishment.Spate / multiple calls: It is difficult to answer calls in under five seconds when a spat or multiple calls come in, in relation to one incident. For example a vehicle fire on the M4 may result in twenty calls all being made to 999 in a short space of time, making it impossible to answer each one immediately, but does not ultimately impact on the response targets as the first call will determine an appropriate response to the incident.Tests: Line testing exercises (following upgrades and work on systems) and contingency events where the entire Control team transfer to Kidlington for the day (such as on 11 April 2017) have minor, yet cumulative impacts on call handling figures. In order to continue improving the time it takes to answer emergency calls, the Control Room has a policy in place where as soon as the first two Control Staff members take a call, the Recall (alarm) is activated to bring all staff back from breaks, in case further calls come in. Ongoing training processes and feedback to the TVFCS Control Team from the Performance Team is scheduled for 12 October.									

Strategic Performance Report Q1 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
5	Within 60 seconds	60%	52.3%				52.3%	60%	35.7%	35.7%	↑
6	Within 90 seconds	80%	76.7%				76.7%	80%	66.5%	66.5%	↑
7	Within 120 seconds	95%	87.6%				87.6%	95%	82.1%	82.1%	↑
	% of occasions where time to mobilise is (above)	<p><i>Source : Scorecard Corporate Measures Book Section Response Measures IRS 2.0 a,b and f</i></p> <p>TVFCS has improved mobilising times significantly since last year; although we still have some way to go to meet the target for 2017/18. Improvements in performance are mainly attributed to the addressing of system issues in 2016/17, making the Vision system more stable, faster and accurate, including improvement around address searching and general configurations. Further improvements in performance will be seen once the latest recruits have been in post for six months, and call handling is an ongoing process of training, learning and improving. Internal audits, listening in, 1:1 feedback and performance statistics being provided on an individual basis are also helping to improve performance by increasing awareness and accountability. Whilst call challenging ensures that crews are not sent to incidents unnecessarily, the additional questioning of the caller, especially with Automatic Fire Alarm (AFA) companies to ascertain if the property is domestic or commercial, open or closed, and confirming if site contact has been made lengthens call handling times. In Q1, 631 / 2318 (27%) emergency calls received were in relation to AFA's and aside from the issues already mentioned, AFA companies regularly provide incorrect addresses, do not have up to date key holder or contact information, adding further delays to the call and potential mobilising of a crew. The call challenging process will ultimately start to ensure that AFA companies contact us only when they have all of the correct information, and will be managed by Control Managers going forward.</p>									
8	Whole Time under 90 seconds	100%	76.4%				76.4%	100%	64.7%	64.7%	↑
9	RDS under 300 seconds	100%	80%				80%	100%	64.9%	64.9%	↑
	% of occasions where crew turnout is (above)	<p><i>Source : Scorecard IRS Book Section 6. Resources used at Incidents Measure IRS 6.07</i></p> <p>Of the 2179 emergency incidents mobilised to, Wholtime (WT) crews achieved this measure 1664 times (76.4%). The shortfall is recognised as being due to various aspects, including crews being engaged in training and other 'delayed activities at the time of mobilisation', as well as mobilisations during rest hours. Going forwards, expectations will be reiterated to crews, with robust monitoring to take place by Service Delivery managers. Of the 64 emergency incidents mobilised to, RDS crews achieved this measure 51 times (80%). The shortfall is recognised as being due to various aspects, including time of call and crew availability errors. Going forwards, expectations will be reiterated to crews, with robust monitoring to take place by Service Delivery managers.</p>									

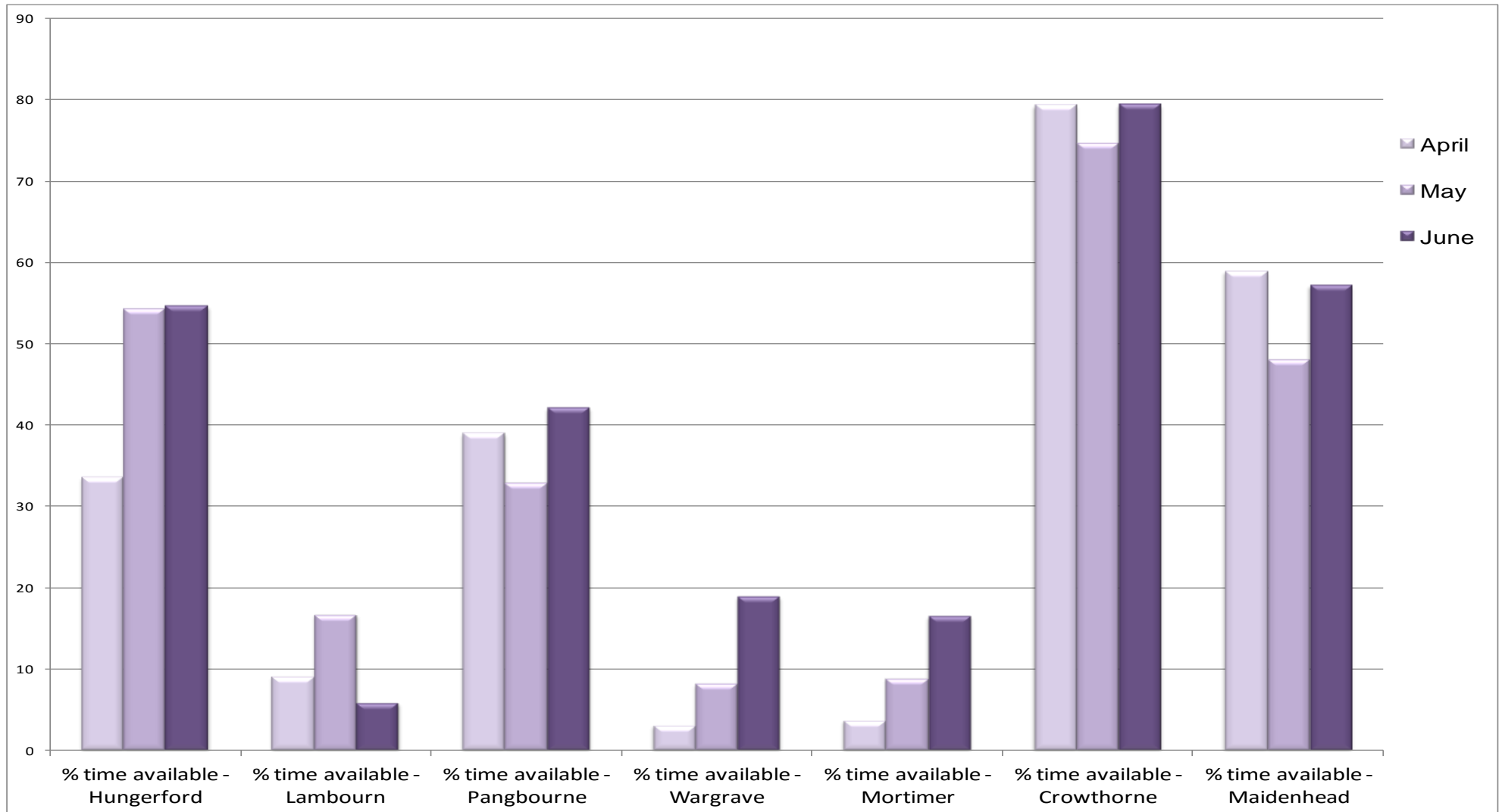


Appendix C: Establishment Planned vs. Actual at RDS Stations

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

	SIP	FTE	Establishment	SIP v Est	FTE v Est
05 Hungerford	8	3.87	13	61.54%	29.78%
06 Lambourn	7	3.85	13	53.85%	29.61%
07 Pangbourne	9	5.03	13	69.23%	38.69%
09 Wargrave	6	2.86	13	46.15%	21.98%
11 Mortimer	7	3.99	13	53.85%	30.68%
15 Crowthorne	12	6.96	13	92.31%	53.57%
19 Maidenhead	16	6.32	13	123.08%	48.59%
Total	65	32.88	91	71.43%	36.13%

Appendix D: RDS Appliance Availability by Station



Appendix E: Service Plans

Service Plans are developed and maintained to facilitate a managed process of planning, recording, monitoring and tracking business as usual and individual work packages across all department functions in RBFRS. Heads of Service have responsibility for management of their plan and complete an update each quarter providing a Red/Amber/Green (RAG) status and additional commentary around each task or work stream in the plan. The plans also identify where resourcing across departments is required. This enables cross directorate planning to ensure delivery of tasks or identify gaps in provision. Scrutiny is applied through internal audit by the Risk and Performance team as part of the quarterly reporting process and through discussion and challenge at Senior Leadership Team (SLT) meetings. This provides organisational oversight that assures gaps in provision can be addressed and that progress and delivery targets are met.

The picture below illustrates as example of a service plan

Risk and Performance Service Plan 2017/18											Monitoring				
Annual Action Plan				Timescale		Accountability		Resource	Resource	RAG Status					
Ref	Performance management quadrant	Objective No:	Task	Start date (dd/mm/yy)	Planned end date (dd/mm/yy)	Accountable Owner	Responsible Officer	Staff days	Other service resources	Q1	Q2	Q3	Q4	Progress update	
BUSINESS AS USUAL															
RISK MANAGEMENT															
1	Priority programmes	Mitigate community risk through the integration of Prevention, Protection and Response activities within the IRMP process in line with our statutory duties in the National Framework 2012 to enable the delivery of the FA's Vision 2019	Ensure all relevant project management documents are completed and maintained for the key projects for 2017/18, including business case, project initiation documents, risk assessments, stakeholder analysis, Equality analyses and project plans	01/04/2017	01/04/2018	AM (Risk & Performance)	AM (Risk & Performance) (Programme Management Office; Service Delivery Project leads)	30	Programme Management office 30; Service Delivery Project leads 90	G					
2	Priority programmes	Mitigate community risk through the integration of Prevention, Protection and Response activities within the IRMP process in line with our statutory duties in the National Framework 2012 to enable the delivery of the FA's Vision 2019	Monitor progress of projects and key milestones using project plans maintained and updated by project leads and by the Programme Management Office through the IRMP programme board	01/04/2017	01/04/2018	AM (Risk & Performance)	AM (Risk & Performance) (Programme Management office; Service Delivery Project leads)	10	Programme Management office 30	G				Formation of overall programme board	

Resource requirements

Reviewed progress each quarter



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

Nikki Richards Director of Support Services This ICT strategy is intended to design and embed a reliable, resilient ICT support service which will technically enable the implementation and ongoing delivery of the Strategic Commitments and Vision 2019. This is a high level update for items agreed as part of year 1 of the action plan and reflects the period April to June 2017. Detailed action planning is management through the Business Information and Systems Service plan which is monitored through the Strategic Performance Board.

Task	Progress	RAG
ICT information governance framework established and approved by IRMP	Framework published and governance arrangements will be finalised following arrival of new HBIS. Protecting Information e-learning package rolled out across the organisation. IRMP/programme board no longer overseeing as twin aims of ESN accreditation and GDPR compliance driving activity.	G
Guiding principles implemented and PSN accreditation achieved	ESN Code of Connection requires both network security and wider IA conditions. National Cyber Security Centre standards chosen as accreditation for IA. Rolled into year 2 due to changing timelines for ESMCP. Plan to achieve Cyber Essentials certification as part of this.	G
ICT infrastructure is fit for purpose and supports a reliable, robust IT environment	Network review results received and action taking place. Monitoring of this to be incorporated into work taking place for ESN accreditation.	G
Software and Hardware Asset management plans established	New helpdesk system in process of implementation, which will help plan asset replacement programme. Collaboration with partners continues to help align assets replacement programme.	G
Cross training and up skilling of the ICT team	Good progress was made during year one of the strategy but this needs to continue with the addition of 2 new starters in July .	A
ICT Service SLA and Service catalogue created	On course for a trial run with HR and Station 3 in August. Links to number 6.	G
ICT work plan of BAU activities and prioritised development implemented	Annual work plan agreed and currently on schedule	G
Applications portfolio (a list of all our systems) will be realigned to remove unnecessary applications	Applications are listed in our Snow software, and have also been included in our new Service Desk software (vFire), so this will aid identification of software in use and allow software not in use to be removed. This has started with a recent sweep of users of the Visio software.	G
Flexible working framework is developed to support new ways of working as part of the OD programme	This will be picked up later in 17/18	
ITIL best practice standards in place embedded across whole of ICT	ITIL training carried out in Yr1 for key ICT staff. Standards not yet embedded , this is a key objective for the new HBIs who is due to start 14 August	A
Timelines for re-tendering, aligned to joint and shared tender opportunities	We can add contract details/reminders into the new Service Desk software vFire, and are looking at doing so.	G
A corporate content management solution is in place	Intranet based content management system in place Yr 1 Q4. Some further work required to ensure document control works effectively for information with high risk implications.	G



Appendix G: Update on Progress of the Fleet Strategy

Dave Myers AM (East) This Fleet Strategy is intended to design and embed a reliable, resilient Fleet and Equipment Department which will enable the implementation and ongoing delivery of the Strategic Commitments and Vision 2019. This is a high level update for items agreed as part of year 1 of the action plan and reflects the period April to June 2017. Detailed action planning is management through the Business Information and Systems Service plan which is monitored through the Strategic Performance Board.

Task	Progress	RAG
Fleet and Engineering Management structure designed to meet future needs Fleet Strategy and principles agreed and Partnership with HFRS implemented	The department has gone through some changes, with the removal of some posts. These have been held vacant to facilitate the transition to a new structure with the Partnership with Hampshire. This has created some capacity issues, which have been addressed with temporary staff in some roles. The Partnership is progressing, and we are in the final consultation phase with staff group, to be implemented early August	
Agree 4 year Main Pumping Appliance renewal plan - Commence Procurement exercise with TVFRS's	The replacement of the B type appliances has been moving forward and the procurement of both the appliances (11 over 4 years) and ancillary equipment has realised significant savings and created opportunities for improved interoperability. The first appliances have been delivered and now in Service with positive feedback. The next phase of 3 appliances for 2018 is on track	
Review Equipment notes and technical information and create appropriate reference database	Equipment notes have been reviewed and redacted where possible to reduce the number of unnecessary documents. A separate access folder has been created in Siren	
Fleet Investment plan is created to align to medium term financial plan - Fleet and Equipment Asset Management plans established	A revised equipment investment plan has allowed capital provision to be made in the strategic assets investment framework. This has been facilitated by the development of a 4 and 5 year replacement schedule for all large equipment items. This will allow better programming of replacement and budget management in the future. The use of an asset tracking system is the next stage.	
Agree replacement programme for Special Appliances	This has been developed to agree budgetary provision for specials in the MTFP. Significant savings were made from the replacement of the HERU (£150,000 saving) The replacement of the ALP and refurbishment of the ICU are both commenced	
Determine multi-use vehicles requirements, available to provide off road access, flexible and effective back-up vehicles	This exercise has started, with the redeployment of vehicles and removal of under-used vehicles at stations and team bases. Provision for replacement white fleet has started with new, fit-for –purpose vehicles in conjunction with the conclusion of the Flexi Officer car scheme, which ensures response car provision which replace existing resilience fleet cars.	



Appendix H: Service Provision Measure Definitions

ID	Service Provision Measure	Definition
Dwelling Fire Deaths and Safeguarding		
1	Number of fire deaths in accidental dwelling fires	The total number of deaths that occur as a result of an accidental dwelling fire. This includes a person whose death is attributed to an accidental dwelling fire, even when the death occurs weeks or months later.
2	Number of fire casualties in accidental dwelling fires	The total number of casualties which occur as a result of a dwelling fire. This includes a person or persons whose injuries may be slight or serious and require hospital treatment and which are attributed to an accidental dwelling fire.
3	% of safeguarding referrals made to local authorities within 24 hours	To ensure that safeguarding referrals are made in a timely manner for the protection of individuals. This is the time taken from the Duty Officer being made aware of a safeguarding case, to the referral being made to the local authority.
Prevention		
4	Number of Home Fire Safety Checks (HFSC's) delivered to those who are at heightened risk of dying in the event of an accidental dwelling fire.	Research has shown that certain vulnerable groups are at heightened risk of dying in an accidental dwelling fire. HFSC's will be targeted towards these vulnerable groups.
5	Number of HFSC's delivered to those who are at heightened risk of having an accidental dwelling fire and being injured as a result	Research has shown that certain groups are at heightened risk of having an accidental dwelling fire and being injured as a result. HFSC's will be targeted towards these groups.
6	% of dwelling fires attended where no working smoke alarm is installed, against the total number of dwelling fires	The number of dwelling fires RBFRS attends where there was either no working smoke alarm installed, or a smoke alarm did not operate despite being present. This is measured against the total number of dwelling fires.
7	% of category 1 HFSC referrals, where there has been a threat or incidence of arson, completed within 3 days	When RBFRS are made aware of the threat or incidence of arson against an individual (s), an HFSC should be conducted within 3 days.
Protection		
8	Total Number of Full Fire Safety Audits carried out	This is the total number of full fire safety audits carried out in commercial premises in Berkshire. This is calculated once the service has been closed by RBFRS and only includes the initial full fire safety audit. A Fire Safety Audit is carried out to enforce the Regulatory Reform Order (RRO) 2006, which applies to virtually all non-domestic premises and covers nearly every type of building, structure and open space.
9	Total number of audits and follow-up visits carried out	This reflects the amount of activity and follow up visits which may be required around premises, including and following the initial full fire safety audit.
10	% of audits where the results were satisfactory	This is the number of closed fire safety of audits carried out in commercial premises, where the result was satisfactory and no further action was required.
11	% of audits requiring informal activity	This is the number of closed fire safety audits carried out which resulted in informal activity. This

Strategic Performance Report Q1 2017/18

Quadrant One – Service Provision

ID	Service Provision Measure	Definition
		includes a Deficiency Notice, with or without follow-up or informal education.
12	% of audits requiring formal activity	This is the number of closed fire safety audits carried out which result in formal activity. This includes premises requiring an Enforcement Notice, Prohibition Notice, Alterations Notice, or Prosecution Notice.
13	% success rate when cases go to court for non-compliance with the Regulatory Reform Order 2006	This is the percentage of successful prosecutions following fire safety audits on premises not complying with the Regulatory Reform Order 2006.
Response		
14	% of occasions where the first fire engine arrives at an emergency incident within 10 minutes, from time the emergency call was answered	This measure looks at the time taken from when the Fire Control Room Operator answers the phone until the time the first fire engine (appliance) arrives at the scene of the emergency incident, and on how many occasions RBFRS does this in under 10 minutes.
15	% of full shifts where there is adequate crewing on all 'wholetime' frontline fire engines	This is the percentage of shifts (day or night) where there is sufficient minimum qualified fire fighters on all wholetime pumping appliances (fire engines). A wholetime frontline pumping appliance is available 24/7, 365 days a year.
16	% of hours where there is adequate crewing on 'retained' frontline fire engines (based on 24/7 crewing)	This is the percentage of hours where there is sufficient minimum qualified fire fighters on retained pumping appliances (fire engines). Retained frontline pumping appliances are crewed mainly by on-call fire fighters who are based at stations in more rural locations, and are ready to leave their place of work or home and attend emergencies from the local retained station, when they receive the call. Crewing is also provided by the Retained Support Unit.
Customer Feedback		
17	% 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, and asks about their satisfaction and experience with the service they received from RBFRS.
18	% 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, and asks about their satisfaction and experience with the service they received from RBFRS.
19	% of commercial 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, and asks about their satisfaction and experience with the service they received from RBFRS.



Quadrant Two Appendices

Appendix I: Corporate Health Performance

★ See Appendix U for Definitions

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Human Resources											
1	% of working time lost to sickness, across all staff groups (★R & S)	3%	4.59%				4.59%	3%	3.86%	3.86%	
		<p>(Source: Manual Input from HR)</p> <p>[Note: RDS figures should be viewed with caution as this figure is calculated based on the average shift length and these vary considerably and many sickness episodes may be recorded as unavailable]</p> <p>In this quarter, we have seen an increase in the overall percentage of working time lost to sickness. This is as a result of long term sickness and is the first time in nearly two years that our sickness absence levels have increased instead of decreasing against the previous quarter. Organisationally there continues to be a downward trend in short term sickness levels, suggesting the management interventions developed to address this type of absence continues to be effective.</p> <p>There were 31 episodes of long term (over 28 days) sickness absence in Q1 compared to 13 episodes in the last quarter of 2016/17.</p> <p>The trends in long term sickness continues with Musculoskeletal (MSK) and Mental Health factoring into the top three absence causes. During this quarter there have been six long term mental health cases (one was classified as a short term during the last quarter). Each case is being closely monitored and all staff are referred to Occupational Health. One individual has now returned to work. It has been noted that a number of the cases are not those that could have been prevented with workplace interventions.</p> <p>There were eight new long term MSK cases this quarter, five of which have now returned to work. The Movement Specialist provides a movement screen and/or structural integration sessions to individuals where appropriate. For some cases it is not appropriate for the Movement Specialist to be involved due to nature of the injury or the treatment being received by individuals.</p> <p>The third category is Neurological, with a high percentage of all days lost in this category being long term (two cases).</p> <p>We continue to investigate the relevant support that can be offered to rehabilitate individuals with their specific issues back into the workplace. The reasons for an increase in absence levels during this quarter will be further investigated although it has been noted that a number of the cases are not those that could have been prevented with workplace interventions and some are chronic in nature and require, due to the type of the illness, sensitive case management.</p> <p>A quicker and proactive management approach is taken in relation to all absences. Guidance from Occupational Health on available supports and discussions on how individuals can access scans etc through Benenden are picked up at referrals. Evaluation of this provision is being examined and some assessment of the speed at which individuals can access surgical interventions will be ascertained. Where appropriate the Movement Specialist can assist to get individuals fit for their operations and ultimately reduce the post surgery recovery times.</p> <p>With the increase in number of days lost to Mental health, efforts are being focused in this area. A number of seminars and activities were held at Newsham Court during the Mental Health Awareness Week which took place in May. A dedicated Mental Health Adviser post has also been advertised and will be employed for a fixed term with the specific focus of furthering mental health supports in RBFRS in conjunction with the health, safety and wellbeing action plan. This individual, once appointed, will focus on the provision of awareness training, health promotion and mental health initiatives. The Occupational Health provider has indicated that the number of mental health cases is low when compared to other clients.</p> <p>RBFRS also continues to utilise the Fire Fighter’s Charity rehabilitation centre facilities to support the rehabilitation of staff.</p> <p>Sickness cases continue to be supported by the HR Case Officer who works with line managers to address particular needs. The case officer assists in the identification of trigger points, referring staff to the Movement Specialist where musculoskeletal issues are identified and provides advice and</p>									

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		guidance in assessing risks and identifying control measures for disability and long term sickness cases. The future focus will be to develop additional management tools (to be located on Siren) to further assist managers across the Service prevent and proactively manage health and wellbeing. The Sickness Working Group continues to identify causes of sickness through the analysis of absence information utilising data from Occupational Health and the Movement Specialist to identify appropriate measures and initiatives. The focus is on specific key areas which feed into the Health, Safety and Wellbeing Action Plan. The group identified flu as being an issue amongst Control staff and an initiative to utilise savings from the cycle to work and child care voucher schemes have provided funding to progress this project for 2017. The Sickness Working Group will monitor this pilot, to assess the impact on seasonal illnesses. This funding is also being considered for the procurement of a health screening booth to raise health awareness amongst our employees. The Health, Safety and Wellbeing Member Champion regularly attends the Health, Safety and Wellbeing Committee (HSWC) and takes a keen interest in the progress of the Health, Safety and Wellbeing action plan. A Health and Wellbeing day is being planned for 11 October which will promote the services of the Benenden Healthcare Scheme, Duradiamond, the Occupational Health provider, and is timed to run in conjunction with World Mental Health Day on 10 October.									
2	% of eligible operational staff successfully completing fitness test	100%	99.8%↑				99.8%	100%	100%	100%	
		(Source: Manual Input from HR) This data relates to the April 2017 round of fitness testing. 407 operational staff are eligible to be tested this period. 99.8% (406) have been tested. The one outstanding test has been diarised. Performance = 99% pass rate of those tested. As at 30 June 2017, 17 personnel are not eligible for testing due to long term sickness, light duties or being on maternity leave. These individuals will be tested as part of their return to work programme.									
3	% of eligible staff with Personal Development Appraisals	100%	53%				53%		85%	85%	
		(Source: Manual Input from HR) On 30 June 2017, based on 596 staff, 553 staff were eligible to have received a Personal Development Interview (PDI) meeting between April and June 2017. Dual contract employees only require one PDI which should have input from both managers where the roles are both operational and therefore have only been counted once. 43 were exempt for the following reasons: <ul style="list-style-type: none">• 30 new employees within their probation period• 13 employees who have been away from the workplace for the duration of the period for various reasons including maternity and sickness. 293 staff are recorded as having their PDI meeting which equates to 53%. This is a reduction compared to the same quarter last year which out-turned at 85% and is in part due to the immediate requirement to prioritise prevention activity following the Grenfell Tower incident. A further 116 staff equating to 21% have had their records updated to reflect that they have received their PDI as of 9 August 2017. Q2 figures will be updated to reflect this and any further improvement. Reminders to managers to undertake and record PDI meetings will be cascaded by Directors and Heads of Service accordingly. Of the meetings which have taken place, 194, as at 30 June, had also returned their paperwork to HR.									

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
4	% of eligible operational staff in qualification	100%	95%				95%	100%			
		<p>(Source: Manual Input from HR)</p> <p>This is a new corporate measure and provides overall analysis of core operational training. Further detailed analysis and discussion is undertaken quarterly at the Organisational Development, People Learning Group (ODPLG) which ensures relevant stakeholders from across the Service consider performance outcomes and associated impacts. Locally in the Learning and Development department detailed analysis is undertaken and liaison with individual managers as necessary to address requirements, competence related matters and issues of attendance.</p> <p>Training and assessment activities in RBFRS are aligned with the Fire Professional Framework which outlines the operational core skills requirements of Firefighters and Officers. National Occupational Guidance provides the standards applicable to the nine core skill areas (Water, Working at Height, Road Traffic Collision (RTC), Hazardous Materials, Casualty Care, Breathing Apparatus (BA), Driving, Incident Command and Core Skills). Our performance in this area for Q1 is 95%.</p> <p>Areas of good performance include:</p> <ul style="list-style-type: none"> Breathing apparatus 99% - Four people remain out of qualification (two were unable to attend a training course within the timeframe required and a further 2 are on a development plan) Incident Command 92% - Three individuals' qualifications have expired following their return to their substantive role after long term temporary promotion where they have worked at a higher level of incident command. Re-qualifications assessments are booked in during Q2. Water Rescue 99% - One individual is not yet competent in this area, two qualifications expired as a result of being unable to attend a course within time, and two deemed competent but not yet reflected on the system at the time of running this report. Additional measures are in place to assist those who are unable to swim or are not confident in water. Individuals and line managers are actively encouraged to identify issue so appropriate development and support can be put in place. Emergency Response Driving 98% - Five people are currently out of qualification, all of which are Officers level. Appropriate action and discussion is taking place to rectify this matter. <p>Areas for improvement:</p> <ul style="list-style-type: none"> Working at height (WaH) 91% - During Q1 a review of the WaH training programme has been undertaken to identify how processes could be improved to support the learner in this area. Significant improvement is expected in Q2. <p>As part of drawing this performance measure together it has been noted that some qualifications had not been recorded on the system, this administrative process has been reviewed and corrective actions will be taken to address this and ensure record keeping is accurate. It is expected that Q2 performance will increase as a result.</p> <p>The ability to effectively train staff is reliant on the ability to release individuals from duty to central training. A combination of efforts to ensure there is flexibility to do so, and other performance such as reducing sickness absence levels facilitate attendance and continue to be examined. Staffing in the Learning and Development department is also kept under review to ensure as much as possible, there is the ability to plan for and cover turnover.</p> <p>RTC qualification:</p> <p>From April 2017 we have introduced a new RTC 'qualification'. This qualification will be rolled out during this year and delivered to all eligible staff by the end of Q4. From 2018/19 it will be included in the overall percentage of operational eligible staff in qualification.</p> <p>During Q1, 28% of operational staff have achieved qualification. Year to date performance slightly exceeds a quarter of the workforce.</p> <p>Due to capacity and the need to prioritise training delivery, there has been a focus on maintaining skills and competence in this area. Through attendance at incidents and brigade exercises and as part of the maintenance of competence programme RTC skills are refreshed every 3 – 6 months (depending on the module).</p>									

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Health and Safety											
5	All accident related injuries, including RIDDOR (RIDDOR & Total) (★AA)	5/81	2/9*				2/9*	1/20	0/13	0/13	↑ *
		<p>(Source: Manual Input from HR)</p> <p>During quarter 1, there were nine work related accidents, two of which were RIDDOR reportable due to the injured individuals being unfit for work for more than seven days. Therefore Q1 has seen a reduction of five accidents when compared with the previous Quarter (Q4 2016/17). Of the nine accidents in Q1, five were classified as medium severity, two of those being the RIDDOR reportable incidents. The remaining four were classed as minor. Compared to the previous quarter the number of minor accidents has seen a reduction of 6 whereas the number of moderate accidents has increased by one. The two RIDDOR reportable incidents both occurred whilst playing volleyball. One member of staff suffered a broken finger, the other a pulled hamstring. The only trend identified to date in this reporting period is related to volleyball. In addition to the two events already described, another accident was recorded, albeit of minor nature (no sickness), meaning that a third of injuries in this period were due to playing volleyball. Volleyball and ways to address the rate of injury was discussed at the Sickness Working Group on 6/7/17. The future of Volleyball at RBFRS will also be discussed with AM Risk and Performance.</p> <p>*Essentially there are two elements to this measure and whilst the number of work related accidents overall is both below target and lower than the same quarter last year, the number of RIDDOR accidents as part of this overall figure has exceeded the target and is higher than the same time period last year. So accident numbers overall are down but of those, more are of a serious nature.</p>									
Spend											
6	% of spend subject to competition	70%	88.35%				88.35%	70%			
7	Compliant spend as % of overall spend	100%	99.4%				99.4%	100%			
	(★O, P & Q)	<p>(Source: Manual Input from Procurement)</p> <p>Spend Subject to Competition This new corporate target has been created to show how much of the supplier spend has been subjected to competition. The target for this year of 70% has been exceeded and in the first quarter of 2018/19, 88.35 % of all supplier spend has been subjected to competition and is in contract.</p> <p>The Authority works in collaboration with the two other Thames Valley FRS's and have a joint procurement work plan so tendering activity is now shared between the three services. This year forty eight of the sixty one planned tenders will be through collaboration with either our Thames Valley partners or via a national framework and the Fire Reform Procurement work stream.</p> <p>Compliant Spend This new corporate target is measuring low value spend compliance in accordance with the RBFA Contract Regulations. The Authority should be seeking to achieve 100% compliance of all ongoing expenditure over £10k.</p> <p>During the first quarter of this year a small amount of new non compliant spend was identified which has resulted in the target not being achieved. This type of expenditure has occurred where low value repeat spend with a supplier or category takes place. Quotes should have been obtained to ensure the supply arrangement is providing value for money. This expenditure was required following testing of some operational equipment that needed to be replaced and the existing supplier had not been subjected to competition. As the requirement could not be delayed the order was placed taking the spend total to £11,028. This spend is the equivalent of .5% of the total supplier spend for the period April to June.</p> <p>This range of operational equipment is now being subjected to competition as part of a collaborative tender with our Thames Valley FRS partners. A review has been carried out of all low value repeat spend and these categories of expenditure are being subjected to competition over the coming months.</p>									

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Freedom of Information											
8	% Freedom of Information (FOI) requests and Environmental Information Regulations (EIR) referred to the Information Commissioner (★T)	0%	0%				0%	0%	0%	0%	↑
		(Source: Manual Input from Information Governance) No Information Requests were referred to the Information Commissioner Office (ICO) in Q1. We dealt with one request for an Internal Review. A request being referred to the ICO does not necessarily mean a failure of our process – that would be indicated by the ICO finding against us. We will continue to aim to ensure requests are answered on time and satisfactorily.									



Appendix J: Financial Position as at June 2016-17 (Revenue)

and

Appendix K: Revenue Financial Position Explanatory Notes

A fundamental piece of work is currently being carried out to realign budgets in relation to the Service Delivery restructure.

This will involve the establishment of new cost centres and discussions with new cost centre managers regarding the transfer of budgets from old cost centres to the new structure. Given that the new structure is radically different from the old one and represents 68% of the revenue budget, the task of realigning budgets and training cost centre managers is complex and will be undertaken over the next three months.

A high level report will be presented to Management Committee in November and Audit & Governance Committee in December in relation to the Q2 revenue position and detailed reporting based on the new structure will commence in Q3.

Appendix L: Financial Position as at June 2017 (Capital)

Capital Schemes	Total Budget £'000	Total Spend to Date £'000	Est. Spend to Complete £'000	Total Est. Spend £'000	Variance from Budget £'000	% Variance from Budget	Est. End Date	Notes
Fire Station Refurbishments minor works - Appliance bay door replacement programme	480	300	180	480	0	0%		As reported in the last quarter, there have been installation issues with the appliance bay doors programme which were independently reviewed by the relevant professional body. Following this review, the contractor has been working to address a number of recommendations in relation to the installation of the new bay doors. Following completion of this work, installation of the remaining bay doors will recommence. It has previously been estimated that the replacement programme would be completed within Quarter 1 of 2017/18, but due to the need to undertake the review, the completion date has been revised as Quarter 1 of 2018/19.
Fire Station Refurbishments - Hungerford Community Fire Station	809	619	190	809	0	0%	Qtr 2 2017/18	Station refurbishment completed on schedule in Qtr 1. Additional ground works and roof replacement were incorporated into the project as part of the build programme. Reduced running and annual maintenance costs will provide an ongoing revenue benefit. Costs to come include retention payments due at end of project.
Fire Station Refurbishments - minor works	355	252	103	355	0	0%	Qtr 4 2020/21	Kitchen installation works at Bracknell, Maidenhead and Langley were completed in quarter one. Subsequent to quarter one, two further capital bids have been approved by Management Committee for minor works at Wokingham Road Fire Station (station wall) and Newbury Fire Station (rear bay drainage system). Further capital bids will be presented to Management Committee later in the year.
Fire Station Build - Theale Fire Station	7,200	283	6,917	7,200	0	0%	Qtr 3 2019/20	Negotiations are nearly completion to purchase the site and are expected to be finalised in Qtr 3 2017/18. Subject to Planning progressing as expected, work will commence in Qtr 4 2017/18 and will complete in late Summer 2019. Additional funding agreed by Management Committee in July 2017.
Whitley Wood Fire Station Firehouse	350	2	348	350	0	0%	Qtr 2 2018/19	Conditions survey has revealed the safety system within the firehouse needs to be refurbished. Subject to procurement, construction is expected to commence in Spring 2018 and be completed in Autumn 2018. The budget for this project was increased by £100k by Management Committee in July 2017.

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

Capital Schemes	Total Budget £'000	Total Spend to Date £'000	Est. Spend to Complete £'000	Total Est. Spend £'000	Variance from Budget £'000	% Variance from Budget	Est. End Date	Notes
ICT - IBIS redevelopment or replacement	131	55	76	131	0	0%	Qtr 4 2017/18	System development is being progressed by a specialist c# programmer and is expected to complete in this financial year.
ICT - Helpdesk System	45	20	25	45	0	0%	Qtr 3 2017/18	Work is progressing with new functionality being rolled out across the authority. Completion is expected in Qtr 3 2017/18.
ICT - Sage 1000 upgrade	65	17	48	65	0	0%	Qtr 4 2017/18	The upgrade to Sage 1000 was successfully implemented in Qtr 4 2016/17. Plans for phase 2 of the project are being developed and will be implemented in Qtr 4 2017/18.
ICT - Learning Management System (LMS)	45	0	45	45	0	0%	Qtr 3 2017/18	The Project lead recruitment process is still ongoing which has led to a delay in the delivery of the project.
ICT - Firewatch Development	60	30	30	60	0	0%	Qtr 3 2017/18	Modules have been purchased for this work to begin and it is expected to complete on target.
ICT - Mobile Device Terminals (MDT)	60	0	60	60	0	0%	Qtr 4 2017/18	Replacement of MDT's and supporting hardware on all operational appliances including training vehicles. Equipment is being purchased and rolled out across the authority.
ICT - Cyber Security	60	0	60	60	0	0%	Qtr 4 2018/19	The tender process for this work is being developed and is expected to start in Qtr 2. The project will completed in 2018/19.
ICT - Asset Replacement	236	0	236	236	0	0%	Qtr 4 2018/19	Annual asset replacement plan to be continued over the next two financial years as identified in the ICT strategy for asset management.
Fleet & Equipment - Fire Appliances	2,925	644	2,281	2,925	0	0%	Qtr 4 2019/20	4 new fire appliances were delivered in Qtr 1 2017/18. This is a shared exercise with Thames Valley partners which will see RBFRS procure 11 vehicles over the next 3 years.
Fleet & Equipment - Special Appliances - Operational Support Unit	250	19	231	250	0	0%	Qtr 4 2017/18	Phase 1 with the 2 curtain sided support vehicles was completed in partnership working with Hampshire, with a five year replacement at a cost of £19k. The remaining funding will now be used towards the potential replacement of other vehicles as appropriate.
Fleet & Equipment - Other Ancillary Vehicles	75	50	25	75	0	0%	Qtr 4 2017/18	The fleet strategy has identified a number of vehicles which are beyond serviceable use, and these are being reviewed and replaced as necessary.
Total (Under)/Over	13,146	2,291	10,855	13,146	0			

Appendix M: Transition Bids Spend Summary as of 10 July 2017

Purple text highlights specific updates in Q1

Cost Centre	Description	Owner	Date bid approved	Latest budget £	Spend end Q1 £	Update
K10-601	Core Skills Training Programme Core skills development is a key plank of the OD programme and central to delivering new behaviours. This bid will support early delivery of key core skills and a long term core skills development and refresher programme, mapped to the Investors in People standard, leadership development and embedding into the L&D function	Becci Jefferies	01/09/15 26/04/16	104,000	68,024	Delivered to date: <ul style="list-style-type: none"> • Project management training - 92 people attended to date • Procurement framework skills – 10 people attended to date • Procurement overview – 12 people attended to date • Raising requisitions – 35 people attended to date • Finance for budget holders – 58 people attended to date • Appraisal training on new PDI process - 112 people attended to date • Appraisal (new PDI process) + corporate objectives + vision 2019 from Jan 16 – 43 people attended to date • Contracts awarded in May to four suppliers for new development courses • New courses started with first sessions held in September • Mindfulness course - 59 people attended to date (up from 48) • Resilience – 48 people attended to date • Managing Sickness course – 51 people attended to date (Up from 34) • Crucial Conversations course - 56 people attended to date (Up from 40) • Working with Members course - 30 people attended to date To be Delivered <ul style="list-style-type: none"> • Ongoing review of core skills requirements with any new training being considered for inclusion in the training plan for 2017/18 • Review of contracts for core skills provision is ongoing and due for completion during Q2 • Three new courses were started during Q1, Time management course which 31 people attended, Coaching with 8 attendees and Mentoring with 16 attendees

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £	Spend end Q1 £	Update
K12-601	HR Advisor Support To ensure an HR resource with appropriate skills and knowledge is available until end March 2018 to support Managers to execute necessary staffing restructures and re-organisation to effect organisation change.	Becci Jefferies	02/02/2016	162,500	74,433	Delivered to date: <ul style="list-style-type: none"> • Role/support is working with Heads of Service and departmental managers to assist with restructure activity including planning, reports design and consultation • Reviewed the operational leave policy • Role assisted with TVFCS transition plan activities as per the agreed plan and as appropriate • Support and consultation provided for Risk and Performance and Service Delivery restructures including consultation meetings, formal consultations and selection processes • Support arrangements reviewed during Q1 and role advertised in Q1 To be delivered <ul style="list-style-type: none"> • Support and consultation provided for Risk and Performance and Service Delivery restructures continuing to timescales and due to complete 31 August 2017 • Further look at process of fulfilling the HR support role due to lack of success at interview stage for role
K15-601	Benenden Healthcare To secure corporate membership with Benenden Healthcare for one year to provide discretionary private healthcare to RBFRS employees with the aim of reducing sickness absence. This will be subscription based.	Becci Jefferies	12/04/2016	55,000	36,791	Delivered to date: <ul style="list-style-type: none"> • Approved by the Management Committee in July. • Aligning introduction to the provision of new occupational health arrangements • New occupational provision available from 1 March 2017. Benendon arrangements aligned to ensure good integration. • Contract signed and arrangement commenced To be delivered <ul style="list-style-type: none"> • Provision to be reviewed during life of arrangement to inform future decisions • First quarter performance completed and ongoing work with Occupational Health to sign post provisions of Benenden at Occupational Health referrals

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £	Spend end Q1 £	Update
K16-602	Systems Business Partner - resource Two year temporary post – systems business partner, a customer facing role to deliver and rollout Firewatch upgrades, IBIS improvements and support development of other service applications from an end user perspective	Nikki Richards	07/06/2016	76,720	32,762	Delivered to date: <ul style="list-style-type: none"> • Post filled and started on 29/08/16 • Activity to understand role requirements and current system • Working on Firewatch 7.6 testing prior to implementation particularly around wholetime payments processing • Providing FireWatch 7.5 support • Checking if mileage claims could also be done within FW • Retained payments in Firewatch 7.6 • Documentation of new FireWatch user manuals • Set up and testing new Fire Watch modules (Availability, mobilisation, self service) To be delivered <ul style="list-style-type: none"> • Provision of FireWatch 7.6 go live and ongoing support • General FireWatch 7.6 ongoing support (and testing new fix releases from Infographics) • Testing new Availability Service (for Retained) • Training on new Availability Service for Retained • Setup new Mobilisation and Self Service modules (Testing to start in Q3)
K17-602	Data & Performance Analysis Manager Resource for a 24 month period to rectify issues with data assurance emerging because of linkages and feeds between systems	Simon Jefferies	05/07/2016	92,000	32,356	Delivered to date: <ul style="list-style-type: none"> • Recruitment completed and resource started 24/10/2016 • Audit of data flows for Corporate measures and development of SQL reports completed To be delivered <ul style="list-style-type: none"> • Oversee development of new Cadcorp webmap layers reporting system • Scoping of replacement for Scorecard (deferred from Q1 due to restructure, and staff availability) • Development of links to TV FRS for greater collaboration – work stream through TV Strategic Collaboration Programme Board

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £	Spend end Q1 £	Update
K19-601	Review of competency assessments Funding for a resource for 6 months to complete a full review of the current methodology used when assessing competence at operational ranks through understanding the “as is” situation, research on potential alternative models with and final recommendation for consideration provided	Becci Jefferies	05/07/2016	30,000	3,182	Delivered to date <ul style="list-style-type: none"> • Scope of work agreed and PID written and approved • Phase 1 work – research undertaken • Resourcing and Development Manager in post from mid May To be Delivered: <ul style="list-style-type: none"> • New Resourcing and Development Manager assessing current approach re assessment of competence • Phase 2 review to start during Q2 with re-evaluation of requirements to effectively complete the project
K22-603	Temporary accounts officer Funding for a temporary accounts officer for two years starting April 2017. This is the continuation of a post in the old structure that will be required while new ways of working are embedded within the department and the wider organisation.	Conor Byrne	02/08/2016	74,000	7,586	Delivered to date: <ul style="list-style-type: none"> • Resource recruited to start from April 2017 • Undertaking activities related to invoicing, accounts payable and receivable, cash management and credit control for the Fire Authority • Support to Trading company and dealing with invoices, carrying out credit control and cash management To be delivered: <ul style="list-style-type: none"> • Support implementation of efficient Purchase to Pay (P2P) Process
K24-602	Temporary procurement officer Funding for an additional Procurement Officer for two years starting April 2017. This resource will assist in the change of how procurement will be delivered going forward over the next 24 months, as well as assist in the delivery of the Procurement service plan ensuring compliance, knowledge and advice	Conor Byrne	02/08/2016	90,000	0	Delivered to date: <ul style="list-style-type: none"> • Recruited in August 2017 To be delivered: <ul style="list-style-type: none"> • Set up quarterly report monitoring to capture any new categories • Produce quarterly reports for SPB • Support the delivery of the Procurement work plan and service plan • Support contract management framework roll out
K25-601	Temporary resource for a full time project manager for 6 months to research, scope, plan and implement the RBFRS Apprenticeship Scheme	Becci Jefferies	01/02/2017	23,445	5,736	Delivered to date: <ul style="list-style-type: none"> • Recruitment complete and post holder started on 8 May 2017 • Project initiation document signed off at the June Programme Board To be Delivered <ul style="list-style-type: none"> • Options and recommendations relating to apprenticeship schemes to be presented at the Senior Leadership Team meeting during August

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £	Spend end Q1 £	Update
K26-601	Temporary resource to manage the introduction of a Learning Management System. The system will provide the ability to develop and host flexible e-learning reducing the need, in some areas, for face to face training.	Becci Jefferies	16/09/2016	69,516	0	Delivered to date: <ul style="list-style-type: none">Resourcing and Development Manager started in mid May and objectives set regarding the provision of a Learning Management SystemEngagement with other organisations to understand the developments in elearning To be Delivered <ul style="list-style-type: none">Further review of requirements to be undertaken and another recruitment campaign to be set up for an individual to work on this area
Total Ongoing Projects Spend (above)				777,181	260,870	
Closing Total for Projects Completed During Q1				0	0	
Closing Total for Completed Projects Prior to Q1				747,619	747,619	
Total				1,524,800	1,008,489	
Total Budget Allocated				£2,000,000		
Total Budget Available for Allocation (This is the amount of budget from the 2million which is currently available to allocate to approved bids)				£475,200		

Appendix N: Closed Transition Bids Spend Summary Q4 2016/17 (Rolling)

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Actual spend to end Q4£k	Update
K05-601	<p>Programme Office and Business Process Improvement</p> <p>For two Programme Officers. Peer review identified improvement required to project and programme management. This resource will help change the way RBFRS manages projects by providing a mechanism to support the successful delivery of the strategic commitments.</p> <p>Business Process Improvement work aimed at achieving savings and efficiencies along with the delivery of training to improve knowledge and application internally by existing staff</p>	Nikki Richards	28/04/15 12/04/16	185,746	185,746	<p>MARCH 2017 - PROJECT COMPLETED - CLOSED</p> <ul style="list-style-type: none"> • Project Management training courses started in February 2016 and will be held monthly with 81 people attended to date • Smaller modules for project planning, Equality Impact Assessments and risk have been published online • Mentoring and support provided to project managers • Project process developed for using in smaller pieces of work that require structure • Improvements completed on the intranet pages used by internal staff • Project templates reviewed and implemented • Ongoing support and structure provided to the IRMP and OD Programme Boards with regular reporting and meetings in place. • OD Programme Lead now resourced from within the Programme Office. • Business Process improvement support to Procurement where procurement templates reviewed and standardised. • Savings implemented in transition to emailing remittances rather than posting • Following tender process, Business Process Improvement Partner (Results) appointed for training course design and method to support internal work on process improvements • Project support for the ESMCP project • Project support for SAGE upgrade project • Project process designed for smaller items of work is being utilised where necessary for project work fitting the specific criteria • Project management of the new Intranet and content management system to replace Trove document management system • Process improvement actions following the review of the new starter and leaver processes

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Actual spend to end Q4£k	Update
K13-601	Leadership Development Programme Provision of a structured leadership programme designed to support SMT to deliver Vision 2019. Provision of Core Skills in Procurement, contract management and Finance to enable manager to take on increased responsibility for managing their service. Provision of a range of tools/techniques/skills to support staff to be part of change programme to deliver Vision 2019	Nikki Richards	26/04/2016	25,000	25,000	MARCH 2017 - PROJECT COMPLETED - CLOSED £45k additional Core Skills budget approved and will be managed via the K10-601 cost centre to cover the new courses with a total of approx 750 training days expected. Delivered to date: <ul style="list-style-type: none"> • Leadership development sessions booked for CMT and SMT with the overall aim to embed a one team approach across all services • Personality colour profiling of leadership team now delivered • Leadership development was considered by SMT at February 2017 meeting and further leadership development to be rolled out during Q4
K14-602	Procurement resource Request for additional resource to assist in the change of how Procurement will be delivered going forward over the next 12 months	Conor Byrne	19/01/2016	35,000	35,000	MARCH 2017 - PROJECT COMPLETED - CLOSED Delivered to date: <ul style="list-style-type: none"> • Supporting the delivery of the procurement work plan to ensure all major contracts are in place and expenditure is compliant • Delivered training on compliant purchasing and the new procurement framework • Working to deliver savings from improved third party spend • Working on various facilities tenders
K18-601	Facilities Project Manager Resource Resource to work on the creation of a contemporary, customer focused infrastructure in facilities to produce effective systems and processes	Katie Mills	05/07/2016	49,700	49,700	PROJECT COMPLETED - CLOSED Delivered to date: <ul style="list-style-type: none"> • Post filled and started on 12/09/16 • Review of contract provisions and improvements identified • Defect process review • Review of key facility processes • Finalised specifications for building maintenance and M&E contracts

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Actual spend to end Q4£k	Update
K20-601	Interim Collaboration Programme Manager Funding to cover a 1/3 share of the costs of an interim programme manager for the Thames Valley collaboration programme	Trevor Ferguson	16/08/2016	55,866	55,866	MARCH 2017 - PROJECT COMPLETED - CLOSED Delivered to date <ul style="list-style-type: none"> • Thames Valley Collaboration Programme Manager appointed and working to get up to speed with programme • Management of the Collaboration event with senior managers • Standardised procedures: Workshop held to develop change project in more detail. 142 procedures standardised • Standardised type B appliance procurement: 100% of vehicle equipment across TVP agreed as standard items for future purchases. 90% of tech comms also agreed as standard. • Programme manager no longer in place
K23-602	Temporary project accountant Funding for a Project Accountant to Manage the SAGE upgrade and delivering and embedding a more streamlined requisition and purchase order approval experience. Responsible for streamlining the chart of accounts and developing functionality in Sage to speed up the year-end closedown process	Conor Byrne	02/08/2016	30,000	30,000	MARCH 2017 - PROJECT COMPLETED - CLOSED <ul style="list-style-type: none"> • Resource started working in November • Working on planning the SAGE 1000 upgrade and migration of data to the new version • Training of individuals using the new SAGE • Writing of updated instructions on raising a purchase order • Implementation of SAGE 1000 upgrade during January • Budget monitoring activities
Total				381,312	381,312	

Appendix O: Procurement Plan as of 28 July 2017

The Procurement team review all the expenditure for each quarter against contracts in place to ensure that no off contract spend is taking place and the value of contract award is not being exceeded. In addition all RBFRS suppliers have been advised that any invoices received by RBFRS without a valid Purchase Order will be returned to them and will not be paid.

Suppliers have been advised that they should not accept a request for work or goods from RBFRS unless they are provided with a valid Purchase Order. Any non compliance identified is dealt with through meetings and training. This twinned intervention of closer working with suppliers and staff is raising the profile of the importance of spending in accordance with the new RBFA Contract Regulations.

	Project	Service	Contract Owner	Proc. Contact	Contract Detail	Specification Owner	Supply Type	Contract Status	Route	Collab. Tender	Start Date	Target End Date	New End Date	Est. Contract Value	Cap or Rev	Monthly Progress Update / Comments	RAG
Q1 2017/18	PROJ 00348	TVFC	Nikki Richards	Jane Lubbock	TVFCS - ESISEC Unicorn (Calcot/Kidlington)	Lee Arslett	Service	Renewal	Frame work	Y	01/04/2017	30/08/2017		TBC	R	Quotes received and clarification in progress	
	PROJ 00342	Response	Dave Myers	Jane Lubbock	PPE	Rob Read	Service	Renewal	Frame work	Y	01/04/2017	30/08/2017		£4,000,000	R	Kent framework awarded to Bristol Uniforms June 2017, evaluation of options to be carried out. Meeting Supplier 23 Aug 17 with TV colleagues	
	PROJ 00300	Response	Emma Elliott	Moses Kuria	Fuel	Tim Mansbridge	Supply	Renewal	Frame work	Y	01/04/2017	31/08/2017		£250,000	R	Contract to be awarded via Kent FRS August 2017	
	PROJ 00305	Facilities	Katie Mills	Lee Wilkey	White Goods	Matt Barber	Supply	No Contract	Tender	Y	01/05/2017	30/05/2017	30/08/2017	£50,000	R	Tenders received and evaluation in progress	
	PROJ 00312	Fleet	Dave Myers	Moses Kuria	Leased Cars	Tim Mansbridge	Service	No Contract	Frame work	Y	10/05/2017	30/06/2017	30/07/2017	£400,000	C	Tenders received and evaluation in progress	
	PROJ 00367	Response	Dave Myers	Moses Kuria	Power Tools	Rob Read	Supply	New	Tender	Y	01/06/2017	30/08/2017		£50,000	R	Tenders to be returned 24/7/17	
	PROJ 00177	Facilities	Katie Mills	Lee Wilkey	Print and Design	Katie Mills	Supply	Renewal	Pref. Supplier list	N	01/06/2017	30/08/2017		£40,000	R	Preferred supplier list being created in accordance with RBFA Contract Regulations	

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

	Project	Service	Contract Owner	Proc. Contact	Contract Detail	Specification Owner	Supply Type	Contract Status	Route	Collab. Tender	Start Date	Target End Date	New End Date	Est. Contract Value	Cap or Rev	Monthly Progress Update / Comments	RAG
	PROJ 00313	Facilities	Katie Mills	Lee Wilkey	Building Cleaning Contract	Matt Barber	Service	Renewal	Contract extend	N	01/06/2017	30/06/2017		£750,000	R	Contract extension request being drafted	
	PROJ 00358	HR	Becci Jefferies	Moses Kuria	Staff Discount retail scheme	Helen Morbin	Supply	No contract	Frame work	Y	01/06/2017	30/07/2017	30/08/2017	£30,000	R	Clarifications Issued due 20/7/17	
	PROJ 00360	HR	Becci Jefferies	Moses Kuria	Fitness Equipment Purchase	Helen Morbin	Supply	No contract	Frame work	Y	01/06/2017	30/07/2017	30/08/2017	£80,000	C	Tender issued via ESPO framework 19/717	
	PROJ 00359	HR	Becci Jefferies	Emma Elliott	Lifestyle Kiosks	Helen Morbin	Supply	No contract	Quote	Y	01/06/2017	30/07/2017	30/08/2017	£10,000	R	Quotes received and clarifications being reviewed	
	PROJ 00346	Facilities	Katie Mills	Emma Elliott	Buffet lunches	Matt Barber	Supply	Renewal	Tender	Y	01/06/2017	30/07/2017	30/08/2017	£50,000	R	Tender documentation being reviewed and to be issued to the market August 17	
	PROJ 00344	Facilities	Katie Mills	Moses Kuria	Building Materials	Katie Mills	Supply	No contract	Proc. for Housing Frame work	Y	01/06/2017	30/07/2017	30/09/2017	£20,000	R	Several suppliers being used. Low value repeat spend by different teams needs to be put into a compliant solution	

Appendix P: Forthcoming Contract Procurements

	Project	Service	Contract Owner	Proc. Contact	Contract Detail	Specification Owner	Supply Type	Contract Status	Route	Collab. Tender	Start Date	Target End Date	Est. Contract Value	Cap / Rev	Monthly Progress Update / Comments	RAG
Q2 2017/18	PROJ00 317	Response	Dave Myers	Jane Lubbock	Uniform & Accessories	Matt Barber	Supply	Renewal	Hants Frame work	Y	01/07/ 2017	31/03/ 2018	£100,000	R	Current framework extended and new national framework being scoped. Hants FRS leading	
	PROJ00 302	BIS	Nikki Richards	Jane Lubbock	IT Health Check	Lee Arslett	Service	Renewal	TBC	Y	15/05/ 2017	31/07/ 2017	TBC	R	To be issued in Q2	
	PROJ00 368	L&D	Becci Jefferies	Emma Elliott	Safeguarding Training	Liz Warren	Service	New	Quotation	N	07/07/ 2017	31/07/ 2018	£20,000	TBC	Quotes being obtained Aug 17	
	PROJ00 311	Response	Dave Myers	Moses Kuria	Light Vehicles (White Fleet)	Tim Mansbridge	Supply	No contract	Tender / Frame work	Y	01/06/ 2017	30/06/ 2017	£125,000	C	Herts CC Framework in place, review options for future purchases	
	PROJ00 307	Response	Dave Myers	Moses Kuria	Radiation Protection Service	Lincoln Ball	Service	Renewal	Quotation	Y	01/06/ 2017	30/06/ 2017	£30,000	R	To be issued in Q2	
	PROJ00 369	BIS	Nikki Richards	Emma Elliott	Lone Working Solutions	Lee Arslett	Service	New	TBC	Y	01/06/ 2017	30/06/ 2017	TBC	TBC	Quotes to be issued Q2. Aim for single solution across TV	
	PROJ00 304	Response	Dave Myers	Emma Elliott	Coach works	TBC	Service	Renewal	TBC	Y	01/07/ 2017	30/08/ 2017	TBC	TBC	Look at options to create a collaborative solution	
	PROJ00 323	Fleet	Nikki Richards	Moses Kuria	Hardware Maintenance Contract (Transport Team)	Dean Parratt	Service	Renewal	Quotation	Y	01/06/ 2017	31/07/ 2017	£8,000	R	Look at options to create a collaborative solution	
	PROJ00 352	Response	Dave Myers	Moses Kuria	Fire Safety Equipment	Rob Read	Supply	New	Tender	Y	01/07/ 2017	30/09/ 2017	TBC	R	Look at options to create a collaborative solution	
	PROJ00 353	TVFC	Nikki Richards	Jane Lubbock	TVFCS - Review of Telephony	Lee Arslett	Service	Renewal	Frame work	Y	01/07/ 2017	30/10/ 2017	TBC	R	To be issued in Q2	
	PROJ00 324	Strategy & Risk	Simon Jefferies	Jane Lubbock	Performance Management System	Gayle Moon	Service	No contract	Tender	Y	01/08/ 2017	30/11/ 2017	TBC	C	To be issued Q2 but possible delay whilst review carried out	
	PROJ00 327	BIS	Nikki Richards	Emma Elliott	HP Laptops and Accessories (FW RM1054)	Lee Arslett	Supply	Renewal	Tender	Y	01/08/ 2017	30/07/ 2017	£100,000	R	Framework may be extended	
	PROJ00 314	FAC / L&D	Simon Jefferies	Jane Lubbock	Fire House New Systems	Dom Manton	Works	New	Tender	N	01/08/ 2016	31/10/ 2017	£250,000	C	Deferred until Capital bid approved	

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

	Project	Service	Contract Owner	Proc. Contact	Contract Detail	Specification Owner	Supply Type	Contract Status	Route	Collab. Tender	Start Date	Target End Date	Est. Contract Value	Cap / Rev	Monthly Progress Update / Comments	RAG
	PROJ00 328	BIS	Nikki Richards	Emma Elliott	Surface Pro's and Accessories (FW RM1054)	Lee Arslett	Supply	Renewal	Tender	Y	01/08/2017	30/09/2017	£90,000	R	Framework may be extended	
	PROJ00 337	HR	Becci Jefferies	Jane Lubbock	Core Skills	Becci Jefferies	Service	Renewal	TBC	N	01/06/2017	30/07/2017	TBC	R	Review future requirements	
	PROJ00 329	BIS	Nikki Richards	Emma Elliott	Ruggedised Laptops	Lee Arslett	Supply	No contract	Frame work	Y	01/08/2017	30/09/2017	£60,000	R	Framework	
	PROJ00 330	BIS	Nikki Richards	Emma Elliott	Microsoft Tablet - NFC53 Framework (RM1054)	Lee Arslett	Supply	Renewal	Tender	Y	01/08/2017	30/09/2017	£100,000	R	To be issued in Q2	
	PROJ00 322	Op. Support	Katie Mills	Emma Elliott	Aero Healthcare	Dave Myers	Service	Renewal	Tender	Y	01/08/2017	30/10/2017	£10,000	R	To be issued in Q2	
	PROJ00 325	Strategy & Risk	Simon Jefferies	Jane Lubbock	New station construction - Theale	Alex Brown	Works	New	Tender	N	01/08/2017	15/11/2017	£4,000,000	C	To be issued in Q2	
	PROJ00 321	BIS	Nikki Richards	Jane Lubbock	Network & Server Resilience	Nikki Richards	Service	Renewal	Tender	N	01/09/2017	30/11/2017	£42,000	R	Tender renewal opportunity to be issued to market	
Q3 2017/18	PROJ00 349	Strategy & Risk	Simon Jefferies	Jane Lubbock	Fire Station new construction or refurbishment -	Alex Brown	Works	New	Tender	N	01/10/2017	30/12/2017	£1,000,000	C	Dates to be confirmed	
	PROJ00 341	Response	Dave Myers	Moses Kuria	Foam	Rob Read	Supply	New	Tender	Y	15/05/2017	30/06/2017	£100,000	R	Tender to be scoped in collaboration with other FRS's	
	PROJ00 318	Facilities	Katie Mills	Lee Wilkey	Water deregulation	Matt Barber	Service	No contract	Frame work	Y	01/06/2017	31/07/2017	TBC	R	Aim for collaboration with TVP and TV FRS's	
	PROJ00 308/9	HR	Becci Jefferies	Jane Lubbock	Agency Staff	Becci Jefferies	Service	Renewal	Frame work	Y	01/05/2017	30/09/2017	£300,000	R	Review to be undertaken as option to collaborate with TVP and FRS's	
	PROJ00 361	HR	Helen Morbin	Moses Kuria	Fitness Equipment for new fire fighter standards	Helen Morbin	Supply	New	Tender	Y	01/10/2017	30/12/2017	TBC	C	Review to be undertaken as option to collaborate with TVP and FRS's	
	PROJ00 366	Facilities	Katie Mills	Lee Wilkey	5 year fixed Wire Test Whole Estate	Katie Mills	Service	New	Tender	N	01/10/2017	30/12/2017	TBC	R	To be issued in Q3	

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

	Project	Service	Contract Owner	Proc. Contact	Contract Detail	Specification Owner	Supply Type	Contract Status	Route	Collab. Tender	Start Date	Target End Date	Est. Contract Value	Cap / Rev	Monthly Progress Update / Comments	RAG
	PROJ00 350	Strategy & Risk	Simon Jefferies	Jane Lubbock	Fire Station Refurbishment	Alex Brown	Works	New	Tender	N	01/10/2017	30/12/2017	£1,000,000	C	Dates to be confirmed	
	PROJ00 364	Facilities	Katie Mills	Emma Elliott	Yellow News Subscription	Bridget Aherne	Service	Renewal	Tender	Y	01/10/2017	30/12/2017	£20,000	R	To be issued in Q3	
	PROJ00 336	Op. Support	David Myers	Emma Elliott	Boarding Up Services	Dave Myers	Service	Renewal	TBC	Y	01/10/2017	31/12/2017	TBC	R	To be issued in Q3	
	PROJ00 310	Fleet	Dave Myers	Jane Lubbock	Supply of Scrap Cars	Dom Manton	Supply	Renewal	Tender	Y	01/10/2017	31/01/2018	£100,000	R	To be issued in Q3	
	PROJ00 339	BIS	Nikki Richards	Jane Lubbock	MDT Software	Lee Arslett	Service	Renewal	TBC	Y	01/10/2017	31/01/2018	TBC	R	To be issued in Q3	
	PROJ00 332	Fleet	Dave Myers	Moses Kuria	BA Compressors Service and Maintenance	Dean Parratt	Service	Renewal	TBC	Y	01/11/2017	30/01/2018	TBC	R	New Framework available via Kent FRS	
	PROJ00 319	Response	Simon Jefferies	Jane Lubbock	Asset Management System	TBC	Supply/Service	No contract	Tender	Y	01/11/2017	28/02/2018	TBC	C	Possible option to issue in Q3	
	PROJ00 351	Response	Dave Myers	Emma Elliott	CCTV - appliances	Rob Read	Service	Renewal	Tender	Y	01/12/2017	30/03/2018	TBC	R	To be in issued in Q3	
Q4 2017/18	PROJ00 340	Facilities	Katie Mills	Lee Wilkey	Grounds Maintenance	Matt Barber	Supply	Renewal	TBC	N	01/01/2018	31/03/2018	TBC	R	To be issued in Q4	
	PROJ00 333	BIS	Nikki Richards	Moses Kuria	Mobile Telephony	Lee Arslett	Service	Renewal	Frame work	Y	01/01/2018	30/03/2018	TBC	R	To be issued in Q4	
	PROJ00 334	BIS	Nikki Richards	Moses Kuria	VOIP Maintenance	Lee Arslett	Service	Renewal	Frame work	Y	01/01/2018	30/03/2018	TBC	R	To be issued in Q4	
	PROJ00 331	Facilities Mgmnt	Katie Mills	Lee Wilkey	Automatic Meter Readers - Electricity	Matt Barber	Supply	Renewal	TBC	N	01/03/2018	31/03/2018	TBC	R	To be issued in Q4	
	PROJ00 338	BIS	Nikki Richards	Moses Kuria	Microsoft Licences	Simon Yardley	Supply	Renewal	Frame work	Y	31/03/2018	TBC	TBC	R	To be issued in Q4	

Appendix Q: Completed Contract Procurements

	Project	Service	Contract Owner	Proc. Contact	Contract Detail	Specification Owner	Supply Type	Contract Status	Route	Collab. Tender	Start Date	Target End Date	Est. Contract Value	Cap / Rev	Monthly Progress Update / Comments	RAG
Completed	PROJ0 0132	Facilities	Katie Mills	Lee Wilkey	Support and Maintenance of the Trend Building Management System	Katie Mills	Service	Renewal	Quotes	N	01/04/2017	31/03/2021	£16,000	R	Awarded to Kendra	
	PROJ0 0335	BIS	Nikki Richards	Jane Lubbock	Cadcorp	Matt Pinto	Supply	Contract Extension	Extension approved	Y	01/10/2017	31/01/2018	£48,000	R	Awarded to Cadcorp	
	PROJ0 0345	Response	Dave Myers	Jane Lubbock	Trauma training	Dave Myers	Service	New	Tender	Y	01/05/2017	30/05/2017	£200,000	R	Exempt under Public Contract Regulations 2015 (Public to Public)	
	PROJ0 0117	BIS	Nikki Richards	Moses Kuria	Satellite Broadband Internet Services Agreement - Vehicle MRV/ICU	Nikki Richards	Service	Renewal	Quotation	N	11/05/2017	01/06/2017	£23,000	R	Awarded to Excelerate	
	PROJ0 0356	Fleet	Dave Myers	Moses Kuria	Purchase of Cars of 3 Kia Sportages	Tim Mansbridge	Supply	New	Frame work	N	01/06/2017	31/05/2024	£51,000	C	Awarded to Hendy Limited	
	PROJ0 0355	HR	Simon Jefferies	Emma Elliott	Health and Safety Licence	Tracy Hawkins	Service	Renewal	Quotation	N	01/05/2017	01/07/2017	£50,000	R	Awarded to UBM	
	PROJ0 0151	Strategy & Risk	Simon Jefferies	Jane Lubbock	Multi Disciplinary 4 year contract	Alex Brown	Service	New	ESPO Frame work	N	01/04/2017	17/07/2017	£2,000,000	C	Awarded to Ridge LLP	
	PROJ0 0301	Response	Dave Myers	Jane Lubbock	Undress Uniforms Wardrobe	Lloyd Palmer	Supply	No contract	Tender	Y	01/05/2017	30/06/2017	£30,000	R	Awarded to Samuel Brothers	
	PROJ0 0174	Response	Dave Myers	Moses Kuria	Tyres - supply and fit	Tim Mansbridge	Supply/ Service	Renewal	Frame work	Y	01/04/2017	02/06/2017	£228,000	R	Awarded to ATS Euromaster	
	PROJ0 0354	Fleet	Dave Myers	Emma Elliott	Overalls Managed Service	Tim Mansbridge	Service	New	Quotation	N	01/06/2017	30/06/2017	£3,000	R	Awarded to Johnsons Apparelmaster	
	PROJ0 0306	Prevention	Mark Gasgarth	Emma Elliott	Smoke detectors & Sensory Equipment - CO2 Alarms	Steve Beard	Supply	Renewal	Frame work	Y	01/05/2017	30/06/2017	£240,000	R	WMFRS framework awarded. Fireblitz Extinguisher Ltd Awarded	
	PROJ0 0121	Facilities	Katie Mills	Lee Wilkey	Measured Term Contract Lot 2: M&E Works	Matt Barber	Works	Tender	OJEU/ Frame work	N	01/04/2017	17/07/2017	£1,000,000	R	Awarded to Kier PLC	
	PROJ0 0122	Facilities	Katie Mills	Lee Wilkey	Measured Term Contract Lot 1: Building maintenance	Matt Barber	Works	Tender	OJEU/ Frame work	N	01/04/2016	17/07/2017	£1,000,000	R	Awarded Kier PLC	

Appendix R: Human Resources Performance

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 Y.T.D.	Y.T.D. Target	2017/18 Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
STAFF IN POST (★S)	Wholetime	382				382			392	392	
	Retained	65				65			66	66	
	Control	38				38			38	38	↔
	Non Uniformed	129				129			131	131	
	Total Number of Staff in Post	614				614			627	627	
<p>NB.18 individuals hold more than one role (Dual Contract). A recent TVFCS recruitment campaign has successfully resulted in the appointment of 3 FF Control staff which will commence early September and cover all vacancies of forthcoming maternity periods. BME figures have increased as we have recruited 7 BME staff this quarter. Female Firefighters and disabled staff figures would appear to have dropped, however, this is due to an increase in staff in post figure this quarter. Real term numbers of female Firefighters and disabled employees has remained the same. RBFRS continues to work with staff to address disability issues to ensure reasonable adjustment activity is undertaken to support staff and encourage retention. 2016/17 saw one of the highest percentage of female operational staff in post (17) and this continues to be the case this quarter even though the number of female Firefighters remains the same as last quarter. RBFRS capture BME and percentage of female Firefighters data on a quarterly basis. We also provide information to the Home Office annually. This year the Home Office added extra voluntary fields for completion which included gender, ethnicity and age of all new starters across the service.</p>											
AGE PROFILE	25 and Under	19				19			28	28	
	26-35	166				166			155	155	↑
	36-45	212				212			224	224	
	46-55	184				184			173	173	↑
	56-65	30				30			40	40	
	66 and Over	3				3			7	7	
	Total	614				614			627	627	
<p>In common with other Services, RBFRS has an ageing workforce profile. This results in a potential organisational risk around the required fitness levels of operational staff as the organisation will have a larger number of operational individuals over 50. The Health, Safety and Wellbeing Strategy and Action Plan recognise the need to focus attention in this area. Actions include workforce planning, increased support of fitness and initiatives to encourage healthy lifestyles and general wellbeing. The Movement Specialist and Occupational Health Physiotherapy provisions together with the new Benenden health care arrangements further provide support to all staff. Initial usage statistics suggest the Benenden scheme is being well used, and may therefore be a useful tool to utilise in the future for health interventions. A project lead looking at apprenticeship schemes has been appointed. The focus of this project role is to plan and consider options in relation to undertaking apprenticeship schemes. This will have likely impacts on our age profile. In conjunction with Bath University and Chris Rhodes (Clinical Nurse manager) from Duradiamond RBFRS is working on a funding application to undertake a piece of research into interventions for the older workers. The Intervention will include a physical and psychological element. Confirmation of whether we have received funding to progress this piece of work will be known around October 2017.</p>											

Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 Y.T.D.	Y.T.D. Target	2017/18 Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
FEMALE STAFF	Wholetime	3.66%				3.66%	4%	4%	3.32%	3.32%	↑
	Retained	4.61%				4.61%			3.03%	3.03%	↑
	Control	71.05%				71.05%			63.2%	63.2%	↑
	Non Uniformed	54.26%				54.26%			54.2%	54.2%	↔
	Total	18.56%				18.56%			17.57%	17.57%	↑
	Our gender profile is broadly in line with other Fire and Rescue Services and we continue to work towards encouraging female applicants into the operational roles. No new female Firefighters have been recruited this quarter. However, one RDS FF was successfully recruited to the WT service.										
ETHNICITY FIGURES	Wholetime	4.71%				4.71%	5%	5%	4.97%	4.97%	
	Retained	1.53%				1.53%			0%	0%	↑
	Control	2.63%				2.63%			2.63%	2.63%	↔
	Non Uniformed	13.17%				13.17%			9.92%	9.92%	↑
	Total	6.02%				6.02%			5.10%	5.10%	↑
	RBFRS has historically struggled to attract sucessful applicants from Black and Minority Ethnic (BME) communities and continues to look at ways to attract successful applicants. 'Have a Go' events continue to be run. With limited Wholetime recruitment likely in the forthcoming years, targeting of youth initiatives and RDS recruitment will become a key area for positive action. Of the 25 people recruited this quarter: 6 x WT, 3 x Control, 11 x Non Uniform, 5 x RDS (7 BME = 6 Non Uniform and 1 RDS)										
STAFF TURNOVER	Wholetime	7				7			1	1	↑
	Retained	2				2			1	1	
	Control	0				0			3	3	
	Non Uniformed	3				3			7	7	
	Total Number of Leavers (Heads)	12				12			12	12	↔
	Staff in Post (SIP)	614				614			627	627	
	Percentage of Leavers vs.SIP	1.95%				1.95%			1.91%	1.91%	↑
During Q1 there were 12 leavers equating to a YTD turnover of 1.95% of staff based on a predicted full year this would result in an out turn below the National average. To date 75% of exit survey respondents (3 out of 4 individuals) would recommend RBFRS as an employer.											

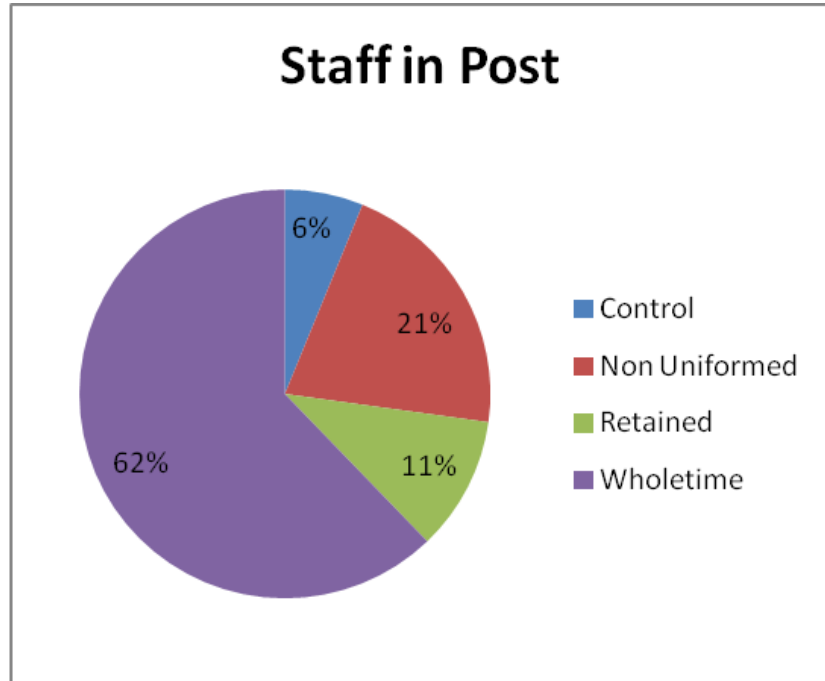
Strategic Performance Report Q1 2017/18

Quadrant Two – Corporate Health

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 Y.T.D.	Y.T.D. Target	2017/18 Target	2016/17 Performance		
									Q1 16/17	YTD 16/17	16/17 Vs 17/18 YTD
CAUSE OF SICKNESS	Muscular Skeletal	444 (36%)				444 (36%)					
	Headache/Migraine/Neurological	112 (9%)				112 (9%)					
	Mental Health	203 (16%)				203 (16%)					
	All Other	477 (39%)				477 (39%)					
	Total	1236 (100%)				1236 (100%)					
This is the second quarter in which this information has been required. Rolling information will be provided going forward. Please refer to HR Corporate Measure “% of working time lost to sickness across all staff groups”											
DAYS LOST TO SICKNESS	Short	412				412			433	433	↑
	Long	792				792			510	510	
	Total	1204				1204			943	943	
(RDS figures are not included as figures are calculated based on the average shift length and these vary considerably as many sickness episodes are recorded as unavailable). Full commentary regarding sickness can be found in the Corporate Measures “the percentage of working time lost to sickness across all staff groups”.											

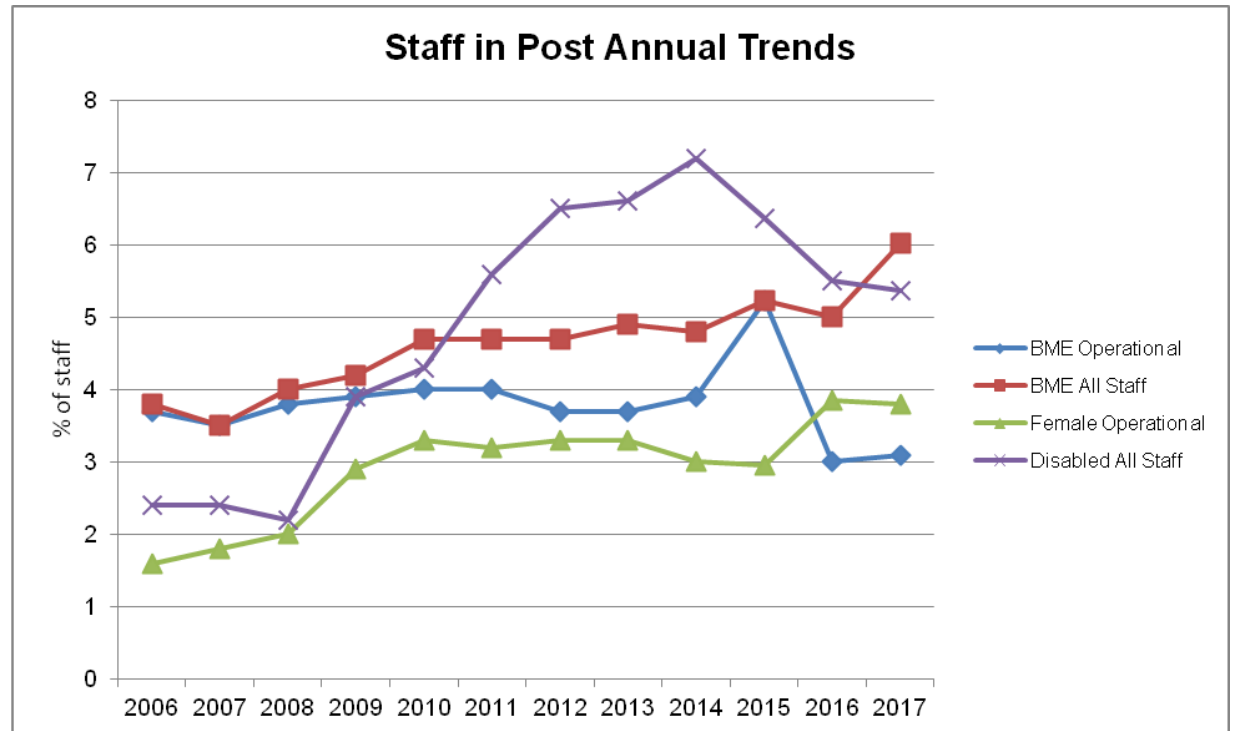
Appendix S: HR Supporting Charts

Staff in Post



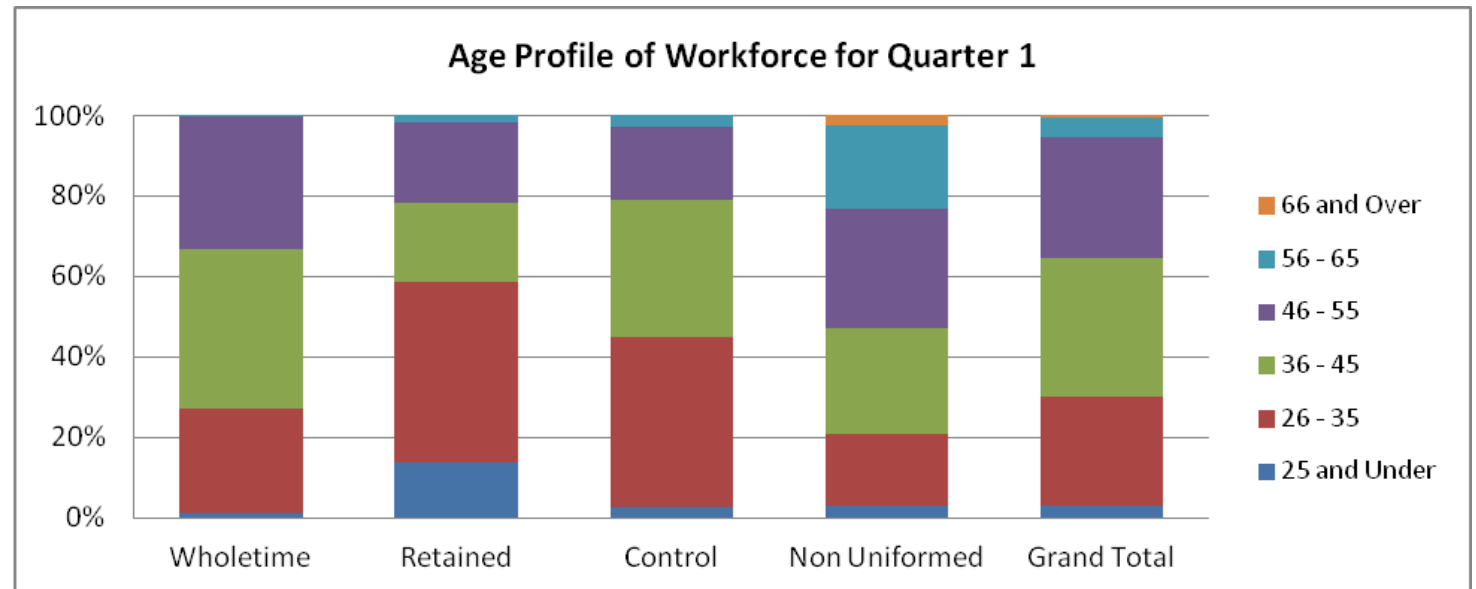
Quarter 1 – 2017/18

Percentage of BME operational	3.09%
Percentage of BME all Staff	6.03%
Percentage of female Firefighters	3.80%
Percentage of Disabled staff	5.37%



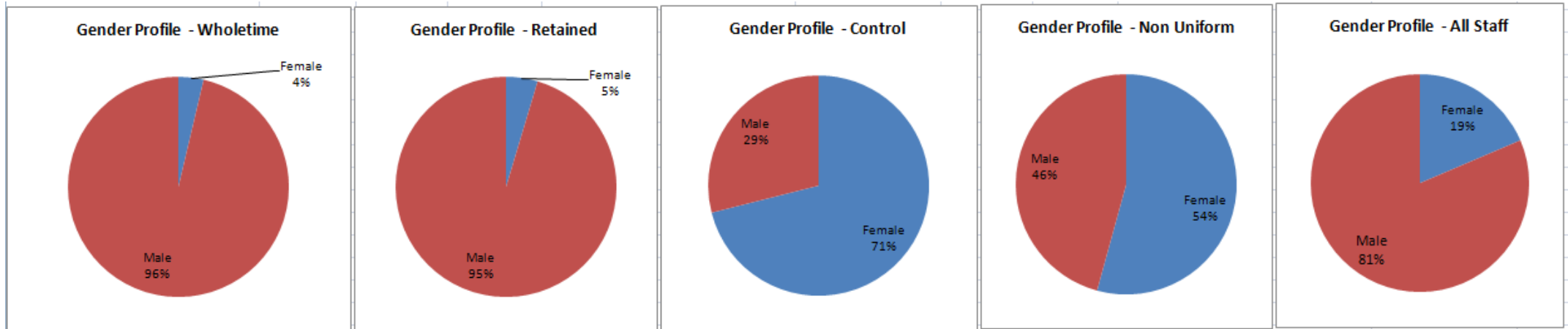
Staff Age Profile

Age group	Wholetime	Retained	Control	Non Uniformed	Grand Total
25 and Under	5	9	1	4	19
26-35	98	29	16	23	166
36-45	152	13	13	34	212
46-55	126	13	7	38	184
56-65	1	1	1	27	30
66 and Over	0	0	0	3	3
Grand Total	382	65	38	129	614



Gender of Staff

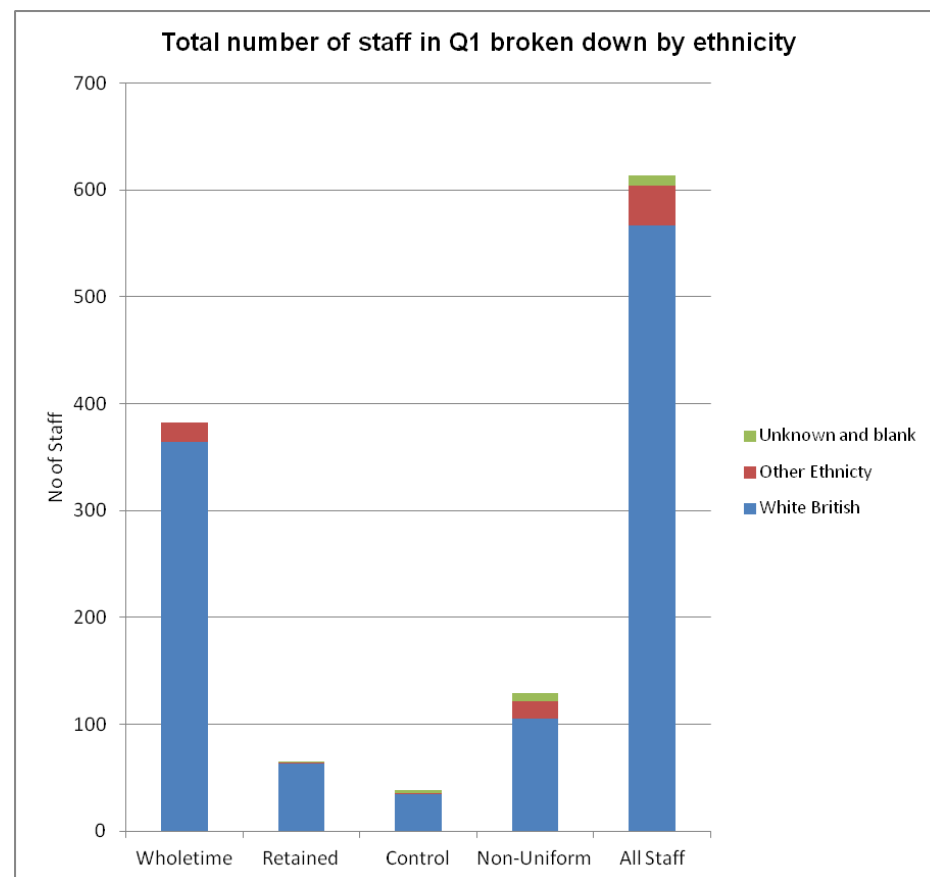
Gender	Wholetime	Retained	Control	Non Uniform	All Staff
Female	14	3	27	70	114
Male	368	62	11	59	500
Total	382	65	38	129	614



Ethnicity of Staff

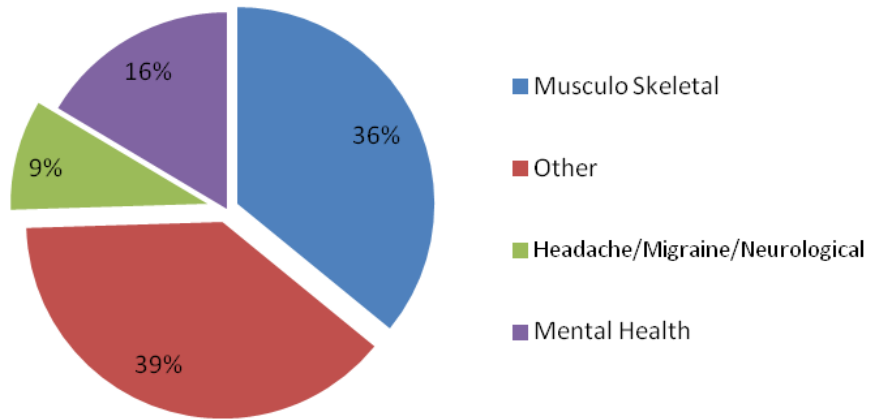
Ethnicity	Number	%
Asian or British Asian Indian	3	0.5
Asian or British Asian Pakistani	1	0.2
Asian or British Asian Other	2	0.3
Black or Black British African	4	0.7
Black or Black British Caribbean	4	0.7
Black or Black British other	1	0.2
Chinese	2	0.3
Mixed White and Asian	3	0.5
Mixed White and Black Caribbean	2	0.3
Other	1	0.2
Other Mixed	2	0.3
Unknown/Blank	10	1.6
White British	567	92.3
White Irish	4	0.7
White Other	8	1.3
Tot al	614	100.0

Ethnicity	Wholetime	Retained	Control	Non-Uniform	All Staff
White British	364	63	35	105	567
Other Ethnicity	18	1	1	17	37
Unknown and blank	0	1	2	7	10
Total	382	65	38	129	614



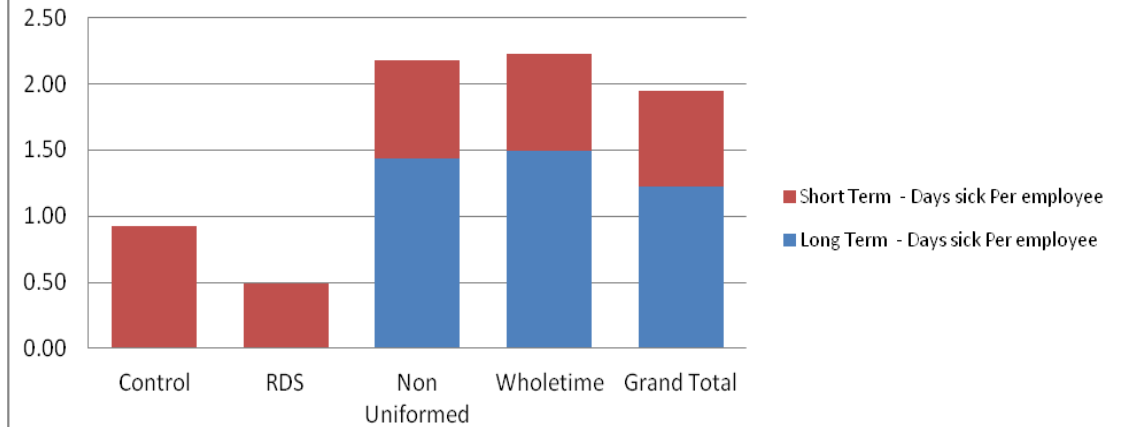
Days Lost to Sickness

Percentage of days lost to key causes for Q1



Staff Group	% of working time lost to sickness Q1	% of working time lost to sickness YTD
Control	5.31	5.31
Non- Uniform	4.23	4.23
WT	5.88	5.88
RDS	1.29	1.29

Days Lost to sickness 1 April - 30 June 2017



Appendix T: Information Governance Report (April-June 2017)

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

Information Requests	April 2017	May 2017	June 2017	TOTAL
New Information Requests Received	7	9	14	30
Total Information Requests Actioned	16	14	22	52
IGT - Hours Spent on Information Requests	22 ½	20 ¼	28 ¾	71 ½
Others - Hours Spent on Information Requests	4	5 ¾	9 ¾	19 ½
Timeframes not met (figures relate to request due date)	0	0	0	0
Internal Reviews (figures relate to request due date)	0	0	1	1
Incident Reports	April 2017	May 2017	June 2017	TOTAL
New IRS/FI requests received this month	13	17	17	47
IRS/FI requests confirmed (<i>includes not charged for</i>)	2	9	3	14
Total IRS/FI requests actioned (<i>incl. still in progress</i>)	15	20	19	54
Total ££ so far this year	£291.00 (£291)	£690.00 (£981)	£297.00 (£1278)	£1,278.00

The number of Information Requests has risen since the Grenfell Tower incident. Of the 14 June requests, six were related to this incident. To date in July, six of 11 requests are related.

The internal review was of a request for hydrant location information which was refused on the grounds of security. This was supported by a previous ICO decision notice. The internal review upheld the original decision.

Incident Recording System (IRS) Reports are charged at £96.00 for those initiated in 2016/17, and at £99.00 for those initiated in 2017/18. Fire Investigation (FI) Reports (where produced) are charged at £334.00+VAT for those initiated in 2016/17, and at £344.00 for those initiated in 2017/18. Report costs are waived for TVP, local authorities, and other public sector agencies.

Appendix U: Corporate Health Measure Definitions

ID	Corporate Health Measure	Definition
Human Resources and Learning & Development		
1	% 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.
2	% 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.
3	% of eligible staff with Personal Development Appraisals	This measure reflects the percentage of eligible employees who have had a Personal Development Appraisal. Eligible staff are those who have completed their initial probation period before the end of the PDA period and who have not been absent for over 50% of the reporting period. Employees moving within the organisation to new roles on trial or probation periods will still be eligible for a PDA.
4	% of eligible operational staff in qualification	This is a measure of the areas of qualification within the fire professional framework
Health and Safety		
5	All injury accidents including RIDDOR (RIDDOR & Total)	The total number of accidents including RIDDOR (<i>Reporting of Injuries Diseases and Dangerous Occurrences Regulations</i>) which are more serious injury accidents.
Finance and Procurement		
6	% of spend subject to competition	This measure is looking at all 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.
7	Compliant spend as a % of overall spend	This measure calculates the supplier spend that is in a compliant contract as a % of the total spend to external bodies and suppliers. (as per RBFA contract regulations)
Freedom of Information		
8	% FOI and EIR requests referred to the Information Commissioner	The percentage of Freedom of Information requests and Environmental Information Regulations which are referred to the Information Commissioner.



Quadrant Three Appendices

Appendix V: Priority Programmes Integrated Risk Management Plan (IRMP)

Programme Name	Integrated Risk Management Programme (IRMP)		Reporting Period	April to June 2017 (Q1)
Programme Status	Last Quarter	This Quarter	Comments on Progress and Recommended Action	
Time			The majority of projects are on track with no issues reported. ESMCP remains at Amber status this quarter due to the complexity of the external factors affecting timescales. The Whitley Wood project is also experiencing issues with time and cost and strategic work with partners is required to manage these issues.	
Cost				
Delivery/ outcome				

Project Summary

Project	Project Manager	Deliverables to Date	To be Delivered	RAG	Issues for Action
Project 1 – Service re-design	Jim Powell	<ul style="list-style-type: none"> Report outcome presented to Fire Authority Proposals approved by the Fire Authority 	<ul style="list-style-type: none"> Projects to be commissioned by new Project initiation documents 	↔	<ul style="list-style-type: none"> On track, no issues raised
Officer Cover Review	Doug Buchanan	<ul style="list-style-type: none"> Early draft report now completed and circulated for feedback from SLT and FBU 	<ul style="list-style-type: none"> Final version of the report to be published for review 	↔	<ul style="list-style-type: none"> On track, no issues raised
ESMCP	Lee Arslett	<ul style="list-style-type: none"> Additional funding request sent to Home Office following request from them to identify funding shortfalls National procurement process underway for handheld devices TVFCS order placed for ground based network. Requested documentation on organisation submitted Attendance at programme organised workshops 	<ul style="list-style-type: none"> Costed remediation plan for TVFCS Replacement MDT evaluation User organisations enrolment documentation to be reviewed and signed 	↔	<ul style="list-style-type: none"> Proposed transition timescale change has meant our ability to maintain the interim solution for MDTs will not be possible and a procurement exercise is underway. Alternative MDTs being evaluated Lack of information from the programme is hindering progress around planning as having to make assumptions. Still awaiting agreed full plan to be provided from the programme

Strategic Performance Report Q1 2017/18

Quadrant Three- Priority Programmes

Project	Project Manager	Deliverables to Date	To be Delivered	RAG	Issues for Action
Hungerford refurb.	Alex Brown	<ul style="list-style-type: none"> Build and replacement works now complete Station now moved back in TVP now working from the station 	<ul style="list-style-type: none"> Station re-opening ceremony 3 July Station open day to be held on 8 July Final snagging to be carried out during July 	↔	<ul style="list-style-type: none"> On track, no issues raised
New Fire Station at Theale	Alex Brown	<ul style="list-style-type: none"> Full planning application submitted and will take approx 13 weeks End user/key stakeholder workshops held to refine design and layout 	<ul style="list-style-type: none"> Estimate of final costs following contractor tender return Purchase of site documents to be prepared and site valuation Complete site purchase negotiations Outcome of planning application to enable progress on site purchase 	↑	<ul style="list-style-type: none"> On track, no issues raised
Whitley Wood Project	Alex Brown	<ul style="list-style-type: none"> Complex high level options developed 	<ul style="list-style-type: none"> Presentation to Strategic Leadership Team Stakeholder engagement reviewing high level options Presentation to Management Committee and FA for funding approval Development of technical / detailed design 	↔	<ul style="list-style-type: none"> Requirement for strategic input and direction from SLT at August meeting Lack of clarity around requirements is contributing to a delay Cost options have been put forward with only one close to original funding estimate in the SAIF
Review of RDS recruitment and retention	Paul Jones	<ul style="list-style-type: none"> 3 new candidates have passed the initial National Fire Service Tests (NFST) 2 options on academic courses provided by Newbury College RBFRS presence @ Lambourn Open Day 	<ul style="list-style-type: none"> Training for new candidates Many Clouds Lambourn open day in April and positive action day in May 	↔	<ul style="list-style-type: none"> On track, no issues raised
Firehouse Facility	Dom Manton	<ul style="list-style-type: none"> Project initiation document approved in June Stakeholder engagement with station personnel 	<ul style="list-style-type: none"> Creation of firehouse specification Creation of tender document 	↔	<ul style="list-style-type: none"> On track, no issues raised



Appendix W: Closed IRMP Projects

Project	PM	Deliverables to Date	To be Delivered	Issues for Action
IBIS Development	Matt Pinto	<ul style="list-style-type: none"> • SAFER Data integration • IBIS security model • AddressBase format change • Short Audit form • Re-inspection period change • IRS CLG Uploader application issues 	<ul style="list-style-type: none"> • CRR Module integration • Testing of the HFSC module testing • Automated integration of Toughbook data to be • HFSC / Toughbook app 	<ul style="list-style-type: none"> • Project closed and now managed as business as usual
Information Governance	Becca Chapman	<ul style="list-style-type: none"> • E-learning package ('Protecting Information') identified, purchased and tailored. • Information Governance and Assurance Framework and policy drafted and with SIRO for review. • IGM qualification in GDPR. 	<ul style="list-style-type: none"> • Revise and issue policies for: <ul style="list-style-type: none"> ◦ Information Governance and Assurance Framework and Policy ◦ Information Classification and Handling Policy ◦ Records Management Policy • Protecting Information e-learning roll out across organisation in Q1 • Remedial actions from first ITHC for ESN 80% complete • Paper to SLT setting out plan for GDPR compliance. • Complete remedial actions from first ITHC for ESN. • GDPR training course for managers 	<ul style="list-style-type: none"> • Project closed and now managed as business as usual
Co-responding	Neil Carter	<ul style="list-style-type: none"> • Four RBFRS co-responding schemes operating at Hungerford, Wargrave, Wokingham, Officers • Extension of trials until November 2017 	<ul style="list-style-type: none"> • Negotiations with Station 10 personnel and Berkshire FBU re: maintaining co-responding at the station until November • Decision on viability of implementing single crewed RDS car and a positively crewed car 	<ul style="list-style-type: none"> • Project closed and trial to be monitored as business as usual
Effecting entry	Neil Carter	<ul style="list-style-type: none"> • Rep body, staff and senior management consultation concluded – operational guidance issued • Partnership document signed off • 6 month trial started on 3 April to October (RBFRS and OFRS only – B&MKFRS expected to join soon) 	<ul style="list-style-type: none"> • Set up monitoring of trial, and regular meetings with partner agencies 	<ul style="list-style-type: none"> • Project closed and trial to be monitored as business as usual



Appendix X: Key Programme Risks

ID	Project	Risk	Mitigation Actions	Owner	RAG Score
378	ESMCP	ESN compliance: Risk of high costs and lack of capacity to implement the remedial works potentially required to obtain the ESN compliance	<ul style="list-style-type: none"> Budget has now been received from the authority following submitted quote for cost of remedial work. Work underway internally to support Work continues to be aligned with the Information Governance project Awaiting confirmation from Programme whether needs to be ESN or PSN Control system remediation commenced with WSUS updates for system and security patches. Programme of future dates and reboots established 11/07 - A further request has come from the Home Office regarding any funding gaps we believe may not be covered by the grant received and so to help mitigate this, analysis undertaken and additional request submitted 	Nikki Richards	21 ↑
379	ESMCP	COST of the service has not yet been declared and we are now in the preceding year where revenue costs may be payable	<ul style="list-style-type: none"> Removal of the 250k grant when the service is live and the remaining costs left should then equal the amount left in the budgets to cover the costs. Risks that as it is a national averaged out cost that our costs may be higher Raised as a national risk but no information is forthcoming. 	Lee Arslett	22 ↔

Since the above section of the Q1 report was completed, the Corporate Risk Register has been reviewed and updated; therefore the above risks no longer exist in this format or description. This table has been left in the report on this occasion for continuity and completeness, however the up to date ESMCP risks can now also be reviewed in Quadrant 4 of this report ([★Z.418 & 425](#)).

Appendix Y: Organisational Development Programme

Programme Name	Organisational Development Programme (OD)		Reporting Period	April to June 2017 (Q1)
Programme Status	Last Quarter	This Quarter	Comments on Progress and Recommended Action	
Time			Projects continue on delivery timescales	
Cost				
Delivery/ outcome				

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Revised Uniform Policy	Lloyd Palmer	<ul style="list-style-type: none"> Paper presented to SLT and governance of the project agreed Uniform policy consultation completed Undress uniform contract in place 	<ul style="list-style-type: none"> Business case to be submitted to SLT for budget to be agreed for uniforms for upcoming budget year Publication of uniform policy consultation in July 		
Leadership Development Programme for Middle Managers	Nikki Richards	<ul style="list-style-type: none"> Meeting held to agree an action plan for content creation and delivery of the programme Outline for a potential development programme created Evaluation of the pilot scheme held in Q4 completed 	<ul style="list-style-type: none"> Proposal to be written for August SLT Delivery planning meeting to take place PID to be written and submitted to 15 August programme board 		
Investors in People Accreditation	Katie Mills	<ul style="list-style-type: none"> Provider change over Change over paperwork reviewed and signed 	<ul style="list-style-type: none"> Assessment of deliverable priorities 		
The Apprenticeship Scheme	Becci Jefferies	<ul style="list-style-type: none"> Resource in role from May Project Initiation Document approved by the Programme Board Research completed on new regulations and laws that have come into place with regards to Apprenticeships Campaign underway for HR Administrator Apprentice with Newbury College and due to close in July 	<ul style="list-style-type: none"> Final recommendation paper to be submitted to SLT on 22 July 2017 Completion of HR Administrator Apprentice 		
Business Process Improvement	Katie Mills	<ul style="list-style-type: none"> Programme Plan created of processes highlighted for consideration Number of processes in Business Support captured and recorded 	<ul style="list-style-type: none"> Programme of business process improvements to be prepared into a business case for review Completion of Business Support processes review Payroll process is currently under review, being quality assured by relevant teams. The new, improved process is yet to be developed. 		

Appendix Z: Corporate Risk Register

61

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
364	Payroll	Becci Jefferies	HR	People and Organisational Development	If the provider of the payroll service (Dataplan) fails to provide payroll services in line with the contract standard and work is not accurate, or they determine they are no longer able to the fulfil the contract which is becoming increasingly more likely given there appears to be insufficient resilience in their provision and a reliance on RBFRS checking the accuracy of their work then we can expect to see more issues arising with incorrect payments, impacting potentially on the accuracy of pension records, a failure to comply with legislative requirements, incorrect information to inform budget monitoring, the potential need to source another payroll provider and an increased work demand on RBFRS HR and Finance staff which are significant in respect to our financial management, our reputation with internal staff and the effectiveness and efficiency of HR and Finance departments delivering their wider services.	Failure to comply with statutory or regulatory requirements	22	22	Raise performance management concerns with WYPF who are contracted to provide the payroll service	Becci Jefferies	Letter 18/5/17 and again June following May pay run, meeting WYPF 15.6.17 - action plan required from WYPF w/c 19.6.17. Communication ongoing. Action plan finalised	07-Aug-2017	17	2	Becci Jefferies	21 Sep 2017
									WYPF/Dataplan to produce and action plan to identify how they plan to address the performance issues	Becci Jefferies	Finalised following meeting on 18 July 2017, new commitments re staffing and process arrangements	07-Aug-2017				
									Maintain a log of issues, raising these with Dataplan and WYPF as appropriate	Jacky Manning	Ongoing review of log at contract meetings. Finance maintains separate log and HR have separate detail log. Issues raised direct with Dataplan and copied to WYPF as appropriate	07-Aug-2017				
									Regular contract meetings	Becci Jefferies	Regular	07-Aug-2017				
									Redeploy temporarily member of the finance team to check all pension/pay matters to ensure accuracy of work undertaken by Dataplan in respect of key performance areas (pension, temp promotions)	Conor Byrne	Short term arrangement to review aspects of payroll activity - not able to fully resource this arrangement due to end of year demands on Finance	07-Aug-2017				
									Review internal systems to ensure that these support ways of working and reduce room for error	Jacky Manning	Key areas - temp promotion/acting up. Difficulties in getting time but progress on RDS activities, overtime procedures and manual to be updated. BPI review outcomes awaited	07-Aug-2017				

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
408	Emerging risks and implications of Grenfell Tower	Simon Jefferies	Strategic Risks	CFO	If we fail to effectively deal with emerging community risks and additional burdens which are likely in the aftermath of the Grenfell Fire tragedy, this may result in the inability to meet our statutory duties and strategic objectives which will cause significant reputational damage and impact our financial stability	Failure to comply with statutory or regulatory requirements	24	24	Ensure effective political, community and partner engagement processes are in place to ensure integrated delivery of service	Mark Gaskarth	Completed	24-Aug-2017	22	3	Trevor Ferguson	30 Sep 2017
									Ensure current policies are revised, updated and integrated across function to include the implications of the impacts and burdens	Mark Gaskarth	New risk	24-Aug-2017				
									Ensure adequate people and financial resources within the community safety functions including proactively managing succession to mitigate any emerging risk	Mark Gaskarth	Project plan being developed	24-Aug-2017				
									Ensure development programmes are re-aligned to include the appropriate new skills and knowledge to meet any new demands for staff	Mark Gaskarth	Will be part of project plan	24-Aug-2017				
									Ensure staffing models are flexible and agile enough to deal with a rapidly changing landscape	Mark Gaskarth	Will be part of project plan	24-Aug-2017				
									Ensure new work is embedded in service plans and any new performance measures are developed and reported on	Mark Gaskarth	New risk will be part of project plan	24-Aug-2017				
									4 phase plan developed incorporating multiagency working/	Mark Gaskarth	Plan shared with partner agencies and agreement reached. Protocol being shared with partner agencies.	14-Sep-2017				
									Additional resources to be put in place with additional funding provided	Mark Gaskarth	Management committee paper submitted for 19 Sept 17 meeting. Members briefed on implications and progress. Project plan being developed to implement additional resources and actions.	14-Sep-2017				

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments	Treated Score	Overall Assurance	Risk Owner	Review Date
410	Collaboration, Partnership Working & Shared Service	Simon Jefferies	Strategic Risks	CFO	If collaboration, partnership working and shared service opportunities are not considered, developed and embedded which may become increasingly likely with the complexity and volatility in the current political and financial landscape. Then we can expect impacts on the effectiveness of our service provision and on our financial position which would then affect the delivery of our legal duties and the Authority's strategic objectives	Failure to manage organisational resources	22	22	<div>Actively drive and engage with the Thames Valley strategic collaboration board</div> <div>Simon Jefferies</div> <div>Governance arrangements now in place to lead and oversee collaborative projects</div> <div>13-Nov-2017</div> <div>Ensure adequate resources to ensure delivery of the collaboration programme</div> <div>Simon Jefferies</div> <div>Three leads to ensure PID's and project plans have considered adequate funding and resources to deliver</div> <div>13-Nov-2017</div> <div>Ensure effective political engagement and active communications with Fire Authority and elsewhere</div> <div>Simon Jefferies</div> <div>Engage with FA Lead member for Collaboration and at JCC</div> <div>13-Nov-2017</div> <div>Develop and maintain relationships with partner agencies and other emergency services</div> <div>Simon Jefferies</div> <div>Ensure regular planned meetings and through OPE</div> <div>13-Nov-2017</div> <div>Ensure horizon scanning workshops to identify opportunities for collaboration</div> <div>Simon Jefferies</div> <div>Included and embedded in strategic planning processes</div> <div>13-Nov-2017</div> <div>Utilise staff engagement forums to embed collaborative culture</div> <div>Simon Jefferies</div> <div></div> <div>13-Nov-2017</div> <div>Ensure internal processes meet the legal test for considering and evaluating collaboration opportunities</div> <div>Simon Jefferies</div> <div>Business cases and committee papers include sections on alignment with duty to collaborate</div> <div>13-Nov-2017</div>	18	2	Simon Jefferies	1 Nov 2017

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
413	Pension Liabilities	Becci Jefferies	Strategic Risks	CFO	If we do not comply with the various pension regulations and the calculations of pension contributions, entitlements and payments made are incorrect, which is becoming increasingly likely given changes to these regulations which are complex in nature, changes to pension and payroll administrators, the ability to accurately interrogate historic records (which do not sit with RBFRS) and limited pensions expertise and capacity within the HR department, then we can expect to be in breach of the regulations, be subject to scrutiny from The Pensions Regulator, subject to enforcement and penalty notices and impact employees and pensioners which are significant in respect to our financial security, employer duties and our reputation	Failure to comply with statutory or regulatory requirements	18	21	Regular contract meetings with Pension Administrator - Conor and Becci	Becci Jefferies	Ongoing regular meetings	31-Aug-2017	15	2	Trevor Ferguson	31 Oct 2017
									Pension Board to provide scrutiny on behalf of the Scheme Administrator (Fire Authority)	Becci Jefferies	Pension Board have received training, meetings now examining arising matters and risk assessment maintained by Pension Board	31-Aug-2017				
									Participate in regional pension meetings to share understanding, seek guidance including from the LGA Advisor	Jacky Manning	Attendance at regional meetings	31-Aug-2017				
									Build resilience by sharing understanding and learning within the HR department	Jacky Manning	Action taken to build knowledge in department and with other FRSS	31-Aug-2017				
									Maintain records on actions taken for reference and clarity	Jacky Manning	Ongoing where records remain in department's control	31-Aug-2017				
									Audit pension related pay matters to ensure adequate pension pay records are maintained and relevant actions taken e.g. transition to 2015 scheme	Conor Byrne	Ongoing monthly check with specific attention given to known issues	31-Aug-2017				
									Attend fire sector pension related events to ensure kept abreast of changes and can make relevant enquiries of the pensions administrator	Jacky Manning	As appropriate	31-Aug-2017				
									Seek legal advice on emerging issues as appropriate to ensure actions taken are within parameters and are escalated to Fire Authority as appropriate	Becci Jefferies	Advice sought on 30/08/17 on identified issue - approach/impacts to be shared with SLT/ Pension Board as appropriate	31-Aug-2017				

415	Information Systems, Data and Analysis	Steve Foye	Strategic Risks	CFO	If we fail to maintain reliable systems and accurate data that supports effective and timely analysis and continuing improvement of knowledge about our activities and their impacts, then we will not be able to make informed decisions, manage and improve performance of services, report effectively on this performance to the Fire Authority and the public and respond to audit needs - such as the Fire Service Inspectorate. This would substantially undermine our financial and resource efficiency, operational effectiveness and our political and public reputation.	Failure to comply with statutory or regulatory requirements	18	21								
									Commission work to scope longer term data resolution and development	Dave Myers	New risk	04-Sep-2017	15	2	Steve Foye	2 Oct 2017
								Ensure close liaison and effective working relationships with HBIS to ensure data assurance and reporting methodology	Dave Myers	New risk						
								Ensure capacity within the risk and performance department in the restructure for dealing with all organizational intelligence workloads	Dave Myers	New risk	04-Sep-2017					
								Address the short and medium term skills and capabilities needs within the team.	Dave Myers	New risk	04-Sep-2017					
								Completing delivery of an effective performance management system	Dave Myers	New risk	04-Sep-2017					
								Developing performance department to actively support other teams in using performance management tools, data and information and knowledge to define delivery plans.	Dave Myers	New risk	04-Sep-2017					

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
417	Firefighter Safety	Steve Foye	Strategic Risks	CFO	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.	Failure to comply with statutory or regulatory requirements	22	22	Training Strategy and maintenance of competence and standards for all operational staff.	Becci Jefferies	In qualification status reviewed via ODPLG and SPB, MOC programme under review, collaboration with TV FRS	12-Sep-2017	19	2	Steve Foye	1 Dec 2017
									Review policies, procedures and processes. Align to national operational guidance (NOG). In the interim address any urgent issues.	Mark Gaskarth	New structure in place and team focusing on conducting the review.	14-Sep-2017				
									Safety Critical Training is delivered from Training centre based on The fire professional Framework core skills and assessed on appropriate frequencies	Jim Powell	Ongoing	04-Sep-2017				
									Deliver training aligned to National standards and monitor and address shortfalls in maintenance of competence	Becci Jefferies	Qualification framework agreed and developing core skills and training programme for 2017/18. Core operational qualifications agreed. Work on TRI for MOC ongoing with TV partners	12-Sep-2017				
									RDS Project Board established overseeing all RDS improvement and reporting to Programme Board	Jim Powell	Lambourn pilot and recruitment project due to report early October; positive findings to go into BAU practice. Crewing with three PID due in October. RDS availability on hold pending FW module evaluation.	12-Sep-2017				
									Review and streamlining of operational competency framework to simplify and focus on critical areas for firefighter safety	Jim Powell	New risk	04-Sep-2017				
									Development of operational learning and assurance systems that encourage and improve operational development of all frontline staff	Mark Gaskarth	New risk	04-Sep-2017				
									Development and implementation of post incident operational debriefing process.	Mark Gaskarth	New risk	04-Sep-2017				

418	ESMCP	Steve Foye	Strategic Risks	CFO	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.	Failure to manage organisational resources	18	18	Service level project board to oversee RBFRS delivery across national programme workstreams and SC partners.	Mark Gaskarth	New risk	04-Sep-2017	10	2	Steve Foye	4 Oct 2017
								Representation on SC Programme Board with funded programme support and appointed staff within each regional workstream group.	Mark Gaskarth	New risk	04-Sep-2017					
								Representation on national Fire Customer Group by DCFO for SC Region	Steve Foye	There are a number of factors beyond the control of the service or region that could negatively impact the organisation. Whilst we cannot control - we use FCG to raise concerns and challenges	13-Sep-2017					
								Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified.	Steve Foye	We have good regional level dialogue with colleagues in Police and Ambulance. However, on-going uncertainty may on timescales; plan and deliverables may hamper collaborative approach.	13-Sep-2017					
								Preparation of systems (e.g. TVFCS ICCS) being completed with national programme funding already secured	Mark Gaskarth	New risk	04-Sep-2017					
								Regular reporting to Audit and Governance Committee to ensure transparency in service and national programme progress	Steve Foye	New risk	04-Sep-2017					

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments	Treated Score	Overall Assurance	Risk Owner	Review Date
419	Operational Availability, Crewing and Capabilities	Steve Foye	Strategic Risks	CFO	If we fail to maintain appropriate numbers of personnel and associated skills and knowledge requirements, in line with our planned establishment and current or future demands, then we can expect this to affect our ability to provide an efficient and effective level of service delivery that matches our commitments and stakeholder expectations. This could significantly impact community safety and organizational reputation.	Failure to manage organisational resources	18	21	<div>Proactive recruitment and retention campaigns - ongoing-liaising</div> <div>Improved RDS management support through new Hub arrangements.</div> <div>Improvement in WDS management accountability at station and Hub level.</div> <div>RDS Project to create sustained recruitment and retention and deliver increased availability across all RDS stations.</div> <div>Review of current WDS establishment and forecast requirements at all levels.</div> <div>Development in flexibility FDO roles to better meet the managerial and operational needs of the Service.</div> <div>Undertake necessary promotion and recruitment campaigns to meet establishment needs in short and medium term.</div> <div>Creating long term resilience in future capability needs in response to developing and new demands and expectation of the Service (protection, prevention and response).</div> <div>Create a pan organisational establishment board to provide oversight and governance to enable identification of key strategic needs and issues relating to operational crewing/succession</div>	12	2	Steve Foye	1 Dec 2017

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
420	Volatility of Funding	Simon Jefferies	Strategic Risks	CFO	If RBFRS fails to achieve a balanced budget, which is becoming more likely given the national deficit, Central Government fiscal policy, increasing volatility in local funding and increasing budget pressures, we can expect to face further reductions in service delivery, potential negative oversight opinions and loss of public trust, which will severely impact on our ability to deliver our statutory duties and strategic objectives.	Failure to manage organisational resources	24	24	Collaborative development of Medium Term Financial Plan with Members and Senior Leadership Team	Simon Jefferies	New risk	05-Sep-2017	20	3	Trevor Ferguson	30 Nov 2017
									Robust internal budget monitoring and management processes	Conor Byrne	New risk	06-Sep-2017				
									Agility in internal planning processes to ensure delivery plans are matched to Medium Term Financial Plan	Steve Foye	New risk	06-Sep-2017				
									Political engagement with Central Government to ensure new burdens are matched with new funding	Trevor Ferguson	New risk	06-Sep-2017				
									Political engagement with Government to remove precept cap and referendum requirements which will allow additional flexibility in local funding	Trevor Ferguson	New risk	06-Sep-2017				
									Engagement with Central Government, through Political lobbying, Fire Finance Network and NFCC, on new Fire Funding proposals	Trevor Ferguson	New risk	06-Sep-2017				
									Effective and flexible Treasury and Reserves management	Conor Byrne	New risk	06-Sep-2017				

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
421	Response Home Office Reform Programme	Steve Foye	Strategic Risks	CFO	If RBFRS fails to meet the expectations of the Home Office Fire Reform Programme and the requirements of the new HMIC inspection programme, which may become increasingly likely given the ever changing expectations of the public, Government and staff following Grenfell, the NJC pay proposals, the absence of clarity on the inspection programme, then we can expect to receive a lower than desired inspection assessment, reputational damage and loss of public confidence which will be significant in our ability to meet our strategic objectives.	Failure to maintain organisation's positive reputation	21	21	Ensure planning and delivery processes are aligned to emerging requirements of HMIC inspection programme and Fire Reform Programme	Steve Foye	New risk	06-Sep-2017	20	3	Trevor Ferguson	30 Nov 2017
									Engagement with HMIC through NFCC and regional consultations to ensure expectations are clear and aligned to public interest	Steve Foye	New risk	06-Sep-2017				
									Maintain focus of delivery of IRMP programmes to continue change journey of RBFRS	Steve Foye	New risk	06-Sep-2017				
									Maintain focus of delivery of OD programmes to continue change journey of RBFRS	Nikki Richards	New risk	06-Sep-2017				
									Ensure delivery of collaboration programmes with Blue Light and other key partners	Simon Jefferies	New risk	06-Sep-2017				
									Deliver action plan from 2017 peer review.	Dave Myers	New risk	06-Sep-2017				

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
422	Capacity, Capability and Resilience	Nikki Richards	Strategic Risks	CFO	If RBFRS fail to increase the capability, capacity and resilience of our workforce which may become increasing likely as we lose knowledge through retirement of experienced staff, and require new skills and additional capacity to help us responds to the changing demands of the workforce reform programme and vision 2019, then we can expect to fail to deliver against our statutory requirements and broader organisational development objectives	Failure to manage organisational resources	21	21	Revise the RBFRS people strategy, taking in feedback from the recent peer review and National CFOA people strategy	Becci Jefferies	New risk	06-Sep-2017	13	2	Nikki Richards	30 Nov 2017
								Strengthen workforce planning information to cover all staff and regularly review as part of performance monitoring	Becci Jefferies	New risk	06-Sep-2017					
								Implement middle managers development programme in collaboration with TV partners	Nikki Richards	New risk	06-Sep-2017					
								Develop options and implement a process for two tier entry for operational staff	Becci Jefferies	New risk	06-Sep-2017					
								Increase flexibility of recruitment policies to enable RBFRS to attract and retain the best staff	Becci Jefferies	New risk	06-Sep-2017					
								Establish a review programme of training needs and methods of training delivery to ensure RBFRS develop the skills needed	Becci Jefferies	New risk	06-Sep-2017					
								Review reward and recognition arrangements for all staff	Becci Jefferies	New risk	06-Sep-2017					
								Review and revise where appropriate the Organisation Development plan to ensure all work streams reflect the current needs and regularly horizon scan to determine and changes	Nikki Richards	New risk	06-Sep-2017					

423	Management of Corporate Data, Information and Knowledge	Nikki Richards	Strategic Risks	CFO	If RBFRS fails to effectively enable and control the sharing and management of corporate, data, information and knowledge, which is increasingly likely given additional requirements of the General Data Protection Regulation (GDPR) and connection to the Emergency Services Network (ESN), then we can expect the mishandling of sensitive or personal information which could lead to significant financial and reputational penalties and legal challenge which are significant in respect to achieving all of our strategic objectives	Failure to manage organisational resources	18	18	Review, revise and implement a process to manage corporate information coming into and being shared within RBFRS	Tony Vincent	New risk	06-Sep-2017	15	2	Nikki Richards	30 Nov 2017
									Implement the recommendation from the GDPR readiness pre assessment	Tony Vincent	New risk	06-Sep-2017				
									All staff to complete the online information awareness programme	Tony Vincent	New risk	06-Sep-2017				
									Ensure RBFRS complete the 10 steps to cyber security	Tony Vincent	New risk	06-Sep-2017				
									Establish a programme of in-house IT penetration test using the Nessus software and implement and remedial actions	Tony Vincent	New risk	06-Sep-2017				

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
425	Failure in delivery of ESMCP National Programme	Steve Foye	Strategic Risks	CFO	If the ESMCP National Programme fails to deliver a new Emergency Services Network (ESN) or key component parts of ESN that properly enable FRS mobile communications, then the service risks not having robust mobilisation and communications systems to support operational crews and officers or insufficient time to implement its own replacement systems. This would directly impact delivery of services and consequentially public confidence and reputation.	Failure to manage technology	18	22	Programme Management structures for SC Region	Steve Foye	As the Chair of the South Central Region ESMCP Programme Board DCFO Steve Foye maintains on-going oversight of national progress. This is an on-going treatment	13-Sep-2017	10	2	Steve Foye	4 Oct 2017
									Communication of service and regional concerns through Fire Customer Group and NFCC lead.	Steve Foye	Regular direct communication held with FCG lead (ACO Taylor) and NFCC lead CFO Keen through FCG	13-Sep-2017				

																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					</
--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	----

Appendix AA: Accident Investigations

Measure	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2016/17 Y.T.D.	Y.T.D. Target	2016/17 Target	2016/17 performance		
								Q4 16/17	YTD 16/17	16/17 VS 17/18 YTD
Accidents Requiring Investigation	11				11			12	12	↑
*Accident Reports Completed	6				6			8	8	↑
**Recommendations not acknowledged / accepted	0				0			0	0	↔

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

**Recommendations arising from accident investigations that have not been formally acknowledged and accepted by the accountable Manager.

Moderate and major safety events are investigated. They may be recategorised at any point before or during the investigation which can retrospectively affect the numbers.

Minor An accident which causes only a slight injury, with little pain or discomfort, and not requiring medical attention other than first aid, with no potential to have been more severe, or a near miss event with the potential to cause slight injury.

Moderate An accident which causes an injury requiring medical treatment immediately (not including first aid) or at a later date (for example physiotherapy), and/or an accident that is likely to lead to more than three days absence from work or normal duties (i.e. restricted duties) but is not a specified injury as defined under RIDDOR, or a near miss event, including Dangerous Occurrences as defined under RIDDOR, which had the potential to have caused such injuries.

Major An accident which causes a death, or a specified injury as defined under; or a near miss event, including Dangerous Occurrences as defined under RIDDOR, which had the potential to have caused such injuries.



Appendix BB: Audit Recommendations

The audits shown have been undertaken and recommendations agreed. The information provides a progress on those open recommendations as of 30 August 2017.

Audit title	Audit Action	Date	Revised End Date	Priority	Progress	RAG	Open / Closed	Date of Audit Report	Allocated to
Standard Test	Change the standard test policy to reflect a new way of working	Jun-17	Sept 17	High	This will be done in two parts as some actions are relevant to stations, that needs to be in place before the new standard test record year in January 2017. This relates to incorporating identified best practice into our current system. There is no further work that can be done until the Equipment management system is determined and implemented. Any next steps are dependent on what strategy is implemented for the management of ops equipment. The Hampshire partnership may take on this role, it may be decided that under the collaboration strategy within the Thames valley a tri service system is put in place or we might stay as we are. They are strategic decisions and will come out in due course.		Open	06-Mar-16	Rob Read
Standard Test	Update the record keeping system	Dec-16	Sept 17	High	The asset management system is dependent on the parameters established by the Hampshire\RBFRS partnership which has not yet been formalized. As part of this partnership it will be necessary to move all equipment management records for partnership items onto Hampshire's Tranman system which will be used to record the equipment history. This will then set the parameters for moving the system forward.		Open	06-Mar-16	Rob Read
Governance & Risk Management	As planned the service will ensure that individual self-assessment and development plans are completed annually and retained for all existing members	Sep-17		Low	A new Member Development Strategy was approved at Management Committee on 3 April. Since that time a Member Development Task and Finish Group has been set up to develop an action plan for the delivery of the strategy.		Open	27-Feb-17	Katie Mills

Strategic Performance Report Q1 2017/18

Quadrant Four - Risk

Audit title	Audit Action	Date	Revised End Date	Priority	Progress	RAG	Open / Closed	Date of Audit Report	Allocated to
Governance & Risk Management	RBFA will ensure that risks are assigned an owner in line with the risk management policy accountability and ownership of hierarchy.	Sep-17		Low	Risks reviewed at director level in Q1. Now a standing item at SLT. On track to be closed in Q2.		Open	27-Feb-17	Jim Powell / Dave Myers
Governance & Risk Management	Management will continue to deliver the Training plan, to educate employees on the completion of the risk register (both timely completion and capturing assurances) and the Planning and Performance officer will continue providing risk owners with hands on support on to use the system.	Sep-17		Low	Training has been provided to managers on a 1-2-1 basis by the planning and performance officer. To be supported with refresher in Q2.		Open	27-Feb-17	Jim Powell / Dave Myers
Governance & Risk Management	The service will review its process for escalating and presenting operational risks to the relevant director (strategic risk register) and ensure there is clarity in information being presented.	Sep-17		Low	Review postponed to Q2. P&P officer attended 'effective risk management' training, outcomes to be incorporated into review. On track for completion late September		Open	27-Feb-17	Jim Powell / Dave Myers
Key Financial Controls	Management will look into creating a report for the receipt dates of opened and closed purchase orders. All goods receipted on SAGE 1000 will have an invoice attached on the system, to confirm amount receipted and the invoice that is to be paid.	Apr-17	Oct-17	Low	Report with receipt dates has now been created. Work on linking receipt date to invoice is on-going.		Open	17-Mar-17	Irene Kema
Key Financial Controls	The minimum capitalisation value for assets will be recorded in the Financial Regulations	Sep-17	Oct -17	Low	This has been incorporated into the updated Financial Regulations which are being presented to the Audit and Governance Committee in July 2017. Final sign off will be at Fire Authority in October 2017.		Open	17-Mar-17	Conor Byrne

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

performance@rbfrs.co.uk