# Q1 2019/20 Strategic Performance Report

(April to June 2019)

**CONTENTS**

This version of the report was last updated on 27/09/2019

# INTRODUCTION

This Strategic Performance Board Quarterly Report retrospectively presents information from the Performance Management Framework and Corporate Measures and Targets for 2019-20, 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. | 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 to capture how performance contributes cumulatively to the year-end performance outcomes, offer explanation, analysis and mitigation for target outcomes, and to suggest positive means of carrying effective performance into the future.

This report has been reviewed by the Strategic Performance Board, chaired by CFO Trevor Ferguson, to ensure issues and corrective actions are discussed and owned by Heads of Service. This report has also been reviewed and discussed at Senior Leadership Team (SLT) to ensure any strategic issues are addressed.

## Key to Icons and Colours for Performance Measures

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

## Key to Classification of Risk Scores and Risk Movement

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

| | |
|---|---|
| ↔ | No risk movement |
| ↓ | Risk decreasing |
| ↑ | Risk increasing |

## Key to Audit Action Movement

| | |
|---|---|
| ↔ | Audit action continuing to progress |
| ↑ | Audit action progress decreasing |
| ↓ | Audit action progress improving |

# KEY HIGHLIGHTS

**Key Data – April to June 2019 (data as of 05/07/2019)**

| | Quarter 1 2019/20 | Quarter 2 2019/20 | Quarter 3 2019/20 | Quarter 4 2019/20 | Year to date 2019/20 | Quarter 1 2018/19 | Year to date 2018/19 |
|---|---|---|---|---|---|---|---|
| **Emergency incidents responded to** | 1837 | | | | 1837↓ | 2,028 | 2,028 |
| **Primary Fires** | 225 | | | | 225↓ | 274 | 274 |
| **Secondary Fires** | 281 | | | | 281↓ | 307 | 307 |
| **Special Services (RTC)** | 103 | | | | 103↓ | 116 | 116 |
| **Special Services (other)** | 364 | | | | 364↓ | 382 | 382 |

Arrows represent changes from previous period

**IRMP Commitment Progress**

Prevention Commitment 1: To reduce the number of vulnerable people dying due to accidental fires in the home by conducting 35,000 Safe and Well\*\*\* visits over the next 5 years.

**Since April 2017, we have completed 16,564 Safe and Well visits to individuals at heightened risk of dying in an accidental dwelling fire, exceeding the IRMP commitment.**

Prevention Commitment 2: To reduce the volume of fires occurring in homes and injuries that result from them by conducting 12,500 Safe and Well visits over the next 5 years (by March 2022).

**Since April 2017, we have conducted 6,100 Safe and Well checks to individuals at increased risk of having a fire in their home and being injured as a result, well ahead of target for achieving the IRMP commitment.**

Protection Commitment 1: Carry out 1,400 full fire safety audits per year in places where people are most at risk and where necessary standards are not being met.

**Since April 2017, we have concluded 2,539 full fire safety audits in premises (excluding private dwellings) across Berkshire, ensuring businesses are complying with the Regulatory Reform (Fire Safety) Order 2005 and carrying out enforcement action where required.**

**People Strategy Highlights**

**Objective 2:  Increase the diversity of our workforce to better represent and therefore serve our local communities:**

- For the second year running the Change 100 interns commenced their 100-day placements in June 2019
- 'Positive Action' events have taken place to encourage and support women in applying for firefighter roles

**Objective4: Develop a diverse and inclusive 'one team' culture where everyone's contribution is valued and positive behaviours are used to describe how we work together:**

- Work plan devised to implement the Behavioural Competency Framework across RBFRS
- Behavioural training being developed

**Objective 6: Continue to support both the physical and mental health and wellbeing of our people.**

- Blue Light Champions and Trauma support team have received Mental Health First Aid training
- Various health awareness sessions have taken place, such as bowel cancer awareness and importance of cervical screening

## 1. Successes

1.1. We responded to emergency incidents in under 10 minutes on 76.5% of occasions during Q1, against a target of 75%.

1.2. We have continued to maintain the 100% safeguarding performance target with 59 safeguarding referrals made to Local Authorities within 24- hours during Q1. In addition the Pan Berkshire Local Safeguarding Children's Partnership has commented that RBFRS is compliant with regulations and understands its responsibilities to safeguard children and vulnerable adults.

1.3. Q1 saw a significant reduction in the total number of casualties in accidental dwelling fires. There were 2 casualties in Q1 compared to 16 in the same period 2018/19. Prevention activities will continue to be delivered across Berkshire including Safe and Well visits, education and media messaging.

1.4. We conducted 2,651 Safe and Well visits during Q1 and almost 85% of these were to those at risk of dying in an accidental dwelling fire. This exceeds the total target for the quarter by 276 visits. Whilst there was a shortfall in the number of visits to those at risk of injury we are confident that this shortfall will be addressed future quarters.

1.5. In Q1 we conducted 474 fire safety audits during Q1, which is a significant improvement on the same quarter last year when we conducted 244 audits.

1.6. In Q4 2018/19 we committed to conduct the performance measure shortfall 258 fire safety audits by 10<sup>th</sup> May. This commitment was achieved.

1.7. 94.1% of statutory consultation were completed within the agreed timescales which is only 0.9 percentage points off the target of 95%.

1.8. Wholetime crews 'turned out' to incidents in under 90seconds on 91.8% of occasions, exceeding the target by 1.8 percentage points.

1.9. Musculoskeletal (MSK) related sickness absence has decreased by 25% this quarter but remains one of the top causes of sickness absence equating to 30% of days lost. The number of episodes remain consistent.

1.10. The percentage of spend subject to competition exceeded the target of 85% by 11.4 percentage points (95.4%). Staff are currently undertaking the Contract Management Framework online training course (developed in-house).

1.11. The compliant spend target of 100% was achieved during Q1. The buyer gateway process enables the procurement team to monitor potential requisitions and halt any non-compliant spend and subject it to competition, which has assisted in achieving this target.

1.12. Completion of the first phase of the technical refresh programme, purchase and deployment of 150 replacement laptops. This single type of Laptop will replace the 5 different specification machines currently in use across the service over the next two years, improving standardisation and reducing support effort. Through aggressive negotiation and utilising a recycling option, we have saved approximately 40% on the purchase price vs our previous standard laptop. User feedback has been overwhelmingly positive.

1.13. There was a reduction in the number of disciplinary and grievance cases during Q1, where there were 5, compared to 10 in the same period 2018/19

1.14. Phase 1 of the Remotely Managed Stations and Flexi Duty Officer Project completed and Watch Based Station Managers now in place as from 1 May 2019. A project review was held to capture learnings from phase 1 and work started on the phase 2 consultation, with a start on 01 July 2019

2. **Concerns and plans for improvement**

2.1. There was a fatality in an accidental dwelling fire during Q1. The case is still awaiting the Coroners verdict.

2.2. The percentage of satisfactory fire safety audits has increased 11.4 percentage points from 55.9% in Q1 2018/19 to 67.3% in this performance year. The new Fire Safety Inspecting Officers are moving towards undertaking audits on their own and our focus will be to target higher risk premises where the outcome is more likely to be unsatisfactory.

2.3. Retained Duty System (RDS) availability was 24.1 percentage points below the expected target of 60% (35.9%). Whilst RDS availability is low, the recruitment of RDS personnel has improved and these staff are undergoing development. Once training is complete the availability of appliances is expected to improve.

2.4. Performance against the target for the time taken for TVFCS to mobilise an appliance has decreased by 1.9 percentage points from 73.8% in Q1 2018/19 to 71.9% this quarter. A review of Emergency Call Handling has commenced, with a focus on making the best use of new and emerging technology to speed up the call handling process.

2.5. RDS turnout was 23.2 percentage points down on the same period last year. The temporary move of Crowthorne fire station to Wellington College has had an impact on the time taken to turnout.

2.6. The percentage of eligible staff where a Personal Development Review meeting has taken place is 47.5% compared to 54.5% this time last year. The Remotely Managed Stations and Flexi Duty Officer Project has had an impact on this measure.

2.7. Mental health absence has increased this quarter by 10% equating to 39% of days lost. Compared to the same time last year days lost to Mental Health absence has increased by 67%

3. **Emerging issues and risks**

3.1. The current risk score has increased on four risks compared the Q3. These risks were: Management of Resources; Volatility of Funding; Collaboration, Partnership Working and Shared Services; Capital Investment Strategy.

3.2. Three risks have reduced, and the current risk score has come down.

3.3. Two new risks were added: High-rise Evacuation Management and Facilities Contractors

3.4. Six risks were removed from the Corporate Risk Register as it was either reviewed and new risks created or the risk is now managed on a service level by the Head of Service.

Supporting Performance Information

# QUADRANT ONE: SERVICE PROVISION

Corporate Measures** (Data accurate as of 08/04/2019*)

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | | | | | | | | | | | |
| 1 | Number of Fire Deaths in Accidental Dwelling fires | 0 | 1 | | | | 1 | 0 | 0 | 0 | ↓ |

Data Source (internal use only)
Accountable Person: Area Manager Response & Resilience

Sadly, a fire death occurred in the East Hub area in Q1. This resulted in a series of Critical Event Management Team (CEMT) meetings. CEMT meetings are instigated as a matter of course for a range of significant events, including fire deaths, and they enable a coordinated and proactive response to the critical event. Following this fire death, key internal stakeholders came together through the CEMT to:

- Review the services prior involvement with the individual and address of the incident (such as prior prevention, protection of response activity).
- Capture detail as to the services emergency response to the incident itself.
- Ensure all necessary post incident actions were identified and undertaken.

As a consequence of this approach immediate post incident actions can be addressed quickly. For example:

- Ensuring fire investigation arrangements are in place.
- Coordinating appropriate and agreed media messaging.
- Confirming necessary staff welfare arrangements are instigated.
- Capturing and acting on any early learning.
- Ensuring post fire prevention and protection activity is actioned in the hours and days immediately following the incident.

Our targeted post incident prevention work following this fire death led to the completion of 22 Safe and Well visits to addresses near to that where the death occurred. Outcomes included 2 occupants requiring and being provided flame retardant bedding and 2 occupants requiring and being provided smoke alarms suitable for those with hearing loss.

Whilst the case is awaiting the Coroners verdict, the information instigated through the CEMT and then completed through our prevention staff, means we will propose this death be subject to a Safeguarding Adult Review through the Adult Safeguarding Board

*Data for previous quarters may show a revised figure due to data entry lag.  ** See Appendix D for service provision corporate measure definitions

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| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | for the Royal Borough of Windsor and Maidenhead. This is to enable key learning to be gathered and considered in a multi-agency environment to inform the wider local authority partner community on how future fire deaths could be prevented. We continue to strive towards our target of zero fire deaths with 2018/19 year seeing a continued reduction to an average of one fire death per year, for the last four calendar years, compared to an average of four per year from 2011 to 2015. Reducing fire deaths will continue to be a priority for RBFRS for 2019/20 and we will continue to build on the work we have achieved this year to deliver Safe and Well visits, described under CM 6. | | | | | | | | | |
| 2 | Number of Fire Casualties in Accidental Dwelling Fires | 20 MAX | 2 | | | | 2 | 5 MAX | 16 | 16 | ↑ |

Data Source (internal use only)
Accountable Person: Area Manager Response & Resilience

The Q1 figures have shown a downward trend, with 2 casualties across the quarter, which is in contrast to Q1 2018/2019 where 16 were recorded and is substantially lower than the four previous quarters. This is a good start to work on for achieving the year-end target. The 2 incidents were in the East Hub, one cause of the fire is not known and cigarettes re-appears as a cause in the other incident this Quarter.

Reduction of accidental dwelling fires and consequently associated injuries is a focus of Service Delivery teams as we progress through the year. Through Safe and Well visits, social media messaging and community and partnership engagement opportunities and events, teams across the Service Delivery Hubs will be promoting awareness of the key causes of accidental dwelling fires. As outlined in our 2018/19 Q4 report we are giving some focus to kitchen and cooking related fires and how these can sometimes occur because of distractions. This targeted focus is reflected in Hub Local Safety Plans alongside other primary cause of accidental dwelling fires.

As described in previous performance reports casualties are persons who have been directly affected by the effects of a fire. Whilst recognising fire can lead to life changing injuries most casualties are unlikely to suffer long term health impacts. The majority of casualties are recorded as 'slight' (meaning attending hospital as an outpatient) and primarily relate to incidents of smoke inhalation and associated temporary breathing difficulties. Where they are recorded as 'serious' it means attending at least an overnight stay in hospital as an in-patient. The two casualties in this quarter were recorded as slight.

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| 3 | % of safeguarding referrals made to Local Authorities within 24 hours | 100% | 100% | | | | 100% | 100% | 100% | 100% | ↔ |

Data Source: manual calculation by Prevention Safeguarding Policy Manager

Accountable Person: Area Manager Collaboration and Policy

There were 59 Safeguarding referrals made during Q1. All Safeguarding referrals were signposted into the Local Authorities within the 24-hour target period. Referrals still remain at a ratio of 8 adult referrals to one child referral. The Adult Safeguarding Training is due to commence with delivery on the 30 August 2019 to RBFRS staff and volunteers.

On the 11 June 2019 the Prevention & Safeguarding Policy Manager attended the Pan Berkshire Local Safeguarding Children Partnership/Boards Section 11 (S11) Panel to present our safeguarding children actions and activities. The S11 Audit and Panel is to ensure we are complying with our Duty of Care set out in the Children's Act 2004 and Working Together 2018, to promote the evaluation of agencies safeguarding activity and to encourage continuous improvements to further safeguard and promote the welfare of children in Berkshire. The Local Safeguarding Children's Board S11 Panel feedback/comments were as follows:

| Hub | Q1 Totals |
|---|---|
| East | Slough – 11 |
| | RBWM – 10 |
| West | Reading – 16 |
| | West Berks – 9 |
| Central | Wokingham – 9 |
| | Bracknell – 4 |
| Total | 59 |

*"The S11 Panel were in agreement that the information provided in the audit tool and the presentation was to a 'very high standard' and provided excellent evidence and data to support the submission. The return demonstrated that your organisation is compliant with S11 regulations and understand their responsibilities to safeguard children and vulnerable adults.*

*The following good practice was identified:*
- *24 hour safeguarding provision*
- *timely safeguarding referrals to Local Authorities*
- *positive feedback received from training programmes*
- *safeguarding referral rate has increased by 504%*
- *the annual review of policy and procedure*
- *all volunteers receive the same level of training as permanent staff.*

*The S11 Panel feedback to inform your organisations continuous improvement to safeguard children to consider:*
- *Improved safeguarding supervision for key staff members*
- *Attendance and engagement with Local Safeguarding Children Boards/Partnership meetings"*
- *Managers will work to deliver these continuous improvements.*

The panel have thanked us for our engagement and commitment to this process to promote the safeguarding and wellbeing of children in Berkshire represented across all 6 Local Authorities.

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| 4 | The number of deliberate primary fires | Reduction | 50 | | | | 50 | 39 | 40 | 40 | ↓ |

Data Source (internal use only) *(Data accurate as of 25/07/2019)*

Accountable Person: Area Manager Response & Resilience

The number of deliberate primary fires have increased in Q1 with an initial spike in April (22 incidents), which was 12 above the April 2018/19 figure (10). The figures for May and June were in line with 2018/19. Road vehicles are the main property involved in these figures being 13 out of the 22 for April, however, there are no identifiable trends and the incidents are spread across the county, suggesting that there is no localised spate activity.

| Hub | Q1 Totals |
|---|---|
| **East** | Slough – 9 |
| | RBWM – 4 |
| **West** | Reading – 12 |
| | West Berks – 11 |
| **Central** | Wokingham – 7 |
| | Bracknell – 7 |
| **Total** | **50** |

It should be noted that the overall trend of deliberate primary fires has remained consistently low over the past five years. This means the occurrences of deliberate primary fires in Royal Berkshire is a very small proportion of the overall number of incidents. When comparing our data to fire services in our family group (which is comprised of eleven fire services of a similar size and type), we have demonstrably fewer deliberate primary fires. Based on the returns made RBFRS are always in the top three performing services in the family group, with 2018/19 being the second best performing and 2017/18 and 2016/17 being the best performing (i.e. the lowest number deliberate primary fires when compared to those other fire and rescue services in the family group).

Nonetheless, we recognise these deliberate fires can have a significant impacts on individuals, communities and the environment, so Service Delivery Hub Teams will continue to monitor for trends and work proactively with our partner agencies in response to these. Local relationships are maintained with colleagues in Thames Valley Police to monitor for any identifiable trends or circumstances where a coordinated approach can result in a cessation of activity and prosecution of perpetrators of arson.

Service Delivery Managers meet monthly to review all performance areas and this provides a regular opportunity to consider any trends and emerging issues to then direct reduction activity across Hubs.

Through our Safety Education team we continue to work with a number of children identified as demonstrating fire setting behaviours. Through a programme of interventions our trained staff are able to alter this negative behaviour. In Q1 the team interacted with 7 children, though each intervention normally involves a number on interactions with each child. As well as continuing this important work the team are now looking at targeted work with adult fire-setters.

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| 5 | The number of deliberate secondary fires | Reduction | 84 | | | | | 84 | 74 | 75 | 75 | ↓ |

Data Source (internal use only) *(Data accurate as of 25/07/2019)*

Accountable Person: Area Manager Response & Resilience

Figures are increased over the last year for RBFRS as a whole with 9 more incidents than the same period last year and 10 more incidents than we set for our year to date target of 74.

As with deliberate primary fires, the incident of deliberate secondary fires is relatively low and forms a comparatively small proportion of our overall incident activity. We have noted that the overall trend of deliberate secondary fires has increased a little over the last five years. When comparing our data to fire services in our family group (which is comprised of eleven fire services of a similar size and type), based on the returns made, we are the best performing service every year for the past five years. That is to say we had the lowest number of deliberate secondary fires when compared to those other fire and rescue services in the family group. As with deliberate primary fires, Service Delivery Managers meet monthly to review all performance areas and this provides a regular opportunity to consider any trends and emerging issues to then direct reduction activity across Hubs.

Breaking the quarterly figures down, we noted a specific increase in the Central Hub over the quarter with a particular spate of activity in the Wokingham Unitary Authority area. Working with local community policing teams, Hub teams have delivered targeted prevention activities in response to emerging Anti-Social Behaviour that has included fire setting activity. RBFRS have attended the Wokingham Community Safety Partnership to raise awareness and 'arson aware' signage has been shared with Thames Valley Police (TVP) to be erected at locations where a fire occurs. 'Arson Aware' boards have been deployed to 'hot spots' warning of the danger of deliberate fire setting and providing the Crime Stoppers number so that members of the community can anonymously provide information to TVP. Crews have been active in the Simons Wood / Heath Lake area to reduce the number of deliberate secondary fires. Central Hub will continue to highlight the risk posed by deliberate fires whilst conducting schools education visits. Additionally where 'hot spots' are identified Central Hub will work closely with partners, including Thames Valley Police neighbourhood policing, in order to reduce the prevalence of these fires.

Whilst there has been no significant trend change in the West Hub, the local team continue to build local relationships so they can work jointly to prevent deliberate fire setting. Our West Berkshire Community Safety Advisor will be working regularly with the West Berkshire 'Building Communities Together' (BCT) group which is formed of a team of officers from West Berkshire Council and Thames Valley Police. Their intent is to help those that need it and protect those who are most vulnerable whilst enabling communities and individuals to do more for themselves, help each other and become stronger and be more self-reliant.

| Hub | Q1 Totals |
|---|---|
| East | Slough – 13 |
| | RBWM – 3 |
| West | Reading – 18 |
| | West Berks –18 |
| Central | Wokingham –21 |
| | Bracknell – 11 |
| Total | 84 |

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | | The positive fire-setter intervention activity outlined in CM4 can also have a positive effect on preventing deliberate secondary fires as well as deliberate primary fires. | | | | | | | | | |
| Prevention | | | | | | | | | | | |
| 6 | Risk of Death | 7,000 | 2,241 | | | | 2,241 | 1,750 | 2203 | 2203 | |
| 7 | Risk of Injury | 2,500 | 410 | | | | 410 | 625 | 555 | 555 | |
| | TOTAL | 9,500 | 2,651 | | | | 2,651 | 2,375 | 2758 | 2758 | |
| | Number of Safe and Well visits delivered to those who are at heightened risk of dying/being injured in the event of an accidental dwelling fire | Data Source: internal use only. *Data accurate as of 24/07/2019*<br><br>Accountable Person: Area Manager Prevention & Protection<br><br>(2018/19 YTD figures are based on previous categorisation)<br><br>Overall we continue to deliver our Safe and Well visits across Berkshire in line with expected targets. Which, through our Local Safety Plans, have now been set for each unitary area.<br><br>Our performance within CM7 is below our expectations, however our referral pathways within this area are limited and this work is more dependent on teams visiting premises based on addresses identified through data. This approach means that a number of addresses may be approached, but only a small number may take up the offer of a Safe and Well visit.<br><br>Our newly appointed Watch Based Station Managers, working with our Community Safety Advisors are now taking responsibility for overseeing the local performance management of Safe & Well visit delivery in line with the Local Safety Plan targets and we expect to see an improvement in the number of visits achieved against CM7 in future quarters. This local level leadership will further enhance our targeting and reporting within these measures. Over the coming year we will be working with teams to develop new methods of quality assuring our Safe and Well activity.<br><br>This quarter saw the retirement of one Safe & Well Technicians within the Central Hub. Whilst loss of such specialist skills can have an impact, the three management teams work closely to share staff - such as Community Safety Advisors and Safe and Well Technicians - in response to demands and risk and to match resources accordingly. A recruitment process is well underway to address the recent vacancy. | | | | | | | | | |

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| 8 | % of home safety referrals, where there has been a threat or incidence of arson, completed within 48 hours | 100% | 68.8% | | | | 68.8% | 100% | 100% | 100% | ↓ |

Data Source: internal use only

Accountable Person: Area Manager Prevention & Protection

16 Referrals received, 11 within target

As previously reported we have a project team currently developing new 'Ways of Working' for both our Prevention and Protection work. The project has reviewed the 'Threat of Arson' Policy which has resulted in a new Thames Valley Partnership procedure being adopted between Fire and Police during Q1. These new procedures have been embedded within the four organisations, albeit with a small number of minor issues occurring in the referral process. As these issues have been identified they have been addressed immediately and guidance given to those concerned to prevent reoccurrence.

Whilst it is right to strive for a 100% target given the nature of the risk, it is important to note that this target is difficult to achieve as accessibility is dependent on the circumstances of each individual case. On occasions, due to the sensitive/serious nature of the required visit, we are unable to meet the target, however, on all occasions we do complete a visit at the first available opportunity. In many cases, where we are not constrained by needing to attend with a partner organisation and where the individual is available we make access within the first couple of hours of the referral.

Within this quarter there were 4 referrals that were delivered outside of the 48 hour target, due to complicating factors:

- 1 visit where Thames Valley Police were unable provide an appropriate time for a joint visit within the 48 hour target
- 2 visits which were declined by the occupants
- 1 visit required a co-ordinated attendance with the Safeguarding Manager
- 1 visit where the occupier was unavailable until after the 48-hours

Whilst these referrals are outside the 48 hour target, where possible, they received the visits at the earliest opportunity and in a way that met the expectations of the occupier and the police. Managers continue to improve monitoring at a local level to mitigate potential process failures.

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|----|-----------|----------------|-----------|-----------|-----------|-----------|---------------|------------|---------------------|--|--|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| 9 | % of priority home safety referrals, where there is a significant heightened risk of an individual dying in the event of an accidental dwelling fire, completed within 48 hours. | Monitor | 52.9% | | | | 52.9% | Monitor | New Measure for 2019/20 | | |

Data Source: internal use only

Accountable Person: Area Manager Prevention & Protection

17 Referrals received, 9 within target

This is a new measure that (much like CM8 above) requires prioritisation so that we instigate preventative measures at an early opportunity to mitigate the heightened risk to an individual. We are initially monitoring our performance against the measure to properly understand how best to focus our activity in this area; identify what may be preventing us from achieving these important visits in the target time of 48 hours; instigate and drive improvements in performance towards the target time and; inform the future target for this measure.

Within this quarter a number of visits have been declined by the occupier (4) or required the Safeguarding Manager to be present at the time of the visit (1). On 4 occasions we have identified that we did not make contact within the 48-hour period and as a result, the Hub Managers and Prevention Managers have acknowledged that more rigorous monitoring of this corporate measure are required which will be implemented over the next quarter.

**Protection**

| 10 | Total Number of Fire Safety Audits | 1,658 | 474 | | | | 474 | 608 | 245 | 245 | ↑ |
|----|-----------|----------------|-----------|-----------|-----------|-----------|---------------|------------|------|------|---|

Data Source: internal use only

Accountable Person: Area Manager Prevention & Protection

There was an increased target of 608 audits for Q1. This was comprised of the normal quarter target of 350 plus 258 audits that were agreed to be carried over from the shortfall in delivery in the 2018/19 year. The 258 shortfall was completed by 10th May. A further 216 audits were competed from the 10 May until the end of Q1 meaning a total 474 audits were completed across Q1.

Whilst delivery of 474 audits shows a continuing improvement in delivery when compared to previous quarters, needing to make up the shortfall from 2018/19 meant that we missed our original Q1 target of 350 by 134 audits. We will make up the gap of 134 audits in addition to meeting our remaining quarterly targets (350 per quarter) for 2019/20 and we are confident of meeting the overall target for the year. To deliver these audits we proactively target higher risk premises through our Risk Based Inspection Methodology, whereby our Fire Safety staff balance the auditing of high risk buildings, identified through our data system, with the audit of high risk premises identified through local intelligence. E.g. restaurants with sleeping accommodation above.

Our fire safety teams also undertake a much wider range of reactive work, such as post fire inspections, complaints, requests for advice and statutory consultations. Positively, when you include all our reactive work it means our teams completed a total of 730 fire

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|----|-----------|---------------|-----------|-----------|-----------|-----------|---------------|-----------|----------|----------|----------|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | | safety activities. On the downside time spent dealing with reactive work can have a bearing on the time available for proactive risk based inspection activity. | | | | | | | | | |
| | | With the support and insight of the Fire Authority, we have seen significant investment in our Fire Safety Inspecting Officer capacity and skills since 2017. Where appropriate, our newer Fire Safety Inspecting Officers (FSIOs) have now started to inspect buildings on their own as they move away from the peer pairing methodology as previously reported. | | | | | | | | | |
| | | Whilst not yet meeting our quarterly target for audits, our rate of audit is actually much higher than this time last year (474 audits Q1 2019/20 over 245 in Q1 2018/19). Equally, despite not hitting our satisfactory target, we also see an actual increase in informal and formal action compared to 2018/19, as detailed in CM12 below. So in real terms we are getting to more buildings and undertaking more improvement activity. | | | | | | | | | |
| 11 | % of audits where the results were satisfactory | 50% max | 67.3% | | | | 67.3% | 50% max | 55.9%* | 55.9% | ↓ |
| 12 | The number of formal and informal fire safety activities | Monitor | 141 | | | | 141 | Monitor | New measure for 2019/20 | | |
| 13 | Success rate when cases go to court | 4:1 | 0:0 | | | | 0:0 | 4:1 | 0:0 | 0:0 | ↔ |

| | Outcomes of Full Fire Safety Audits (above) | Data Source: internal use only | | |
|---|---|---|---|---|

Outcomes of Full Fire Safety Audits (above)

Data Source: internal use only
Accountable Person: Area Manager Prevention & Protection
Whilst the number of audits we are completing is rising, In CM11 we see that the level of 'Satisfactory' inspections is higher than our target (67.3% against a target of 50% MAX). In the long term, by getting to the right higher risk premises through our Risk Based Inspection Methodology, we expect to see lower percentage of buildings being 'Satisfactory' with an associated increase in number of formal and informal notices (as recorded in CM12) to drive improvements in fire safety arrangements.
However, as previously reported, we anticipated an increase in 'Satisfactory' inspections during the development phases of our newer FSIOs. As their capability and experience builds, and in line with our IRMP commitments, these FSIOs will target and audit buildings where the risk is highest and less likely to be satisfactory.
Going forward Protection Managers have been tasked with providing a plan to significantly reduce the number of satisfactory inspections and this plan will be implemented through the remaining quarters of 2019/20 to ensure the corporate measure is met.

| Activity | Number Issued |
|----------|---------------|
| Action Plan | 7 |
| Alterations Notice | 0 |
| Deficiency Notice | 128 |
| Enforcement Notice | 4 |
| Formal Caution | 1 |
| Prohibition Notice | 1 |
| Prosecution Notice | 0 |
| Voluntary Restriction | 0 |

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|----|-----------|----------------|-----------|-----------|-----------|-----------|---------------|------------|---------------------|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | | Looking ahead, as FSIOs increase their focus on higher risk premises, we expect the work associated with each individual building to increase as informal and formal actions can involve a wider range of investigative work, evidence gathering and communications and legal activity. The embedded table above details the range of informal and formal actions taken over the past quarter. | | | | | | | | | |
| | | CM13 is a target for our intended success rate for cases that go to court (i.e. a conviction) Legal actions have taken place for a number of cases over the quarter with some cases being forwarded to West Berkshire legal services for consideration. Examples include: | | | | | | | | | |
| | | • Crestcourt Properties Limited – Sentencing Appeal hearing.  The Crown Court heard this appeal case and ruled that the initial sentencing was incorrect and therefore adjusted the level of fine commensurate with similar properties/offences. Therefore the fine was adjusted from a £177K to a £55K fine and £1K costs. | | | | | | | | | |
| | | • Two further premises were scheduled for Magistrates Court hearing, however neither Responsible Person attended. The cases have now been adjourned until August/September respectively. | | | | | | | | | |
| | | • A Simple Caution was issued on the responsible person of a Jockey Hostel in East Ilsley, in which there were a number of breaches in fire safety legislation following a fire at the address. | | | | | | | | | |
| 14 | % of statutory fire safety consultations completed within the required timeframes | 95% | 94.1% | | | | 94.1% | 95% | 72.8% | 72.8% | ↑ |
| | | Data Source: internal use only Accountable Person: Area Manager Prevention & Protection 256 consultations received, 241 within timescale. | | | | | | | | | |
| | | To ensure we effectively respond to statutory consultation requests we have this year added this new measure. It is pleasing to note that given that it is new, our protection teams are only just short of the overall target. | | | | | | | | | |
| | | In our Corporate Health Measure 5 (page 18) we detail the progress of our FSIO's in becoming fully qualified in role. As outlined in the narrative against CM10, 11, 12 and 13 above the completion of our 10 newer FSIOs development does influence the scope of work they can undertake and for them to undertake statutory consultations they must complete the necessary course. This is planned for the coming months. Until then statutory consultation requests rests with our more experienced inspecting officers, which, in turn, reduces their availability to undertake targeted inspections at higher risk buildings. | | | | | | | | | |
| | | This new measure enables us to closely monitor and report on demand for consultations and ensure we adjust resources so we respond within required deadlines. Whilst our newer FSIOs become qualified to undertake statutory consultations we are considering employing additional temporary resource on a fixed term contract to ensure we maintain an effective capability in this area. | | | | | | | | | |

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| Response | | | | | | | | | | | |
| 15 | % of occasions where the first fire engine arrives at an emergency incident within 10 minutes, from time the emergency call was answered | 75% | 76.5% | | | | 76.5% | 75% | 73.4% | 73.4% | ↑ |

Data Source (internal use only)

Accountable Person: Area Manager Response & Resilience

It is very pleasing to confirm that during Q1 we attended 76.5% of incidents in under 10minutes against the target of 75%. The target was achieved in 2 out of the 3 months with the third 0.3 percentage points off the target at 74.7%. This result is excellent considering the roadworks at Bracknell and on the M4.

This is the first quarter where Watch Based Station Managers have been directly involved in response performance management. Driving local ownership of response performance will improve management of the influencing factors such as maintaining good turnout times as detained in service measure 5 and reducing periods of time where appliances may be subject to a delay in their availability (when undertaking certain types of training of community safety activity).

The RBFRS Response standard is a stretch target that was introduced based on a sophisticated modelling process in 2016 and this is refreshed every year. The model uses six years of incident data applied to a standard mobilising scenario across the county, including a 90 second call handling time and a 90 second wholetime turnout time. The reality of the mobilising picture across the county is often more dynamic than the predicted model which presents a number of challenges in achieving the target.

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 16 | % of full shifts where there is adequate crewing on all wholetime frontline pumping appliances | 100% | 100% | | | | 100% | 100% | 100% | 100% | ↔ |

Data Source: Manual Calculation supplied by OPAS

Accountable Person: Area Manager Response & Resilience

The Service's aim is to maintain whole-time crewed appliances 24/7, 365 days a year. It is pleasing to report that on every shift in Q1 crewing was managed and maintained to ensure that 14 whole-time appliances had sufficient crewing to achieve 100% availability. As part of Phase 1 of the Remotely Managed Station/Flexi-Duty Officer project, Watch Based Station Managers took up posts from 01 May 2019. This, combined with the movement of a number of other watch based staff has impacted availability of crewing and use of prearranged overtime. This will continue through the summer peak leave period and through Q2 and Q3 of 2019/20.

A range of promotion processes have already been completed and these are continuing through Q2 as part of phase 2 of the RMS/FDO project. Ultimately we will have less personnel in temporary roles and this reduces movement pf personnel and can positively influence crewing availability. However this will not fully take effect until later in the year as phase 2 of the project is delivered. As we go through the delivery of phase 2 we anticipate some increased pressure on crewing and we will be working with teams to mitigate the short term impacts to support our 100% Wholetime availability target in CM16.

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|----|-----------|----------------|-----------|-----------|-----------|-----------|----------------|------------|---------------------|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | | Looking further ahead at long term sustainability of crewing it is positive to note that recruitment has started for 24 new firefighters who we anticipate would start their training at the beginning of 2020. | | | | | | | | | |
| 17 | % of hours where there is adequate crewing on all retained frontline pumping appliances (based on 24/7 crewing) | 60% | 35.9% | | | | 35.9% | 60% | 32.4% | 32.4% | ↑ |

 Data Source (internal use only)

Accountable Person: Area Manager Response & Resilience

| RDS Station | Q1 Total |
|-------------|----------|
| Hungerford | 39.7% |
| Lambourn | 20.7% |
| Pangbourne | 4.9% |
| Wargrave | 21.6% |
| Mortimer | 31.5% |
| Crowthorne | 81.0% |
| Maidenhead | 51.9% |
| Total | 35.9% |

Our retained appliances continue to provide a cost effective and efficient resilience to our overall operational response capability. If you consider that across all the retained appliances 35.9% availability means, on average,  we have two additional appliances available at any one time at a cost that is far less than maintaining a single wholetime appliance on a 24/7 basis.

As highlighted in the 2018/19 Q4 report, focused recruitment and retention activity has resulted in a net increase in overall Retained Duty System (RDS) establishment over the past year. However, it takes time for new personnel to attain the necessary operational qualifications to be part of the crew and attend incidents. Consequently there is a delay in the positive impact in availability of RDS appliances. Availability is also impacted by the availability of personnel with other important qualifications, such as incident command and emergency response driving. These are often undertaken by more experienced crew-members and, if personnel with these qualifications leave or become unable to work, it can have a significant detrimental effect on appliance availability.

We recognise the value that retained teams bring to our overall operational resilience and also the importance of maintaining continual investment in recruitment, retention and training, as there is a naturally higher turnover in this staff group when compared to wholetime firefighter retention. This is because changes in personal changes more readily influence the ability of retained firefighters to maintain their commitment to their retained role. E.g. changes in their primary employment, moving home, changing family circumstances reducing their available time.

Retained availability is also subject to seasonal variations and we expect fluctuations in line with peak leave periods as our retained staff will align their leave in their retained role with their leave arrangements in their primary employment or their family circumstance.

The following provides a breakdown of the establishment of each of the services retained stations which Hub managers and retained management teams continue to work to improve and sustain.

**Hungerford**– (target 70%) dip in availability from March (46.5%) due to changes in availability for duty. Personnel at the station minimised the impact in June by providing additional hours and filling the gaps. The station is in good shape with a complement of 16, however the spread of critical qualifications affect crewing and availability. Once this competency is achieved availability is forecast to continue to increase as the very inexperienced workforce steadily achieve critical qualifications such as Breathing

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | | Apparatus (BA), BA team leader and driving. The L1 incident command situation is relatively healthy with 1 Watch Manager (WM) and 2 Crew Managers (CM). | | | | | | | | | |
| | | **Lambourn** – (target 40%) March's availability was 15.1% and we have seen a steady increase to 25% in June (average of 20.7% for whole quarter). This reflects a number of critical qualifications being obtained by personnel at the station. For comparison, availability in Q1 2018-19 was 11.7%. An initiative targeting employers around Membury services was completed in Q1 and saw 2 new applicants entering the firefighter selection process. | | | | | | | | | |
| | | **Pangbourne** – (target 40%) Availability was 0%, 9% and 5% for the 3 months in the quarter respectively. With only 6 staff and a lack of critical qualifications e.g. 1 L1 incident command, any single absence can have a disproportionate impact. An additional L1 Incident command and driver qualification were achieved during the period resulting in increased availability in May and June. In line with Fire Authority decisions the station is planned for closure when Theale Fire Station becomes operational. This increases the challenge of attracting new fire fighters, however, a planned campaign will be undertaken aimed at local businesses (using learning from a recent successful campaign in Lambourn) to help boost recruitment. An increase in availability is not expected in the short to medium term therefore the target of 40% will be challenging to achieve. | | | | | | | | | |
| | | **Wargrave** – (target 60%) The recent resignations of personnel have had a detrimental impact on appliance availability which has resulted in this target being missed (21.6%). Action is being taken to fill the vacant Watch Manager (WM) position however this will still leave the Station short of L1 Incident Commanders. The situation is expected to improve slightly in the next period due to the two Dual Contract Crew Managers (CM) no longer being on the same Whole-time Watch. | | | | | | | | | |
| | | **Mortimer**– (target 60%) March's availability was 25.3% with Q1's being 28% (April), 29% (May) and 37% (June) demonstrating a steady improvement. The station is thriving following the success of recent recruitment activity with the station complement standing at 12 however the experience and qualifications lag prevents significant availability increases month on month. However during the quarter several key qualifications were achieved (1 additional L1 Incident command and 2 drivers) positively impacting on availability. | | | | | | | | | |
| | | **Crowthorne** – (target 85%) Whilst the stretch target for the station of 85% has been missed by 4% this still represents an excellent rate of availability and managers and crew will strive to achieve the target. | | | | | | | | | |
| | | **Maidenhead** – (target 70%) Q4 last year saw a figure of 57%. Consequently, it is disappointing to see this slightly decline in the Q1 this year (51.9%). This decline was expected, due to recent departures from the RDS at Maidenhead.  RDS Officers have already taken action to mitigate this and the achievement of individual qualifications over Q2, including Level 1 Command and Breathing Apparatus (BA) should have a positive impact on this figure as we move forwards. The establishment is 18, however, there are a significant number of development firefighters, 5 of whom are in their first year of service and need to achieve their qualifications to wear BA.  There has been 1 leaver in this quarter and, due to the RMS/FDO project, a lot of the dual contract staff are now on one watch colour meaning that there has been a dip in around the clock availability.  Moving forward, action has been taken to move individuals forward with their courses and there should be a positive increase in availability.  The monthly breakdown for Q1 was | | | | | | | | | |

| CM | Measure ** | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | | 54%, 43%, 62%, with the dip occurring in May in line with leavers and the RMS/FDO project. Q2 may experience a similar dip with Summer annual leave and a further career break impacting on availability, but this should improve in Q3 as qualifications come through. | | | | | | | | | |
| Customer Service | | | | | | | | | | | |
| 18 | Domestic Fire Respondents | 100% | 100% | | | | 100% | 100% | 100% | 100% | ↔ |
| 19 | Commercial Fire Respondents | 95% | 100% | | | | 100% | 95% | 100% | 100% | ↔ |
| 20 | Fire Safety Audit Respondents | 90% | 100% | | | | 100% | 90% | 100% | 100% | ↔ |
| 21 | Safe and Well visit Respondents | 100% | Not available | | | | Not available | 100% | New Measure for 2019/20 | | |
| | % of Questionnaire respondents satisfied with the overall service | (Source: Owned by Data & Performance - manual calculation from results of postal surveys returned) Accountable Person: Head of Corporate Services During Q1: 80 surveys were sent out following domestic fires. 23 responses were returned and 100% were satisfied. 34 surveys were sent out following fires in commercial premises. 9 responses were returned and 100% were satisfied. 353 surveys were sent out following fire safety audits. 105 responses were returned and 100% were satisfied. The Safe and Well customer feedback surveys are still being developed and we aim to start issuing these during Q3 in order to start measuring performance in this area. Response to surveys still remains good. | | | | | | | | | |

## Service Provision - Service Measures

*(Data accurate as of 08/04/2019)*

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| 1 | Dwelling Fire | Monitor | 65.4% | | | | 65.4% | Monitor | 60.7% | 60.7% | ↑ |
| 2 | Road Traffic Collision | Monitor | 54.9% | | | | 54.9% | Monitor | 54.2% | 54.2% | ↑ |

| | % of occasions a second fire appliance attending arrives within 2 minutes of the first appliance to arrive | Data Source (internal use only)<br>Accountable Person: Area Manager Response & Resilience<br><br>The time taken for a second appliance to arrive at an RTC or dwelling fire will be influenced by the same factors as those affecting the overall response time. On average, across the county, the second appliance will arrive within 2 minutes of the first, at these type of incidents, 50% of the time. This is reasonable and in keeping with our expectations in terms of how we balance the deployment of our resources to match risk.<br>As with response times in general, this can be significantly higher in more densely populated areas where there are more occurrences of dwelling fires. The figures for RTCs are generally slightly lower than for dwelling fires, this is often due to longer travel distances or where incidents are on the motorway or other parts of the road network.<br><br>Service Delivery Managers will continue to monitor this area and particularly to monitor for any impacts from changes that influence travel times - such as changes to the road network. Work to improve performance against CM15 is also expected to contribute to maintaining performance against these two service measures. |

| | % of occasions where the time to answer emergency calls is within 10 seconds | 97% | 98.2% | | | | 98.2% | 97% | 97.8% | 97.8% | ↑ |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 3 | | Data Source: internal use only<br>Accountable Person: Area Manager Collaboration and Policy<br><br>TVFCS continues to perform strongly against this measure. This is a reflection of the efforts made to maintain the crewing levels required to meet the normal seasonal level of demand and the effective prioritisation of workload in the Control room environment by TVFCS staff.  Fluctuations in performance against this measure are predominantly caused by weather events such as exceptionally heavy rainfall, or prolonged hot dry weather as experienced in the summer of 2018. | | | | | | | | | |

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 4 | % of occasions where time to mobilise is within 90 seconds | 80% | 71.9% | | | | 71.9% | 80% | 73.8% | 73.8% | ↓ |

Data Source: internal use only

Accountable Person: Area Manager Collaboration and Policy

As mentioned in the Q4 2018/19 performance report, the figures for the quarter do not fully reflect TVFCS performance when handling incoming 999 calls. An increasing number of requests for assistance need to be challenged by TVFCS staff to ensure that the mobilisation of appliances under emergency conditions is fully warranted (for example, calls to Automatic Fire Alarms operating in Commercial premises which are rarely the result of fires, and can be filtered out in a safe and effective fashion by TVFCS staff asking appropriate questions of the occupier of the premises when a call is received). Call challenging in this way is a key part of the overall response strategy for RBFRS, preserving appliances for deployment to incidents where they can offer real assistance to the community. This additional questioning extends the time taken to handle calls, which impacts on performance against this measure.   RBFRS currently report on a subset of the wider measures that are reported on by TVFCS to the TVFCS member led Joint Committee. The TVFCS Joint Committee has recently approved the introduction of new, more detailed performance measures. The introduction of these measures will assist the TVFCS Management team in providing more detail and context surrounding the measures currently used by RBFRS such as the number of calls which require challenge before mobilisation and the number of unnecessary mobilisations prevented by the application of appropriate levels of challenge to emergency calls.

The TVFCS Management Team have commenced a full review of Emergency Call handling, with a focus on making the best use of new and emerging technology to speed up the call handling process. It is anticipated that the outcome of this review, along with new 'Advanced Mobile Location' technology which will be available in Autumn 2019, will improve the time it takes to handle calls. (Advanced Mobile Location' is a service provided by BT which will enable TVFCS to pinpoint the location of an emergency caller to within 6 metres if the caller has a compatible mobile phone). Consideration is also being given to the adoption of a system of 'pre-alerting', which will alert crews to the possibility that they will be mobilised whilst the emergency call questioning is still taking place, allowing crews to prepare to leave the station in advance.

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 5 | % of occasions where Wholetime Duty System crew turnout time is in under 90 seconds | 90% | **91.8%** | | | | 91.8% | 90% | 89.6% | 89.6% | ↑ |

Data Source (internal use only)

Accountable Person: Area Manager Response & Resilience

For the third quarter in a row Service Delivery teams across wholetime stations have achieved the 90 second turnout time measure. This represents a significant success and the continued focus in this area provides an important contribution to meeting our attendance time corporate measure of reaching incidents within 10 minutes on 75% of occasions. This target is a key element of

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | | ensuring we respond swiftly to incidents, helping us to manage risk and keep the communities of Royal Berkshire safe. Service Delivery Hub managers will continue to monitor and drive performance improvement in this area, as we recognise that small incremental gains in a number of areas can contribute to successful delivery against our corporate measures. | | | | | | | | | | |
| | | Broken down by hub, we see a steady improvement in performance over the last year, with West Hub peaking at 96%, Central Hub remaining relatively consistent around the 92% mark and East Hub just achieving the 90% mark. | | | | | | | | | | |
| | | Managers are monitoring and managing local performance which will vary by station and appliance. For example we know that Windsor and Maidenhead have both just missed the target. When examining why targets may have been missed main issues identified have been difficulties booking mobile to incident via MDT and the distance crews can be from an appliance whilst conducting outside activities such as visits or training. These will be tested for validity in the coming quarters and management action will continue to maintain and further improve these positive figures and identify solutions that can assist teams' effective turn out times. Our WBSMs will form part of this performance management group in conjunction with the wider Hub and SD management team | | | | | | | | | | |
| 6 | % of occasions where RDS crews turnout within the agreed timeframes | 90% | 70.0% | | | | 70.0% | 90% | 93.2% | 93.2% | ↓ |

Data Source (internal use only)

Accountable Person: Area Manager Response & Resilience

As described in previous reports, there are a number of factors that will affect RDS personnel attending the station within the specified 'turn out' time. Hub managers are monitoring this locally and working with RDS managers to find improvements; though in many cases the situation is driven by circumstances beyond their immediate control. Equally for some stations numbers of mobilisations are relatively low and so one missed target will represent a significant percentage on performance. For example in Central Hub Wargrave were mobilised 3 times with one missed target. This missed mobilisation took 516 seconds (96 seconds over target), and was due to heavy traffic.

We particularly see challenges with Crowthorne performance against this measure since moving to their temporary station at Wellington College in mid-April 2019, going from around 90% performance standard to between around 50%-70% currently. This has been exacerbated by extensive road works on the route to

| Q1 | Number of times ordered to an incident | % turned out within agreed timeframe | Agreed timeframe (seconds) |
|---|---|---|---|
| 05 Hungerford | 19 | 68.4% | 360 |
| 06 Lambourn | 2 | 100% | 480 |
| 07 Pangbourne | 0 | n/a | 360 |
| 09 Wargrave | 3 | 66.7% | 420 |
| 11 Mortimer | 6 | 66.7% | 420 |
| 15 Crowthorne | 31 | 67.7% | 360 |
| 19 Maidenhead (P2) | 19 | 73.7% | 360 |

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | | the temporary station and we expect to see a reduced performance against the target until the new Crowthorne Fire Station reopens in 2020. Hub Managers and the local RDS team continue to work to mitigate the impacts. Across the hubs the other reasons impacting mobilisation speeds include issues with alerters (these are reported and rectified through ICT) and traffic conditions at time of mobilisation slowing down retained staff being able to get to the station. | | | | | | | | | |
| 7 | % of complaints received from the public responded to within set timescales | 100% | 100% | | | | 100% | 100% | New Measure for 2019/20 | | |

Data Source: Manual Calculation from Business Support Lead
Accountable Person: Head of Corporate Services

During Q1 we have received 3 complaints (Vs 7 from 18/19). All 3 complaints were dealt with in the 7 day turnaround and include 2 from Service Delivery (1 East, 1 Central) and 1 from Collaboration and Change. The complaints included alleged damage to a property, conduct of a staff member and a fire safety issue.
Royal Berkshire Fire and Rescue Service (RBFRS) defines a complaint as 'Any communication from outside the organisation expressing dissatisfaction with the service provided or actions taken by RBFRS staff members.' If the person receiving the complaint cannot resolve the complaint immediately, they should advise the Complainant that their complaint will be investigated and that they will be contacted within 7 days.  The complaint will be investigated by an appointed officer and if a full response is not possible within 7 days, the Complainant will be advised when a response is likely to be given.
The Complaints, Comments & Compliments Policy and Procedure sets out the process for which all complaints are logged and investigated, which can be found here - https://www.rbfrs.co.uk/contact-us/

# Service Plans

To ensure effective delivery of our services, in line with our strategic plans and priorities, the various activities undertaken across functions are detailed and monitored through Service plans that are developed and maintained by Heads of Service. Service Plans are overseen by Heads of Service and reviewed by the appropriate Director. By exception, matters may be reported at Strategic Performance Board by the relevant Heads of Service. By monitoring for the delivery of outputs from these activities we can assure the Fire Authority and other external stakeholders that arrangements associated with the management of financial, governance and operational matters are appropriate.
We have in place Service Plans that focus delivery and enable management of day-to-day business across the functions of:

- Business Information & Systems
- Corporate Services
- Facilities, Fleet and Equipment
- Finance & Procurement
- Health and Safety
- HR and L&D
- Collaboration and Policy
- Capital Projects and Estates
- Service Delivery – Protection and Prevention Delivery
- Service Delivery – Operational Response, Resilience and Assurance
- Thames Valley Fire Control Service

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

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

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

# QUADRANT TWO: CORPORATE HEALTH*

*See appendix E for corporate health measure definitions

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Human Resources | | | | | | | | | | | |
| 1 | % of working time lost to sickness, across all staff groups | 3% | 4.3% | | | | 4.3% | 3% | 3.4% | 3.4% | ↓ |

Data Source: data calculated and supplied by HR *(Note: RDS figures should be viewed with caution as this figure is calculated based on the average shift length and these vary considerably and many sickness episodes may be recorded as unavailable)*

Accountable Person: Head of HR and L&D

The percentage of working time lost across all staff groups this quarter is 4.3% which is an improvement of 0.4 percentage points compared to last quarter (4.7%) but an increase of 0.9 percentage points on the same quarter last year (3.4%). Total hours available 328,144.9 of which 14,118.43 hours were absent due to sickness.

The total days lost to sickness this quarter is 19% lower than last quarter (1079 days lost in Q1 vs 1327 in Q4) in comparison to the same quarter last year it is 15% higher (915 days lost in Q1 18/19).

Both long and short-term sickness decreased this quarter compared to Q4) but increased compared to the same period last year (516 Short Q1 vs 383 Q1 last year) and (563 Long Q1 vs 532 Q1 last year).

Appendix F contains information on the percentage of working days lost to sickness for all staff in other fire and rescue services and indicates that RBFRS's performance during the period reported is better than the average.

**Musculoskeletal (MSK) Sickness**

Musculoskeletal (MSK) sickness has decreased by 25% from Q4 but remains one of the top 3 highest causes of sickness absence. MSK absences equated to 30% of total days lost to sickness this quarter compared to 37% last quarter and the same period last year.

509 days (46 episodes) were lost in Q4 and 381 days (45 episodes) were lost this quarter. Although MSK absence has improved it is still 7% higher than the same quarter last year.

Long-term MSK absence has decreased in Q1 – 229 days compared to 367 in Q4 but short-term MSK absence increased in Q1 to 152 days lost compared to 142 days in Q4. Most short-term episodes ranged between 1-16 days lost.

Analysis shows the top three reasons for MSK total days sick were: Lower Limb (170 days), Back (98) and shoulder (58)

| Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |

Nine individuals on long-term sickness have now returned. Five individuals remain absent from the workplace (three long-term) and are receiving support from their line manager and HR. The Movement Specialist continues to work with individuals and line managers to support rehabilitation, provide advice and prescribe exercise.

There were three accidents at work resulting in MSK absence. Two short-term (4 days) and one long-term employee who has returned to the workplace.

**Mental Health**

The percentage of days lost to mental health absence is 10.7% higher than last quarter and 67% higher than this time last year (484 days lost in Q1 and 158 days in Q1 last year and 432 in Q4). The increase in sickness absence due to mental health reasons appears to correlate with an increase in health promotion on mental health, encouraging staff to be open and access relevant supports.

Mental health absences equated to 39% of the total days lost to sickness this quarter compared to 31% last quarter.

Seven individuals on long-term absence have now returned to the workplace, eight individuals (four of which are long-term) remain absent at the end of the quarter. Four individuals on short-term sickness within the period have also returned to the workplace. All cases are investigated to ascertain relevant factors and determine how individuals can be supported.

Long-term mental health absence has increased in Q1 when compared to the previous quarter (419 days in Q1 compared to 378 in Q4). Short-term mental health increased to 65 days compared to 54 in Q4.

Analysis shows the top three reasons for mental health absence were: Anxiety/Depression (164 days), Stress Non-Work Related (146) and Work Related Stress (103) with non-work related stress increasing from 54 days lost last quarter compared to 146 days this quarter.

The Mental Health action plan includes a number of actions to improve the mental wellbeing and support the overall health of staff and is subject to regular review and refresh. The Service encourages people to talk and utilise the support mechanisms available, which include online webinars and videos to help employees and managers (provided by Health Assured, the Employee Assistance Programme provider).

Mental Health training continues to be rolled out across the Service. In June 2019, 14 Blue Light Champions attended a two day Mental Health First Aider course. To build on the most recent training, which was mandatory for all staff, a supplier to deliver the Managing Mental Health training has been identified. The objective of this training is to equip managers with the skills and confidence to manage and support employees experiencing mental health difficulties. Training will commence in September.

| Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |

**Other Sickness**

Respiratory absence has reduced this quarter by 54% compared to Q4 (from 182 days in Q4 to 83 days in Q1). Compared to the same quarter last year respiratory absence is 13% lower (95 days Q1 17/18).

Gastro-Intestinal absence remains a high level of absence this quarter and has increased by 46% compared to Q4 (59 days in Q4 109 in Q1). Compared to the same quarter last year gastro absence is 15% lower (128 days)

HR and Occupational Health work with line managers to provide guidance and support on all sickness management cases, promoting the resources and support available to improve health and enable individuals to return to work as quickly as possible.

**Support and Health Promotion**

**Benenden**

At the end of Q4 we had 428 members and 24 cases had been supported, seven of these were for physiotherapy and eleven for diagnostic services. Where an individual is on sick leave or restricted duties, receiving a diagnosis and/or treatment more quickly than the individual can access through the NHS will reduce the amount of time prior to treatment.

Some treatments will not have required time off work beforehand for example varicose veins, orthopaedic surgeries for some staff groups, gynaecological or dermatological treatments. In these and indeed all cases accessing services more quickly has a positive psychological impact on the person.

Since this provision was introduced the average time saved when compared to the NHS waiting times equates to 75 days per case.

**Employee Assistance Programme (EAP) Promotion**

Health Assured's monthly newsletter is routinely published on Siren, this covers a range of topics and events in the health calendar. There were 17 calls to the counselling service and five to the legal helpline; the reasons for calling were mental health and work. Additionally there were 81 hits on the on-line portal. A number of employees are being supported with face to face or telephone counselling.

Workplace visits are scheduled for Q2 and Q3 to raise awareness of the full range of services offered by Health Assured.

**Health Promotion**

The following promotions took place this quarter: Stress Awareness Month, Mental Health Awareness Week, Cervical Screening, a Bowel Cancer awareness session and Men's Health Week.

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| 2 | % of eligible operational staff successfully completing fitness test | 100% | 96.1% | | | | 96.1% | 100% | 99.3% | 99.3% | ↓ |

Data Source: data supplied by HR

Accountable Person: Head of HR and L&D

Fitness testing is conducted twice per year on all eligible operational personnel.

There were 408 staff eligible for testing in April 2019 and 394 have been tested (96.6%).  The 14 not tested at quarter end were due to leave, sickness and the availability of both RDS staff and the Senior Physical Education Supervisors.  Testing of these staff will take place early in Quarter 2. Of the individuals undertaking the fitness test 99.5% have passed. 0.5% failure rate equates to two individuals not meeting the required standard – one individual has subsequently resigned from the Service and the other individual is being supported to meet the standard.

13 staff are not eligible for testing, they will be tested when they are ready to return to operational duties.

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 3 | % of eligible staff with Personal Development Review (PDR) | 100% | 47.5% | | | | 47.5% | 100% | 54.5% | 54.5% | ↓ |

Data Source: data supplied by HR

Accountable Person: Head of HR and L&D

576 staff were eligible to have received a Personal Development Review (PDR) meeting between April and June 2019. Dual contract employees only require one PDR and therefore have only been counted once.

58 employees were exempt for the following reasons:

- 27 new employees
- 31 employees who have been away from the workplace for the duration of the period for various reasons including maternity, career break and long-term sickness.

The figures only account for those PDR meetings recorded on the system up to and including 30 June 2019.  274 staff are recorded as having had their PDR this quarter which equates to 47.5%. This is a 7% reduction compared to the same time last year. 302 meetings remain unrecorded on FireWatch (52.5%). Of the meetings that have taken place 149 PDR forms have been returned to HR.  Implementation of Phase 1 of the Remotely Managed Stations/Flexi Duty Officer project resulted in significant organisational change with staff moving roles, this has impacted the timelines for PDR completion.

An electronic report is being developed to enable managers to monitor performance locally.

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| 4 | % of eligible operational staff in qualification | 100% | 98.8% | | | | 98.8% | 100% | 99.5% | 99.5% | ↓ |

Data Source: data supplied by HR

Accountable Person: Head of HR and L&D

This corporate measure for Q1 provides overall analysis of core operational training.  Further detailed analysis and discussion will be undertaken at the Workforce Planning Group, which ensures relevant stakeholders from across the Service consider workforce matters 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.

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 further informs the 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 for Q1 is 98.8%, a slight increase of 0.5% from last quarter (98.3%) but a slight decrease in performance of 0.7% compared to the same quarter last year (99.5%).

Areas of good performance include:

- Breathing apparatus 98.3% (4 individuals on a development plan following failure to reach a competent standard during assessment, 2 qualifications expired, individuals are not currently on operational duties)
- Incident Command- 99.1% (1 individuals qualification expired, currently not on operational duties)
- Emergency Response Driving- 100% (the target of 60% of the workforce achieved with a total of 66% of ERD within Service)
- RTC- 99% (2 individuals not yet qualified, programmed for Q2)

Areas for improvement:

- Water Rescue Module 2 - 98%. Issues surrounding maintaining sufficient crewing for operational response limited the training delivery. This meant 5 individuals' qualifications have expired. 2 new individuals are waiting for a course. 1 individual on a development plan, who failed to achieve the required standard.

Corrective actions have been implemented to support the delivery of training. These have addressed shortfalls in planning, recording and the development of individuals requiring further support to achieve competency.  Individuals who are out of qualification or fail to achieve a qualification do not perform that activity at operational incidents until they have re-qualified.

The ability to effectively train staff is reliant on the ability to release individuals from duty to central training and provide sufficient Instructors to train and assess these skills.  A combination of efforts to ensure there is flexibility to do so, and other performance, such as reducing sickness absence, to facilitate attendance continues to be examined.  Staffing in the Learning and

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | Development department is kept under review to ensure, as much as possible, there is the ability to plan for and cover staff turnover. | | | | | | | | | | |
| | Note: Immediate Emergency Care (IEC) is being reported separately as this is a new qualification with initial training being conducted over a two-year period (commenced January 2018). We are on target to achieve the 75% target over a two year period, collaborative arrangements between the Thames Valley FRSs has been arranged to maximise course attendance numbers. | | | | | | | | | | |
| 5 | % of Protection staff in qualification | 100% | 57% | | | | 57% | 100% | New Measure for 2019/20 | | |

Data Source: data supplied by HR
Accountable Person: Area Manager Prevention and Protection

This is a new Corporate Measure and is based on the number of staff within Protection that are fully qualified.

| | |
|---|---|
| No of FSIOs in Development - Level 3 | 0 |
| No of FSIOs in Development - Level 4 | 10 |
| No of FSIOs in Development - Level 4 Diploma | 0 |
| No of FSIOs who are competent | 13 |
| Eligible Staff | **23** |
| % of Protection staff in qualification | **57%** |

Our newer Fire Safety Inspecting Officers (FSIOs), having completed their Level 4 fire safety certificate (acquisition of skills), are now practically implementing these during their fire safety inspection. Each FSIO is required to demonstrate practically their understanding and its application in the work place. Their development pathway will require a number of pieces of evidence before they are deemed competent. It is anticipated that this is likely to take between 6 to 9 months (December 19). Once completed the FSIO will move onto the Fire Safety Diploma. The FSIOs are progressing as expected in line with the career grade scheme.

As detailed in the narrative in CM 10-13 (pages 16-18) our newer FSIOs are developing in line with expectations and we see a steadily improving rate of audit and action as a consequence.

Over the coming months these newer FSIOs will also undertake training so that they can deal with statutory consultation requests increasing both our capacity and resilience in this area of reactive work.

Included within the figures above are 3 competent inspectors who do not currently carry out fire safety audits of which:

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| | One is the Protection New Ways of Working Project Manager | | | | | | | | | | |
| | One is the Primary Authority Scheme (PAS) Manger | | | | | | | | | | |
| | One has been temporarily promoted to a Group Manager | | | | | | | | | | |
| | Three competent FSIOs have been temporarily promoted to Protection Managers until Phase 2 of the RMS/FDO project is completed. | | | | | | | | | | |
| | We will implement any necessary recruitment during Q2 to fill any identified vacancies through agreed processes. | | | | | | | | | | |

**Health and Safety**

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 6 | All RIDDOR** accidents | 6 | 1 | | | | 1 | 1.5 | 1 | 1 | ↔ |

Data Source: Data calculated and supplied by H&S
Accountable Person: Assistant Chief Fire Officer

There was one RIDDOR reportable accident in this quarter. This was due to an individual being unfit for work for more than 7 days due to a knee injury sustained whilst taking part in training.

The event was investigated and it was found that all practicable safety measures were in place; which included checks on the suitability of qualification and competency of the injured party and that all equipment (including PPE) was found to be suitable and sufficient for the purpose for which it was intended.

Trend analysis of all safety events is routinely undertaken by RBFRS' Health and Safety Department. This training activity is being monitored and if a trend emerges, a further review of safety measures will be undertaken in conjunction with the Learning and Development Department.


**RIDDOR is the Reporting of Injuries Diseases and Dangerous Occurrences Regulations 2013. Under RIDDOR we have a duty to report certain events, those events being accidents that led to a person being unfit for their normal work for more than 7 days, or 'specified injuries' which are more serious types of injuries. These include injuries such as broken bones, crush injuries and amputations.

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| Spend | | | | | | | | | | | |
| 7 | % of spend subject to competition | 85% | 95.4% | | | | 95.4% | 85% | 88.6% | 88.6% | ↑ |
| 8 | Compliant spend as % of overall spend | 100% | 100% | | | | 100% | 100% | 99.4% | 99.4% | ↔ |

Data Source: data supplied by Procurement

Accountable Person: Head of Finance and Procurement

**Spend subject to competition-**

The Authority now has 191 contracts in place.

The work of the team is underpinned by the Authority's Procurement Strategy based on Compliance, Collaboration and Commerciality. This now sets the focus for the team. Broader collaboration work is enabling the Thames Valley FRS's to benefit from access to new equipment through joint working, enabling the Service to obtain better pricing and support due to scale.

The procurement team has a pipeline of joint contract renewals and re-tenders for the next five years reducing the risk of any future non-compliant spend and enabling the service to fully understand the market before seeking requirements through competition. With better knowledge and expertise of the requirements and what the market can offer we can avoid expensive unnecessary spend and better manage our supply contracts. The Contract Management Framework is now also in place and staff are currently doing the online training course developed in-house.

The savings from subjecting ever more expenditure to competition need to be weighed against the incremental costs of tendering to ensure procurement activity is delivering value for money.

**Compliant spend** - The buyer gateway process enables the procurement team to monitor potential requisitions, temporarily halt any non-compliant spend and subject it to competition. Currently all requisitions are subject to review by Procurement. It is intended that the new Purchase to Pay (P2P) solution will enable the service to link supplier contracts to requisitions so that only expenditure not subject to competition will need to be subject to this gateway. The new P2P process should enable the whole transactional end of purchasing to be streamlined making it easier for users and significantly reducing the administration related to this process.

| | Measure | 2019/20 Target | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | Y.T.D. Actual | YTD Target | 2018/19 Performance | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | Q1 18/19 | YTD 18/19 | 18/19 Vs 19/20 YTD |
| Information Rights | | | | | | | | | | | |
| 9 | Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act and Environmental Information Regulations). | 0 | 0 | | | | 0 | 0 | 0 | 0 | ↔ |
| | Data Source: Manual Input from Information Governance<br><br>Accountable Person: Head of Business Information Systems<br><br>During this period RBFRS received a request for internal review regarding one FOI request, which was carried out within the timelines documented within RBFRS policy.  The review resulted in no change to the position on disclosure of the requested information.  The requestor has since submitted a complaint to the Information Commissioners Office regarding the handling of the request.  This investigation is ongoing and RBFRS is fully prepared to respond in full when the ICO case handler has been assigned. | | | | | | | | | | | |
| 10 | Number of Information Commissioner assessments finding that the Service has breached Data Protection Legislation (Data Protection Act and forthcoming legislation) | 0 | 0 | | | | 0 | 0 | 0 | 0 | ↔ |
| | Data Source: Manual Input from Information Governance<br>Accountable Person: Head of Business Information Systems<br><br>There have been no data protection breaches requiring ICO notification in this period. | | | | | | | | | | | |

# Budget Update

## RBFRS Revenue Expenditure Quarter 1 2019/20

| | Annual Budget £'000 | Apr - June Outturn £'000 | Forecast to YE £'000 | Fcast - Budget Variance £'000 |
|---|---|---|---|---|
| **EMPLOYEES** | | | | |
| STATIONS | 16,721 | 4,061 | 16,522 | (199) |
| NON-STATIONS | 10,289 | 2,537 | 10,278 | (11) |
| TRAINING | 646 | 107 | 747 | 101 |
| OTHER | 224 | 30 | 226 | 2 |
| | **27,880** | **6,735** | **27,773** | **(107)** |
| **PREMISES** | | | | |
| REPAIRS & MAINTENANCE | 726 | 97 | 726 | 0 |
| RATES | 886 | 266 | 875 | (11) |
| CLEANING | 229 | 29 | 231 | 2 |
| UTILITIES | 436 | 38 | 435 | (1) |
| | **2,277** | **430** | **2,267** | **(10)** |
| **SUPPLIES** | | | | |
| INSURANCE | 325 | 181 | 325 | 0 |
| EQUIPMENT | 422 | 99 | 441 | 19 |
| IS EQUIPMENT & LICENCES | 663 | 190 | 681 | 18 |
| CLOTHING / PPE | 347 | 103 | 348 | 1 |
| COMMUNICATIONS | 1,214 | 220 | 1,207 | (7) |
| OCCUPATIONAL HEALTH | 181 | 80 | 180 | (1) |
| PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTIONS | 155 | 74 | 151 | (4) |
| HYDRANT REPAIRS | 37 | 1 | 37 | 0 |
| COMMUNITY FIRE SAFETY SUPPLIES | 194 | 57 | 194 | 0 |
| SUPPLIES OTHER | 170 | 41 | 182 | 12 |
| | **3,708** | **1,046** | **3,746** | **38** |
| **CONTRACTS** | | | | |
| CONTRIBUTION TO TVFCS & COLLABORATION | 856 | 203 | 846 | (10) |
| LEGAL | 50 | 4 | 54 | 4 |
| CONTRACTS OTHER (incl. Professional Services) | 592 | 123 | 610 | 18 |
| | **1,498** | **330** | **1,510** | **12** |
| **TRANSPORT** | | | | |
| VEHICLE RUNNING COSTS | 725 | 145 | 735 | 10 |
| TRAVEL | 293 | 51 | 291 | (2) |
| | **1,018** | **196** | **1,026** | **8** |
| **PENSIONS** | | | | |
| PENSIONS | 422 | 92 | 424 | 2 |
| | **422** | **92** | **424** | **2** |
| **INCOME** | | | | |
| GRANTS | (2,066) | (2,042) | (2,066) | 0 |
| RENTAL INCOME | (187) | (50) | (160) | 27 |
| TVFCS RECHARGE INCOME | (295) | (74) | (295) | 0 |
| INCOME OTHER | (224) | (37) | (213) | 11 |
| | **(2,772)** | **(2,203)** | **(2,734)** | **38** |
| **NET COST OF SERVICES** | **34,031** | **6,626** | **34,012** | **(19)** |
| DEBT CHARGES INTEREST | 392 | 19 | 392 | 0 |
| INVESTMENT INTEREST | (125) | (13) | (125) | 0 |
| **NET OPERATING EXPENDITURE** | **34,298** | **6,632** | **34,279** | **(19)** |
| REVENUE FUNDING OF CAPITAL | 500 | 0 | 500 | 0 |

| | | | | |
|---|---|---|---|---|
| CAPITAL CONTRIBUTIONS TO STAFFING COSTS | (41) | (11) | (41) | 0 |
| APPROPRIATION TO/(FROM) RESERVES | (965) | 0 | (965) | 0 |
| MINIMUM REVENUE PROVISION | 289 | 0 | 289 | 0 |
| **NET EXPENDITURE** | **34,081** | **6,621** | **34,062** | **(19)** |
| **GOV GRANTS/PRECEPTS** | | | | |
| GOV GRANTS/PRECEPTS | (34,081) | (10,066) | (34,149) | (68) |
| **(SURPLUS)/DEFICIT** | **0** | **(3,445)** | **(87)** | **(87)** |

## Revenue Budget Q1 2019/20 Update

The forecast year-end outturn for the Revenue Budget of £34.1 million is a surplus of £87,000, which is a variance of 0.3%.

As in previous years, the Service continues to undergo organisational change to deliver Efficiency Plan savings as well as meet our commitments to the public. The main focus for 2019/20 is the delivery of the Remotely Managed Stations/Flexible Duty Officer Project (RMS/FDO) which is being implemented in two phases.

Phase One started on May 1st 2019, and established twenty-four Watch Based Station Managers (WBSM) on fire stations across the Service. Phase Two is under consultation and involves the reduction of Flexible Duty Officer numbers and introduction of some new Green Book roles.

The introduction of the new Watch Based Station Managers (WBSMs) means that a large number of individuals are in new roles at the one time. Recognising the criticality of supporting these new managers, and to afford them the best opportunity to achieve competence in their role, we established an additional a temporary Group Manager role for 12 months, dedicated to supporting the new 24 WBSMs in their development. In addition we established a new development pathway for our WBSMs that includes a number of leadership, management and command modules and assessments.

Taking into account the variations in budgets from vacancies in relation to WDS, RDS and flexi-duty officers alongside savings stemming from the RMS/FDO project, we are forecasting a net surplus in station budgets for the 2019/20 financial year. We are utilising £138,000 from this surplus to support delivery of the additional development measures outlined above which will benefit our Service Delivery teams through increased management, leadership and command capability.

## Financial Position as at June 2019 (Capital)

| CAPITAL SCHEMES | Total Project Budget £'000 | Actual Spend in Prior Years £'000 | Actual Spend to end Q1 £'000 | Est. Project Spend to completion £'000 | Total Est. Project Spend £'000 | Variance From Budget £'000 | % Variance From Budget | Est. Project Completion Date | Commentary |
|---|---|---|---|---|---|---|---|---|---|
| New fire station - Theale | 6,200 | 851 | 50 | 5,299 | 6,200 | 0 | 0% | | Ground remediation specialist contractor now nominated following competitive procurement process. Main build contractor tender was released to market on 8th July as per programme with the outcome being presented to Members of Management Committee at the December meeting as part of the full business case. An amendment to planning has been submitted to the LPA following the extensive VE process and the outcome is expected by 30th September 2019. Negotiations with the site owner continue over the purchase and the outcome will be included within the full business case. |
| Major redevelopment - Crowthorne | 1,975 | 195 | 24 | 1,756 | 1,975 | 0 | 0% | | Site works commenced to programme in May with the demolition of the old fire station. The ground and early works for the new station are all progressing well and to programme. The station continues to respond from their alternative location at Wellington College and this is also continuing to work well. The new station is programmed to be complete by Summer 2020. |
| Fire station - minor works | 650 | 0 | 0 | 650 | 650 | 0 | 0% | | Annual budget of £130k over 5 year period of phase 1. The Head of Service is currently reviewing locations and priorities, with a report to be presented to Management Committee outlining proposed forthcoming projects at Slough & Maidenhead. |

| CAPITAL SCHEMES | Total Project Budget £'000 | Actual Spend in Prior Years £'000 | Actual Spend to end Q1 £'000 | Est. Project Spend to completion £'000 | Total Est. Project Spend £'000 | Variance From Budget £'000 | % Variance From Budget | Est. Project Completion Date | Commentary |
|---|---|---|---|---|---|---|---|---|---|
| Fleet & equipment - fire appliances | 4,250 | 0 | 246 | 4,004 | 4,250 | 0 | 0% | | Collaborative exercise with Thames Valley partners which had delivered 7 new appliances by the end of 2018/19. A further 2 vehicles were then delivered in July 2019 with another 2 vehicles in build which are due to be delivered in Qtr 3 19/20. It is then planned for a further 4 vehicles will be delivered in early 2020/21, meaning that all whole time pumps will have been renewed. |
| Fleet & equipment - aerial ladder platform | 850 | 0 | 101 | 649 | 750 | -100 | -12% | | Project is progressing well with the vehicle currently under construction and due to be delivered in Qtr 4 2019/20. |
| Fleet & equipment - special appliances | 1,550 | 0 | 0 | 1,550 | 1,550 | 0 | 0% | | The Head of Service is currently completing a review of this area and options will be confirmed once the full project has been completed. |
| Fleet & equipment - other ancillary vehicles | 460 | 0 | 0 | 460 | 460 | 0 | 0% | | A recent review has identified the need to replace / upgrade a number of older vehicles and a report will be presented to Management Committee detailing this. |
| ICT - IBIS redevelopment | 131 | 95 | 11 | 25 | 131 | 0 | 0% | | Project has been extended into 2019/20, with the aim of developing additional compatibility between IBIS and hand held devices. |
| ICT - helpdesk system | 45 | 29 | 0 | 10 | 39 | -6 | -13% | | System has been re-vamped providing additional self-service portals for departments. New reporting tool to be implemented in Qtr 3 2019/20 with scope of extending licences to other departments in the organisation currently being investigated. |

| CAPITAL SCHEMES | Total Project Budget £'000 | Actual Spend in Prior Years £'000 | Actual Spend to end Q1 £'000 | Est. Project Spend to completion £'000 | Total Est. Project Spend £'000 | Variance From Budget £'000 | % Variance From Budget | Est. Project Completion Date | Commentary |
|---|---|---|---|---|---|---|---|---|---|
| ICT - Sage 1000 upgrade | 65 | 17 | 0 | 48 | 65 | 0 | 0% | | Phase 1 of the upgrade to Sage 1000 has been successfully implemented, with phase 2 to commence in Qtr 3 2019/20. |
| ICT - Learning Management System | 45 | 0 | 0 | 45 | 45 | 0 | 0% | | System specification and tender document has been issued in Qtr 2 2019/20. Once system has been purchased there will be an ongoing requirement to develop content on the platform. |
| ICT - Firewatch Development | 60 | 51 | 6 | 3 | 60 | 0 | 0% | | Project has been extended into 2019/20, with system 7.7 currently in testing and due to be released in Qtr 3 2019/20. System 7.8, which will introduce a major change, is also being developed by the Supplier but has not yet been released. |
| ICT - asset replacement / licences | 1,070 | 0 | 116 | 954 | 1,070 | 0 | 0% | | Rolling replacement programme of assets has commenced, with phase 1 due to be completed in Qtr 2 2019/20. Phase 2, which will focus on desktop upgrade and monitors at stations / TVFCS, will commence later this year and will cost approximately £80k. Phase 3 will then focus on replacing approximately 150 Generation 3 laptops costing £100k. Licence renewals are ongoing in 2019/20 with Office 365 due to be introduced next year, which will be based on a subscription style model. |
| **Total (Under)/Over** | 17,351 | 1,238 | 554 | 15,453 | 17,245 | -106 | -1% | | |

# Transitions Bids Spend Summary

At Strategic Performance Board we examined the underspend on transitions bids and, where there has been an underspend on people posts, it was agreed to fund these posts from central budgets and return the funds back into the transition fund. These funds will become available for additional projects.

| Cost Centre | Description | Owner | Date bid approved | Budget £k | Cumulative Spend to end of Q1 19/20 (£k) | Start Date | Forecast End Date | Update |
|---|---|---|---|---|---|---|---|---|
| K12-601 | **HR Advisor Support** To ensure an HR resource with appropriate skills and knowledge is available to support Managers to execute necessary staffing restructures and re-organisation to effect organisation change. | Becci Jefferies | 02/02/16 | 162,500 | 162,123 | 02/02/16 | 29/05/19 | **PROJECT COMPLETED IN MAY 2019** Following the restructure of the HR and Learning and Development function, which saw a reduction in HR staff, funding for temporary HR resources was sought from the Transition Fund in support the delivery of various change projects. These resources can be flexed to meet needs and project timelines. Support provided by 1 fixed term member of staff. **Delivered to date:** • Work with Heads of Service and departmental managers to assist with restructure activity including planning, reports design and consultation - Complete • Reviewed the operational leave policy • Contract, discipline Review • 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 • Two tier entry feasibility report • Armed Forces Covenant development • Support arrangements reviewed during Q1 and role advertised in Q1 • Bursary Policy review • Completion of support and consultation for Risk and Performance and Service Delivery restructures • Collation of objectives identified for EDI Forum consideration • Additional HR support in place on temporary basis to respond |

| Cost Centre | Description | Owner | Date bid approved | Budget £k | Cumulative Spend to end of Q1 19/20 (£k) | Start Date | Forecast End Date | Update |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | to key projects<br>• Development of PDI pilot to include behaviours - for pilot inQ1<br>• Equality Diversity and Inclusivity action plan development for consideration by the EDI forum<br>• Recruitment Attraction Review - initial review<br>• Positive action plan - commenced implementation of actions<br>• EDI intranet pages developed<br>• Behavioural competency framework agreed by SLT and sent for consultation<br>• PDI form reviewed<br>• Interview support for Remotely Managed Stations secured<br>• Job profile review and guidance review<br>• Equal pay audit<br>**To be delivered:**<br>• Training on behaviour competency framework<br>• Equal pay audit paper to SLT and Audit and Governance in November 19. |
| K16-602 | **Systems Business Partner - resource** Two year temporary post – systems business partner, a customer facing role to deliver and rollout Firewatch upgrades, IBIS improvements and support development of other service applications from an end user perspective | Tony Vincent | 07/06/16 | 76,720 | 59,282 | 29/08/16 | 28/06/19 | **PROJECT COMPLETED IN JUNE 2019**<br>**Delivered to date:**<br>• Post filled and started on 29/08/16<br>• Activity to understand role requirements and current system<br>• Working on Firewatch 7.6 testing prior to implementation particularly around whole-time payments processing<br>• Providing FireWatch 7.5 support<br>• Checking if mileage claims could also be done within FW<br>• Retained payments in Firewatch 7.6<br>• Documentation of new FireWatch user manuals<br>• Set up and testing new Fire Watch modules (Availability, mobilisation, self-service)<br>• Provision of FireWatch 7.6 go live<br>• Testing new Availability Service for Retained<br>• Training and Go-Live on new Availability Service for Retained<br>• Key member of the FireWatch Senior members forum<br>• Liaising with Finance to ensure Station level Cost centre |

| Cost Centre | Description | Owner | Date bid approved | Budget £k | Cumulative Spend to end of Q1 19/20 (£k) | Start Date | Forecast End Date | Update |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | reporting is in place and correct<br>• Acting Up payments in FireWatch<br>• Testing of Mobilisation interface with TVFCS Vision Reference system (test environment only)<br>• Assisting in setup of asset project at Station 2<br>• OTP reporting<br>• Officer overtime payments in Firewatch<br>• Mobilisation interface with TVFCS Vision<br>• OQP reporting<br>• Remote Managed Station project – FireWatch configurations<br>-Introduced a new way of recording and reporting on Bulletin issued by both OPAS, Health & Safety and TVFCS<br>-Introduction of a new "Full Time Establishment" figures report, used by OPAS and HR<br>**To be delivered:**<br>• General FireWatch 7.6 ongoing support and training – ongoing<br>• Ongoing collaboration with other FRs in the way we use FireWatch, to ensure we and other FRSs are gaining the maximum potential from the system<br>• Setup and testing of new Self Service module - Setup/testing Apr/May 2019 – estimated live Jun/Jul 2019 (if this is still a requirement)<br>• Testing and release of major Firewatch release version 7.7 (now in our test environment) - Initial testing started – UAT testing to start in July 2019 – current estimate of delivery date will be Oct 2019<br>• Testing and release of major Firewatch release version 7.8 (when Beta version released by Infographics) - Aug 2019 (tbc)<br>• Resource to be made permanent with funding taken from base budget |

| Cost Centre | Description | Owner | Date bid approved | Budget £k | Cumulative Spend to end of Q1 19/20 (£k) | Start Date | Forecast End Date | Update |
|---|---|---|---|---|---|---|---|---|
| K19-601 | **Development and Assessment pathway** 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 | 05/07/16 | 30,000 | 7,626 | 01/06/18 | 30/09/19 | To assist in a full review of the NVQ methodology of determining competency is required. A bid against the Transitional Fund was made to undertake research and make recommendations on how RBFRS should deliver a competency framework for the future. **Delivered to date** • Scope of work agreed and PID written and approved • Phase 1 work – research undertaken • Equality Impact Assessment and communication plan development project group established. • Research provisions in other FRS • Questionnaire to stakeholders • Stakeholder workshops took place - 30.11.18 • Interim Station Manager (SMA) solution to support the Remotely Managed Stations / Flexi Duty Officer project developed • Consultation on new development and assessment pathway • Resource requirements to deliver next stage of project reviewed and Business case for additional temporary resource to support development of new watch based station managers made in April 2019 (see new bid item K34-601) • Development and assessment pathway for SMs for 1/5/19 implemented • External quality assurance for SM developmental and assessment pathway achieved **To be developed:** • Progress to be monitored via Programme Board • Design development and assessment pathway for Group Manager |

| Cost Centre | Description | Owner | Date bid approved | Budget £k | Cumulative Spend to end of Q1 19/20 (£k) | Start Date | Forecast End Date | Update |
|---|---|---|---|---|---|---|---|---|
| K22-602 | **Temporary accounts officer** Funding for a temporary accounts officer for two years starting April 2017. This is the continuation of a post in the old structure that will be required while new ways of working are embedded within the department and the wider organisation. | Conor Byrne | 02/08/16 | 109,000 | 72,552 | 03/04/17 | 29/03/20 | Prior to the Finance department restructure this post was financed from base budget. Currently, it is being funded by Transition Fund whilst business process re-engineering takes place to streamline processes and improve efficiency. **Delivered to date:** • 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 • Post to be required until the successful delivery of the P2P process • Tendering process will be evaluated in Q3 2019/20 **To be delivered:** • Support implementation of efficient P2P processes |
| 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, | Conor Byrne | 02/08/16 | 90,000 | 51,452 | 14/08/17 | 31/03/20 | This post is required while collaborative procurement options are being investigated. **Delivered to date:** •Post filled in August 17 • Contract register and work plan updated weekly • Contract repository review completed • Set up contract award process • Delivered range of new contracts including ALP contract, training, commodities, medical supplies as part of allocation of work within the team. • Supported the achievement of 90% of spend now in formal contracts. **To be delivered** • Monitor that low level repeat spend remains compliant with RBFRS Contract Regulations • Ongoing achievement of annual Procurement work plan and service plan • Deliver procurement savings as reported to the Home Office |

| Cost Centre | Description | Owner | Date bid approved | Budget £k | Cumulative Spend to end of Q1 19/20 (£k) | Start Date | Forecast End Date | Update |
|---|---|---|---|---|---|---|---|---|
| | knowledge and advice | | | | | | | • Support the delivery of new collaborative contracts across the Thames Valley<br>• Post vacant pending procurement restructure and recruitment exercise |
| 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 | 16/09/16 | 69,516 | 0 | 31/12/18 | 30/09/19 | Introduction of a e-learning platform required to facilitate achieving the organisational development objectives<br>**Delivered to date:**<br>• Resourcing and Development Manager started in mid-May and objectives set regarding the provision of a Learning Management System<br>• Engagement with other organisations to understand the developments in eLearning<br>• Further review of requirements completed<br>• Unsuccessful attempts to secure an individual to date with alternative recruitment options being evaluated<br>• Learnings from Development Assessment Pathways (DAPs) design informed need. Requirements informed specification and tender process.  Explored opportunities for potential joint procurement with OFRS and BMKFRS.<br>• Tender process for LMS run but unsuccessful in securing appropriate system<br>• Specification reworked in conjunction with other Thames Valley fire rescue service<br>**To be delivered:**<br>•  Draft job profile to be evaluated<br>•  Recruit temporary resource to develop learning resources and support progress with DAPs - once LMS acquired |

| Cost Centre | Description | Owner | Date bid approved | Budget £k | Cumulative Spend to end of Q1 19/20 (£k) | Start Date | Forecast End Date | Update |
|---|---|---|---|---|---|---|---|---|
| K30-601 | **Programme Office Support** Supporting the Programme Office lead starting the 1st May 2019 for 2 years. This resource will assist with the effective delivery of projects across the organisation, the continuation of embedding project methodology through guidance and assurance and the monitoring of transition fund spending to achieve our strategic commitments. | Katie Mills | 05/03/19 | 55,470 | 4,692 | 02/05/19 | 01/05/21 | **Delivered to date:** • Gathering and collation of papers for Programme Board on 2/7/19 • Meetings held for project managers dependent on the RMS/FDO project to establish and track linked tasks • Project governance support for the RMS/FDO project including project closure for phase 1 (RMS) • Reported on the transition fund spending for Q4 19 • Update of Programme board pages on Siren • Supported workshop for ESMCP project to obtain the tasks needed for an RBFRS outline project plan • Began the Business Process Improvement (BPI) programme by facilitating the mapping of Store ordering process and drafting a fact sheet for process mapping • Review project management forms / templates: project initiation document and project management checklist • Provide project support to the Developmental and Assessment Pathway project when required **To be delivered:** • Assisting in the preparation and delivery of Project Management training 22/7/19 • Continue to assist the Programme Office Lead on the BPI project and the project managers on the ESMCP, RMS/FDO and DAPs projects • Update of transition fund spend reporting for Q1 20 • Plan and rollout updated 'objective focussed' project documentation templates • Provide assurance and prepare papers for programme board on 25/9 |

| Cost Centre | Description | Owner | Date bid approved | Budget £k | Cumulative Spend to end of Q1 19/20 (£k) | Start Date | Forecast End Date | Update |
|---|---|---|---|---|---|---|---|---|
| K31-601 | **L&D resource** 2 general Instructors (grey or green book) for 1 year | Becci Jefferies | 22/01/19 | 100,000 | 0 | | | Introduction of temporary additional L&D resources to support delivery of L&D activity over next 12 months **Delivered to date:** • Job profile for green book post developed. **To be delivered** • Temporary individual to be identified through selection process to commence July 2019. • Green book roles to be advertised. |
| K33-601 | **Technical Communications Officer** Extend funding for the temporary position by 2 calendar years to April 2021 in order to provide increased resilience in provision of technical communications (radios/station end equipment/on vehicle equipment) deployment, maintenance and support. | Tony Vincent | 22/01/19 | 70,600 | 0 | | | Position under recruitment - currently vacant |
| **Total ongoing (open) projects** | | | | 763,806 | 357,726 | | | |
| **Closing total for completed projects prior to Q1** | | | | 1,032,325 | 1,032,325 | | | |
| **Grand Total** | | | | **1,796,131** | **1,390,051** | | | |
| | | | | | | | | |
| **Total budget allocated** | | | | 1,796,131 | | | | |
| **Total budget available for allocation** | | | | 203,869 | | | | |

# Procurement

*(Data accurate as of 07/06/2019)*

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

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

| Project Number | Department | Contract Detail | Contract Status | Procurement Process | Contract Award Date | Contract Value | Awarded to | Collaboration |
|---|---|---|---|---|---|---|---|---|
| 317 | Facilities & Fleet | Uniforms | Renewal | Framework | 09/05/2019 | £150,000 Estimate over 3 years | MWUK (Dimensions) | Yes |
| 503 | Facilities & Fleet | Fuel Cards | Renewal | Framework | 30/04/2019 | Charge based on usage | Allstar Business Solutions Ltd | Yes |
| 504 | L&D | Core Skills Lot 3 Managing Mental Health | New | Tender | 04/06/2019 | £5,400 Estimate | The Inclusion Initiative Ltd | No |
| 504 | L&D | Core Skills Lot 1 Maximising Engagement Lot 2 Coaching as a Management Tool | New | Tender | 04/06/2019 | £8,550 Estimate | South East Training Network Ltd | No |
| 518 | L&D | IOSH Health & Safety Training | Renewal | 3 Quotes | 04/06/2019 | £50,000 maximum call off | St Johns Ambulance | Yes |
| 536 | Business Information Systems | Demographic Lifestyle Data Analytics | Renewal | Tender | 10/04/2019 | £52,313 over 5 years | Experian Ltd | Yes |
| 523 | L&D | Water Rescue & Working at Height Training | Renewal | Tender | 01/04/2019 | £204,015 Estimate | The Outreach Organisation | No |

| Project Number | Department | Contract Detail | Contract Status | Procurement Process | Contract Award Date | Contract Value | Awarded to | Collaboration |
|---|---|---|---|---|---|---|---|---|
| 548 | Facilities & Fleet | Safety and Personal Protective Equip | Renewal | Framework | 01/04/2019 | £33,302 estimate over 5 years | Arco | No |
| 572 | HR | Provision of Temporary Agency Staff | Renewal | Framework | 24/06/2019 | £660,000 over 5 years | Reed Specialist Services Ltd | Yes |
| 606 | Property Capital Projects | Theale Remediation removal of material under JCT Ts&Cs | New | Tender | 30/05/2019 | £853,211 | Vertase FLI | No |
| 642 | L&D | External Assurance from an Awarding Organisation for an Internal/Development Pathway/Programme | Renewal | 3 Quotes | 03/04/2019 | Not to exceed £50,000 | SFJ Awards Ltd | No |
| 644 | L&D | Recruitment Assessment Tools - Lot 3 on line FS related ability tests | Renewal | Tender | 03/06/2019 | £28,500 over 4 years, based on 900 users | Fire Service College | No |

# Human Resource Performance

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

| | Measure | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | 2019/20 YTD | Q1 18/19 | Authorised establishment (No of authorised posts including Fixed Term & Project Posts) |
|---|---|---|---|---|---|---|---|---|
| **STAFF IN POST** | Wholetime | 363 | | | | 363 | 389 | 384 |
| | Retained | 90 | | | | 90 | 74 | 91 |
| | Control | 40 | | | | 40 | 41 | 40 |
| | Green Book | 152 | | | | 152 | 149 | 184 |
| | **Total Number of Staff in Post** | **645** | | | | **645** | **653** | **699** |
| | | | | | | | **Q1 18/19** | |
| **STAFF TURNOVER** | Wholetime | 6 | | | | 6 | 6 | |
| | Retained | 3 | | | | 3 | 4 | |
| | Control | 1 | | | | 1 | 1 | |
| | Green Book | 7 | | | | 7 | 10 | |
| | Total Number of Leavers (Heads) | 17 | | | | 17 | 21 | |
| | Staff in Post (SIP) | 645 | | | | 645 | 653 | |
| | **Percentage of Leavers vs. SIP** | **2.6%** | | | | **2.6%** | **3.2%** | |
| | | | | | | | **Target** | **YTD 18/19** |
| **FEMALE STAFF** | Wholetime | 4.4% | | | | 4.4% | | 4.1% |
| | Retained | 8.8% | | | | 8.8% | 4% | 5.4% |
| | Control | 72.5% | | | | 72.5% | | 68.3% |
| | Green Book | 56.6% | | | | 56.6% | | 57.0% |
| | **Total** | **21.5%** | | | | **21.5%** | | **20.4%** |
| | | | | | | | **Target** | **YTD 18/19** |
| **BME STAFF** | Wholetime | 5.0% | | | | 5.0% | | 4.9% |
| | Retained | 3.3% | | | | 3.3% | | 0% |
| | Control | 2.5% | | | | 2.5% | 5% | 2.4% |
| | Green Book | 15.8% | | | | 15.8% | | 16.8% |
| | **Total** | **7.1%** | | | | **7.1%** | | **6.9%** |

NB. 27 individuals hold more than one role (Dual Contract).

Staff Turnover at the end of this quarter is 2.6% with an estimated annual turnover out-turn at year-end to be around 10.56%.

There were 17 leavers and 17 new starters this quarter. Please note: One leaver not reported in Quarter 4 is included in the reduction in overall staff in post numbers for Q1.No trends have been identified following examination of the reason for leaving as the majority of staff that have left have retired or left for personal betterment. One employee transferred to another FRS.

BME Staff numbers have decreased this quarter from 7.5% in Q4 to 7.1% in Q1. This decrease is due to staff in post figures increasing, During this quarter three BME employees left and three joined the Service. Compared to this quarter last year we are 0.2% higher.

The number of female firefighters employed in the Service has increased to 24 this quarter. This is due to one of our existing female employees becoming a dual contract employee and joining the retained duty system (RDS) in addition to working in her current Green Book role. This has increased the percentage of female firefighters from last quarter by 0.2% from 5.10% to 5.3%.

The number of staff employed by RBFRS with a disability has increased this quarter from 5.4% to 6.3%. Although we lost two staff this quarter with a disability we employed a further seven. Five of which join us on a fixed term basis as part of the Change 100 Programme. At the end of Q1, RBFRS employed 41 members of staff with a disability.

**Female Focused Have a Go Events**

Three female focus awareness days took place in April, May and June to support our wholetime firefighter recruitment campaign. Attendees were able to obtain information about the role, talk to female firefighters and have a go at some of the physical tests. 28 people (22 females) attended across the three events, 4 people attended more than one event which enabled them to see how they progressed. Feedback was positive about the opportunities. Since the events, two females have passed the physical test stage to become an on-call firefighter.

| Measure | | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | 2019/20 YTD | 2018/19 Performance | |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | Q1 18/19 | YTD 18/19 |
| AGE PROFILE | 25 and Under | 45 | | | | 45 | 35 | 35 |
| | 26-35 | 163 | | | | 163 | 182 | 182 |
| | 36-45 | 211 | | | | 211 | 223 | 223 |
| | 46-55 | 192 | | | | 192 | 179 | 179 |
| | 56-65 | 33 | | | | 33 | 32 | 32 |
| | 66 and Over | 1 | | | | 1 | 2 | 2 |
| | **Total** | **645** | | | | **645** | **653** | **653** |

**Ageing Workforce**

To support the implementation of strength tests, during the fitness test cycle in October 2019, a training programme has been made available to staff. Watch Physical Education Supervisors (PES) are being assessed on their competence to coach their colleagues and equipment delivery is imminent. The trial will inform next steps.

| Measure | | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | 2019/20 YTD | 2018/19 Performance | |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | Q1 18/19 | YTD 18/19 |
| DAYS LOST TO SICKNESS | Short | 516 | | | | 516 | 383 | 383 |
| | Long | 563 | | | | 563 | 532 | 532 |
| | **Total** | **1079** | | | | **1079** | **915** | **915** |
| | *(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).* | | | | | | | |

## Disciplinary Cases and Grievances

| | Commenced in Q1 | Commenced in Q2 | Commenced in Q3 | Commenced in Q4 | TOTAL commenced 18/19 | TOTAL commenced 17/18 |
|---|---|---|---|---|---|---|
| **Misconducts (including gross misconducts)** | 2 | | | | 2 | 5 |
| **Grievances** | 3 | | | | 3 | 5 |
| **Whistle Blowing** | 0 | | | | 0 | 0 |
| **Use of RIPA** | 0 | | | | 0 | 0 |

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

# QUADRANT THREE: PRIORITY PROGRAMMES

## People Strategy Progress

The purpose of the People Strategy 2018-2021 is to support RBFRS staff to become the best public servants they can be, creating a workforce that can deliver efficient and effective services on behalf of the RBFA, to manage all foreseeable fire and rescue related risks that could affect the people of Berkshire. In 2019/20, our key People Strategy deliverables will include:

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| **Objective 1: Recruit, train and develop people to ensure we create a safe, professional and capable workforce, who can provide a fit for purpose service, 24/7, 365 days a year** | | | | |
| Review our recruitment lifecycle from pre-attraction to induction; consider target audiences, communication techniques for early engagement with communities, technology to assist the application process, criteria for selection and time from advert to induction. | • Project objectives have been reviewed to refocus the project.<br>• Feedback collection mechanisms and clear deliverables identified to ensure a suitable project implementation review can be completed.<br>• SLT has approved, for consultation, the new Recruitment and Induction Policy and the job profile template.<br>• The facility to extend the recruitment portal for use during the WT campaign has been agreed and Webrecruit are designing the necessary reports to enable the activity to be undertaken. This will result in a significant saving in relation to running the front end of the Wholetime campaign.<br>• The agency provision contract has been awarded to Reed.<br>• Positive Action Have a Go events have been completed and the progress of the attendees will be monitored through each stage. | • Feedback via Focus groups, one to one and survey monkey to be completed (qualitative feedback)<br>  o Inductions / new starter process<br>  o Recruitment Portal (managers and applicants)<br>  o Recruiting managers support<br>• Statistical analysis to identify progress in diversity of attraction since the implementation of the portal will be completed as at end of Q1 2019/20<br>• Identify the outcomes of the Grayling review to support the design of recruitment resources and materials<br>• Roll out of new process for engaging Agency workers.<br>• Analysis of translation of Positive Action attendees into applicants at stage one of the Wholetime recruitment process competed. | | No Issues at this time |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| | • Grayling presented their work to date to the EDI forum. | | | |
| Through the Workforce Planning Board, we will monitor the skills and staff numbers with the aim of ensuring we have the right people, in the right place, at the right time. | • Workforce planning information planned to cover all staff and reviewed regularly as part of performance monitoring. Refining information on green book staff<br>• Regularly monitoring the number of temporary positions across grey book roles<br>• Monitoring capacity in officer specialisms | • Continued monitoring of the grey book temporary roles and officer specialisms following the RMS/FDO implementation<br>• Review work required around RDS training and development resource<br>• Review L&D delivery model | | No Issues at this time |
| Implementing recommendations from the review of assessment of operational competence | • Officer Learning Outcome documents finalised and uploaded to Siren<br>• Link to Officer Training Programme (OTP) created on Siren<br>• Officer OTP, built and tested<br>• Officer OTP launched on the 3rd June<br>• Ongoing work with station base specialist staff is progressing to establish station based specialisms<br>• Officers have started to record their training against the new modules and are able to plan future training requirements using the new Officer OTP.<br>• Project interdependency meetings have proved beneficial in identifying timescales key information will be known to inform Officer specialisms | • Further progress of station based specialisms through liaison with specialist leads on station, including ongoing consultation with rep bodies<br>• Progress with known officer specialisms<br>• Creation of a number of learning outcome documents to support new modules and repeat periods identified<br>• Liaison with RMS/FDO project team to gain up to date information on future outcomes of project. | | No Issues at this time |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| **Objective 2: Increase the diversity of our workforce to better represent and therefore serve our local communities** | | | | |
| Continue to support the Leonard Cheshire Change 100 programme to work with disabled graduates on a 100-day intern programme. | • Attendance at the Assessment Centres provided an insight into the process of selection. 6 role profiles submitted for potential candidates to be matched to.<br>• Interns expected to start from June 2019.<br>• Disability Awareness session held for line managers of new interns | • Inductions being arranged for individual areas and managed locally. | | No Issues at this time |
| Deliver the 2019/20 requirements of the RBFRS Equality, Diversity and Inclusivity Objectives and Action Plan | • RBFRS attendance at the Asian Fire Service Association (AFSA) annual conference<br>• A positive action task & finish group was formed to assist with the WT recruitment campaign<br>• Events to encourage and support women in applying as firefighters have taken place<br>• Engagement meetings with community stakeholders have been held in partnership with Grayling to discuss EDI and promote the service<br>• Ambassadors from within the service have been sought to support the WT recruitment campaign<br>• Mandatory online EDI training for all staff has taken place including further training for line managers | • RBFRS to attend Reading Pride in August to promote the service<br>• Further EDI training to be implemented<br>• Promotion of RBFRS' commitment to EDI during pride month in June with corporate materials updated to a pride theme | | No Issues at this time |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| **Objective 3: Develop people and recruit talent to take personal responsibility for leadership in the organisation to ensure a public service ethos, support collaboration and effectively deliver service improvement** | | | | |
| Undertake a review of Reward and Recognition | • Planned for activity to start during Q4 | | | |
| Review and develop talent management systems to support succession planning | • Work due to start during Q4 | | | |
| Develop career pathways across all staff groups across the organisation. | • Roll out of SM A pathway completed with ongoing reviews planned. Focus is now on operational (whole-time, on-call and control) development and assessment pathways<br>• Succession arrangements completed for WM Learning support following conclusion of the selection process<br>• External assurance procurement evaluations completed with contract awarded and development pathway endorsed by the provider<br>• Learning Management System Procurement evaluation completed but not awarded. New Tender to be released in Q2 with BFRS.<br>• Business case to SLT for new fixed term GM, Service Delivery, Development and Transition approved | • Invitation to Tender for a Learning Management System to be released in Q2 in collaboration with BFRS.<br>• Recruitment of a LMS Learning Specialist on hold until system tender for LMS system completed<br>• Design of development and assessment pathways for AM and GM to be completed and presented to SLT. Expected to be delivered aligned to RMS/FDO timescale from Oct 19.<br>• External assurance for AM and GM pathways to be completed<br>• Work on the SM development and assessment pathway in Control to start<br>• Fire Fighter, Crew Manager and Watch Manager pathways expected to be implemented between January - March 2020.<br>• Development pathways for Green Book staff will be reviewed from April 2020 | <span style="color:green">█</span> | No Issues at this time |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| Increase opportunities to gain new skills by broadening existing schemes and training options we have in place | • Design and content of the Supervisory Leadership Development Course has been completed<br>• Two cohorts of supervisory Leadership Development Programme are now underway. | • Planning in progress to understand if further cohorts of the middle manager development programme can be completed. Taking into consideration further collaboration opportunities. | | |
| **Objective 4: Develop a diverse and inclusive 'one team' culture where everyone's contribution is valued and positive behaviours are used to describe how we work together** | | | | |
| Implement a Behavioural Competency Framework | • Trial underway with various teams who are using the Behavioural Competency Framework in the Personal Development Review Framework.<br>• Learning feedback is being collated to feed back into the trial evaluation<br>• A work plan has been devised for the implementation of the Behavioural Competency Framework<br>• Behavioural training being developed | • Review of trial results and feedback prior to agreement for implementation of the framework | | No Issues at this time |
| Review the Communications and Engagement Strategy to support effective internal communications | • Planned for activity to start during Q4 | | | |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| **Objective 5: Change policies, processes and systems to ensure they enable and support the delivery of a fit for purpose, efficient and effective service to the community** | | | | |
| Working with external suppliers, to undertake programme of process improvement, which will ultimately lead to a culture of continuous improvements within teams. | • Project approved by Programme Board to deliver a number of objectives for improving our processes and providing structure and governance to this work<br>• Work commissioned to look at crewing and operational equipment processes<br>• Work commissioned for Libreea to facilitate the as-is understanding and process mapping of associated processes which feed into crewing. Stakeholders identified<br>• Mapping to be completed on processes which directly impact crewing | • Agreement on methodology to enable prioritisation of internal work needed<br>• Next steps for crewing and operational equipment processes and plan to be agreed<br>• Report to be presented presenting initial observations<br>• To-be mapping to be commissioned | | No Issues at this time |
| Initiate development of additional core skills courses on continuous improvement and business process improvement | • Review requirements in Q3 | | | |
| **Objective 6: Continue to support both the physical and mental health and wellbeing of our people.** | | | | |
| Deliver the requirements of the 2019/20 Health, Safety and Wellbeing Action Plan | • Movement specialist has designed and created a gym based assessment for those returning to work after a period of absence<br>• National Stress Awareness Month in April took place with a wide range of activities including, mindfulness, yoga, meditation and | • A non-union representative for Health & Safety to be appointed in July 2019<br>• A reality check of strength standards to be conducted followed by the implementation of standardised testing | | No Issues at this time |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|------|------------------|----------------------|-----|--------|
| | health promotion which were available to all staff<br>• Promotion for cervical screening has taken place<br>• Session on Bowel Cancer took place to highlight the illness and risks<br>• A lunchtime walk club at HQ has been set up to encourage staff to remain active | | | |
| Deliver the requirements of the 2019/20 Mental Health Action Plan. | • A pilot for mental health first aid training took place for volunteers<br>• Blue Light Champions and trauma support have received training<br>• Mental Health Awareness Week took place in May, the theme was body image, but with a focus on raising awareness of all sources of support available to RBFRS staff | • A pilot for mental health training for line managers to be trialled in Q2<br>• Further trauma support volunteers to be recruited<br>• Further mental health first aid training to take place | | No Issues at this time |
| Ensure that our workplaces meet health and safety requirements and the design and refurbishment of buildings wherever possible meet access, gender and religious needs, together with the ability to support flexible working arrangements. | • Processes in place to ensure full consideration is given when designing new facilities and refurbishments.<br>• Incorporated into the design phases by Capital Projects | | | No Issues at this time |

# Integrated Risk Management Plan

RBFA is required to publish an Integrated Risk Management Plan (IRMP). In 2018, we consulted on and published an IRMP for 2019-2023, which reflects the priorities and requirements of the Fire and Rescue National Framework for England. In 2019/20, our key IRMP deliverables will include:

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| **Project 1: Risk Analyses** | | | | |
| We will further develop our existing Risk Methodology and Risk Modelling capability to incorporate further prevention and protection information to ensure we have an even better understanding of all foreseeable fire and rescue related risks. | • Risk methodology updated and externally validated late 2018<br>• SLT agreement spring 2019 to develop model/ webmaps to support Prevention, Protection and Response. To be delivered through new ways of working projects for P&P. IRMP oversight. | • Continue close working between project leads (P&P), Data and Performance, IRMP and end user. | | • None as yet – any issues to be highlighted through new ways of working projects. |
| We will ensure that any changes to our Risk Methodology are independently validated. | • Risk Methodology updated with re-validation completed in late 2018 | • Scheduled for a potential review during 2021 | | • No issues |
| We will work in collaboration with our Thames Valley fire partners to complete work on a theoretical Thames Valley response model. | • Business case created to facilitate next steps for the project.<br>• Decision made by the Thames Valley Collaboration Executive Board to close down the project and to maintain a Thames Valley Response model as business as usual | • Project close down report to be created and maintenance of the response model to be absorbed into business as usual across the three services | | • No issues |
| We will participate in the National Fire Chiefs Council's (NFCC) Community Risk Management Group. | • Engaging in discussions being held via Workplace<br>• Attendance at Geoplace conference | • Continued interaction on online groups and Workplace<br>• Continued contribution to CRP from IRMP project officer | | • No issues |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| | • IRMP project officer in communication with NFCC CRP lead | | | |
| **Project 2: Prevention** | | | | |
| We will review our Young Firefighter programme to ensure alignment to the National Cadet Programme. | • Scope of work being developed to inform a project plan<br>• Paper being created for SLT regarding proposal for alignment to National Cadet Programme | • SLT decision on proposal<br>• Project plan to be created | | • No issues |
| We will extend the reach of our Adults at Risk Programme. | • Responsibility of the Adults at Risk Programme (ARP) has transferred to the Safety Education Team.<br>• Training to continue to companies on request and be delivered by the Safety Education Team.<br>• New version of the training package being trialled<br>• Recording number of agencies booked onto the training and how many referrals they create.<br>• CSA's, Safeguarding Leads and the new Prevention Managers will be advertising ARP | • Pending trial outcome, new delivery training package to be introduced<br>• Full review of the project to be completed<br>• Comms plan to be created | | • No issues |
| We will work in collaboration with other stakeholders and blue light partners to deliver our water safety initiatives, Safe Drive, Stay Alive and pilot Biker Down. | Safe Drive, Stay Alive<br><br>• Attendance at meetings and dates have been agreed for this academic year. | • Support to be provided to Safe Drive, Stay alive sessions.<br>• Await outcomes of NFCC Working Group who are reviewing format | | • No issues |
| | Biker Down<br><br>• Created in collaboration with Bucks and Oxon to create a | • SLT decision on the trial to be received.<br>• Berkshire locations and dates to be confirmed following SLT agreement and delivery to begin | | • No issues |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| | Thames Valley BikerDown Partnership.<br>• Report to go to SLT for trial approval | | | |
| | Water Safety initiatives<br><br>• The updated year 7 schools road and water presentation has been trialled by Bracknell and Whitley Wood.<br>• All whole time crews have had sight of the presentation and comments returned to Safety Education Team. | • Road and Water presentation will be rolled out by crews next academic year.<br>• Evaluation process to be written. | | • No issues |
| We will issue updated Local Safety Plans for all of our Hubs. | • 2019/20 Plans have been created for each unitary authority and agreed.<br>• Plans have now been published on the intranet and website | • Monthly performance review meetings being set up to monitor progress<br>• Planning for next cycle of the plans will start in Q3 | | • No issues |
| **Project 3: Protection** | | | | |
| We will review and publish a new Risk Based Inspection Programme methodology. | • Specification of work to be discussed | • Structure of work to be agreed | | • No issues |
| We will publish a new suite of protection policies. | • Suite of approx.10 Technical Guidance Notes created in collaboration with OFRS and BFRS<br>• Reviewed and published internally on Siren | • Understanding of next steps for the project | | • No issues |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| We will support two staff members to complete their Masters in Fire Engineering. | • First year successfully completed with both candidates doing well<br>• Additional academic books provided and attendance at conference agreed to support development in year 2 of the course | • Year two to start in September | | • No issues |
| Dependent of the publication of any recommendations relating to the Grenfell Tower fire, we will conduct a gap analysis on those recommendations. | • Outcomes being monitored by AM Prevention and Policy<br>• Publication expected in two years following completion of inquiry | • Continue to monitor | | • No issues |
| We will work in collaboration with our Thames Valley fire partners to align protection policies, processes and resources to improve efficiency and effectiveness. | • Project commissioned by the Thames Valley Collaboration Executive board with Phase 1 completed with the publication of revised Thames Valley Guidance Notes.<br>• Published on Siren with Berkshire amendments | • Understanding of next steps for the project | | • No issues |
| **Project 4: Response Resource Deployment** | | | | |
| We will complete the implementation of our 2017 IRMP decisions. | Retained Support Unit<br><br>• Close down report to be presented to SLT and Programme Board | • Agreement to be received for project to be closed down | | • No issues |
| | Theale<br><br>• Remediation tender evaluation completed with preferred | • Negotiations with the site owner (Network Rail) continue in order to agree the purchase of the site. | | • Negotiations with Network Rail over the purchase of the site continue however the |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| | contractor nominated. Nominated contractor will become a sub-contractor to the main build contractor. <br>• Following engagement with the LPA, revised design approved for a Section 73 Amendment to Planning. On that basis, all paperwork submitted to LPA and validated on 28th June 2019, with determination (13 week statutory consultation period) due by 30th September 2019. | • Completion of main build contractor tender by mid- November. <br>• Main contractor tender process to start on 8th July with release of PAS91/SQ to market. <br>• Full business case being developed in readiness to present to SLT and Members at Management Committee for approval to proceed. | | final purchase decision is dependent on the outcome of the main contractor tender which will provide a confirmed build cost. Only then will Members be in a position to review this project with all costs confirmed and included in the full business case. |
| | Aerial Ladder Platform (ALP) Replacement Project <br><br>• Delivery date now set for May 2020 with a fully operational date of June 2020. First payment made of the 4 stage payment framework. <br>• Confirmed the ALP is positioned in the correct location for normal mobilisations | • Review and updated project plan to be circulated once plan received from Angloco. <br>• Regular updates to continue with manufacturer on progress. <br>• Risks to be reviewed | | • Delivery date extended, project plan to be reviewed for impacts |
| | Remotely Managed Stations and Flexi Duty Officer Project <br><br>• Phase 1 of the project completed and Watch Based Station Managers now in place as from 1 May 2019. <br>• Transition into Service Delivery started <br>• Project review held to capture learnings from phase 1 | • Phase one project review (outcomes) <br>• Consultation to begin 01 July 2019 with consultation outcomes to be presented to SLT/FBU. <br>• Communicate outcomes 21 August <br>• Group Manager promotion process starts in August <br>• Selection process for new posts starts in September <br>• Implementation due start in October | | • No issues |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|------|------------------|----------------------|-----|--------|
|  | • Work started on phase 2 to compile the consultation documentation. SLT approved consultation documentation with consultation expected to start on 01 July 2019<br>• Initial work on timeline dependencies completed with regular reviews being set up | • Review of project dependencies ongoing |  |  |
| We will complete an analysis of housing and infrastructure development to determine that these do not significantly impact our risk-based model. | • Once a property is built, this is automatically included within the OS Address Base and our risk analysis for properties are calculated on the number of fires, fatalities, casualties, rescues in each property type | • Continue to analyse for impacts on our risk based model |  | • No issues |
| **Project 5: Response Safe Systems of Work Development** | | | | |
| We will work in collaboration with our Thames Valley fire partners to align our systems of work and training to National Operational Guidance and National Operational Learning. | • Operational Alignment Project commissioned by the Thames Valley Collaboration Executive Board<br>• Working on aligning timescales<br>• Work continues on product packs for incident command, BA and environmental protection | • Timescale available for review<br>• Work continue on product packs ready for publication |  | • No issues |
| We will review our four-wheel drive capability. | • Business case approved by SLT<br>• Preparation underway for project initiation<br>• PID to be submitted to Programme Board being held on 2nd July | • Approval from Programme Board to the project |  | • No issues |
| We will continue to procure standardised pumping | Standardised pumping appliances | • Two appliances to arrive Q2 into the Service and expected to be on the run by end of Q2 |  | • No issues |

| Task | Progress to date | Progress next quarter | RAG | Issues |
|---|---|---|---|---|
| appliances and work towards the standardisation of Breathing Apparatus. | • Two appliances in build with Emergency One. Due to be based at Wokingham and Windsor<br>• Arrangements for training and equipment familiarisation being confirmed | • Testing of appliances before being used for driver and operator training in Q2 to familiarise the users with the vehicles.<br>• Two further appliances to start to be built in Q2 for completion in Q3 and due to be based at Dee Rd and Whitley Wood | | |
| | Standardisation of Breathing Apparatus<br><br>• Work underway to scope the project.  work not planned to start until Q3 | • PID planned for submission to Programme Board in Q3 | | • No issues |
| We will review any NFCC outcomes on Safer Systems of Work. | • To be monitored | | | • No issues |

# QUADRANT FOUR: RISK

## Corporate Risks as of 2 September 2019

**Key to Classification of Risk Scores and Risk Movement**

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

| | |
|---|---|
| ⬌ | No risk movement |
| ⬇ | Risk decreasing |
| ⬆ | Risk increasing |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| **Capital Investment Strategy (Risk: 233) Risk Owner: Assistant Chief Fire Officer** **Inherent Score: 23** | | | | | |
| If we fail to effectively manage our property assets to ensure they are in the right locations and fit for purpose, which may become increasing likely given the level of skills and experience and capacity within our estates team and the increasing age of our fire | • Ensure a Property Asset Management Plan is developed <br> • Ensure maximum use of memorandum of understanding and ensure compliance with statutory duty to collaborate by positive engagement with blue light and other partners. <br> • Ensure effective project management through procurement of professional services and | • Being developed. In service plan as work package for completion by Q3 2019/20. Progress is being made now fit for purpose project has been completed.  This work will need to align closely with revised IRMP to ensure operational alignment. <br> • Considered as business as usual now. All collaborative opportunities explored at outset of each project and engagement documented. Strategic opportunities explored at TV Collaboration Board work stream and Collaboration Estates Operational Group | 10 | 13 | ⬆ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| stations, then we can expect our expenditure to increase, our services to be less effective and our stations to further decline which would be significant in respect to our objective to ensure value for money and ensure fire stations are at the heart of communities | management through the programme board.<br>• Additional personnel added when required for resilience. Flexible staffing model to scale up when required.<br>• Annual update to Strategic Asset Investment Framework<br>• Develop partnerships and opportunities for potential income generation through joint venture and co-location opportunities<br>• Ensure sufficient flexibility in project plans to accommodate any extension to the statutory planning application process<br>• Ensure good and effective communication on all property capital projects<br>• Establish a ten year asset plan through the Strategic Asset Investment Framework.<br>• Establish clear processes for the development of each projects business case with gateway review at key stages | • Professional services team fully integrated into Property Capital Projects team to bring schemes forward through the planning process.  Highlight reports and project updates to Programme Board and Fire Authority.<br>• In-house team must remain scalable in order to deliver programme under SAIF; note delay in bringing new staff up to required project knowledge level.  Replacement PCPA appointed. Additional post proposed within paper to SLT July/Aug '19.<br>• Now business as usual and the review of the SAIF is programmed into the work programme.<br>• Completing procurement process to appoint consultant. Project team will be established to pursue suitable opportunities for income generation and value creation from property portfolio.  Project includes disposal of surplus assets linked to Theale.<br>• Forward Planner sets out entire programme of works across entire property portfolio to identify key milestones, ensure sufficient time is allocated to the planning process ahead of tenders and to avoid pinch points across the programme.<br>• Communication through SLT and Programme Board with updates to staff through Cascade, Lead member, Property Development Working Group and Management Committee.<br>• The plan will be reviewed on an annual basis in line with the medium term financial plan.<br>• Now business as usual.  All projects follow Treasury business case format.  Outline business cases presented at completion of Concept design with full business case at completion of design, planning and main contractor procurement.<br>• | | | |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| **Collaboration, partnership working & shared service (Risk: 410) Risk Owner: Assistant Chief Fire Officer** <br> **Inherent Risk Score: 22** | | | | | |
| If collaboration, partnership working and shared service opportunities are not considered, developed and embedded which may become increasingly likely with the complexity and volatility in the current political and financial landscape. Then we can expect impacts on the effectiveness of our service provision and on our financial position which would then affect the delivery of our legal duties and the Authority's strategic objectives | • Actively drive and engage with the Thames Valley strategic collaboration board. <br> • Continue to manage projects through programme office processes and report on updates. <br> • A number of events have created capacity issues such as the HMI inspections of services, the changes in senior team members and the FDO/RMS project, which has slowed progress. To inject impetus the project leads need to re-evaluate the resource needs <br> • There is likely to be a gap in dedicated programme support as the incumbent has secured a permanent role with RBFRS Capital projects team <br> • A key obstacle to effective collaboration has been identified as incompatible IT systems. Currently there is currently an over reliance on face to face meetings and issues with secure document sharing and version controls | • Governance arrangements now in place to lead and oversee collaborative projects. Development of collaboration document including terms of reference for sign off by constituent authorities by end of Aug 2018. <br> • Project challenge sessions taken place identifying areas for improvement. Improvements agreed by appropriate sponsors/project managers. Should result in improved progress visibility, appropriate resourcing/project support & clarity of project phasing <br> • Key collaboration roles now substantively filled. Should result in consistency & sufficient capacity to increase work stream delivery. Completed review of projects critical to strategic objectives with personnel now moved into key influencing posts. <br> • Agreement of an appropriate replacement needs to be secured and actioned ASAP. <br> • Exploration of a suitable IT system is underway to improve this which is aligned to the RBFRS IT Strategic Objectives. | 12 | 16 | ⬆ |
| **Firefighter Safety (Risk: 417) Risk Owner: Deputy Chief Fire Officer** <br> **Inherent Risk Score: 25** | | | | | |
| If we do not maintain the safety, health and wellbeing of our operational staff through | • Monitoring experience levels on RDS stations <br> • Operational assurance framework processes, ensuring firefighter risk | • Data refreshed Q4 18/19 - reviewed at SDMT 16 April. Actions agreed. <br> • Progress reported to SLT May 2019. AM Binyon reviewing policy (as per 12 month review) and will | 19 | 19 | ↔ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| 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. | management, are being monitored for effectiveness and changes implemented as necessary.<br>• Monitor operational competency<br>• Monitor operational refresher training.<br>• Alignment of RBFRS Operational Policy and Guidance with the National Operational Guidance (NOG)<br>• OPAS to provide quarterly reporting to SPB on all OA activity<br>• monitoring access necessary courses (BA1, BA2, ICS L1 etc.) to ensure operational staff have undertaken in support of operational competence and confidence<br>• Targeted work to ensure that all watches are complying with reading operational bulletins and H&S bulletins and that records are accurately maintained to confirm this has happened.<br>• New method for recording ops and H & S bulletins<br>• To monitor the number of development staff in RBFRS currently | be proposing improvement plan based on learning and identified gaps.<br>• Percentage of eligible staff in qualification monitored through SPB, SLT and A&G. Performance measured against core areas of the Fire Professional Framework. WP Group to consider impacts of org change on qualification requirements<br>• Oversight through SDMT monthly, SD managers' ongoing checks. Progress updated to SLT as part of OA review. Generally good compliance.<br>• Temp GM role in place to drive alignment activity and coordinate RBFRS approach. Personnel issues in NOG resolving, potential short term secondment to support NOG SM.<br>• Regular reporting to be commenced for quarterly SPB.<br>• Records maintained. Some gaps in L1 course completion - being addressed. L&D courses scheduled for 2019/20 year. Clear process from BA2 to BA1 in place to ensure devel. Issue with short term L1 CMs being checked to identify priorities<br>• Communication issued to all watch's for compliance with current process. Action plan in development to consider process and compliance. Station Audits to incorporate review of compliance. OPAS to review and update performance with Hub Mgt. teams.<br>• Created an easier to use recording system on Firewatch for Ops and H&S bulletins, and these has been sent to all the staff. This forms part of the overall OPAS review<br>• To work with workforce planning and L&D to monitor the number of staff in development and their progress towards competency. | | | |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| **ESMCP (Risk: 418) Risk Owner: Deputy Chief Fire Officer** <br> **Inherent Risk Score: 18** | | | | | |
| 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. | • Service level project board to oversee RBFRS delivery across national programme works teams and SC partners. <br> • Representation on SC Programme Board with funded programme support and appointed staff within each regional work stream group. <br> • Representation on National Fire Customer Group by DCFO for SC Region <br> • Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified. <br> • Preparation of systems (e.g. TVFCS ICCS) being completed with national programme funding already secured <br> • Regular reporting to Audit and Governance Committee to ensure transparency in service and national programme progress <br> • Detail resource requirements to ensure all work streams are successfully delivered <br> • RBFRS review of implications of National Programme move to an incremental approach to ESN delivery. To be completed with a 75% of assurance and fed back to | • Head of BIS internal sponsor. Appointed PM in place. RBFRS project Board in place. Board tasked with developing RBFRS options under new ESN. RBFRS/BFRS & OFRS mobilising to create joint detailed planning approach <br> • Current commitments remain sufficient. Monitoring commitment to work streams in context of incremental approach to ESN delivery and on-going uncertainty. <br> • Continue to attend FCG for updates and input to National Programme. Last attendance May 2019. On-going concerns raised re timelines and lack of detail that creates assumption based planning at local level. <br> • Contact maintained through SC Board. Police and SCAS leads know though some pull-back experienced in recent months. More a consequence of NP uncertainty. <br> • DNSP and ICCS upgrades are complete. Not yet known if incremental approach to delivery will create any further upgrade needs and consequently funding. <br> • Update given at last A&G. NP reps attended service and presented to FA members on 04 July. <br> • New Incremental approach being worked to (subject to FBC - delayed to autumn 2019). Work streams leads make progress where possible. Resistance building in work stream leads to meet requests of NP given on-going unknowns. <br> • Return on 06.06.18 on RBFRS approach - 25% assurance. NP sought further Returns made. | 14 | 14 | ⬌ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| | National Programme by September 2018. Interim positions of 25% and 50% in June and August. <br>• Development of delivery options and plan to support ESMCP take on by ESMCP indicative date of Dec 2022 <br>• Regular reporting to TVFCS Joint Committee to ensure alignment of approach and awareness of NP progress and risk | RBFRS developing options for delivery based on incremental delivery. Treatment closed <br>• Work in progress through project board but subject to FBC by national programme - further delayed to end of 2019. Output from joint planning session to feed into updated PID for programme board in September. <br>• Report presented to TVFCS Joint Committee 08 July 2019. Agreed that update wanted for every meeting. Committee agreed to write jointly to NP to register their concerns as to ESMCP NP progress and risks. | | | |
| **Operational Availability, Crewing and Capabilities (Risk: 419) Risk Owner: Deputy Chief Fire Officer** <br>**Inherent Risk Score: 21** ||||||
| 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 | • Focus on RDS recruitment, training, succession planning and retention <br>• RDS management and training support <br>• Watch management accountable for management of leave policy, maintaining an accurate crewing forecast and ensuring appropriate level of qualifications on watches <br>• Hub managers accountable for ensuring leave policy adhered to, watch levels are managed across | • Recruitment, HAGs and training proceeding as per existing plans and forecasts as expected. Monitored through RDSW working Group and Workforce planning. The success of recruitment is creating additional pressure and burden on training demand <br>• Ongoing and increased support from WDS hub stations. Review of assessor support underway with R&D. Pressures in L&D capacity noted and to be monitored to assess additional investment needs <br>• T&F established to review PAOT use (met 25.06.19) to id efficiency and effectiveness opportunities. Qualification levels being maintained well at station | 14 | 14 | ↔ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| commitments and stakeholder expectations. This could significantly impact community safety and organizational reputation. | stations and vacancies are managed.<br>• OPAS accountable for monitoring and reporting on crewing levels across the service (WDS, RDS and FDO).<br>• On-going proactive management of service delivery workforce planning needs through the Workforce Planning Group<br>• RDS Working Group and RDS User Group established post RDS project to maintain focus on recruitment, retention, training and succession to build and maintain sustainable RDS capability<br>• Completion of process mapping and improvement planning of systems and processes supporting availability, crewing and succession planning.<br>• R & R are drafting a new leave policy to reflect the changes to staffing levels across the Service. This should ensure that RBFRS do not go below minimum crewing | level. Performance issues to be addressed through SDMT.<br>• SD monitoring and managing at Hub level to drive compliance. Recent changes (RMS/FDO etc.) will create some localised leave impacts. Work now starting to look at 2020/21 leave policy post RMS/FDO. A meeting was held to discuss summer staffing levels.<br>• FW/Vision used for oversight of crewing. Will identify and raise concerns for SD Hub managers to address if not already in hand. Reporting through Workforce planning and Committees as needed.<br>• Long term forecasting in place and promotion/recruitment requirements planned forward and linking with developing OPAS work. Recruitment for 2019 agreed through SLT. Promotion process linked to RMS/FDO project. Competing pressures recognised.<br>• RDSWG meeting regularly. Primary issues currently around training and support to convert recruitment to fully qualified crew for appliances. SD managers working with L&D to progress<br>• Awaiting Libreea report for 'As is' work and need to commission Libreea 'To be' work. | | | |
| **Capacity, Capability and resilience (Risk: 422) Risk Owner: Director of Support Services** | | | | | |
| **Inherent Risk Score: 21** | | | | | |
| If RBFRS fail to increase the capability, capacity and resilience of our workforce which may become increasing likely as we lose knowledge | • Strengthen workforce planning information to cover all staff and regularly review as part of performance monitoring | • We are now reporting details for all staff but we are currently refining information for green book roles.<br>• Recruitment Policy is currently out for consultation Job Profile templates and behavioural training is being develop. | 18 | 18 | ↔ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| 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 | • Increase flexibility of recruitment policies to enable RBFRS to attract and retain the best staff<br>• Review reward and recognition arrangements for all staff<br>• In terms of resilience we have a number of grey book staff who have been in temporary positions for a considerable then of time and through the workforce planning group we need to determine a plan to substantiate position where possible<br>• Ensure sufficient capacity in officer specialism before, during and after implementation of phase 2 RMS/FDO<br>• Increase capacity for RDS training and development resource<br>• Review L&D Delivery Model | • a review of Reward and recognition has not yet started but scheduled to commence before the end of Q4 19/20<br>• There has been a reduction in the overall number of temporary positions across all grey book roles, but there are still a significant number. This will further reduce after the implementation of phase 2 of the RMS/FDO. This is regularly monitored.<br>• We have capacity issues with fire investigations (FI) and potentially NILO. Interim measures have been taken for FI but medium and long term solutions are still required and work is underway in this area and monitored at workforce planning.<br>• Further work needs be done to fully embed the recommendations of the RSU review into business as usual. This is currently being revisited by the workforce planning group and RDS working group<br>• New Treatment | | | |
| Management of Corporate Data, Information and Knowledge (Risk: 482) Risk Owner: Head of Business Information Systems<br>Inherent Risk Score: 17 ||||||
| If RBFRS fails to effectively manage the sharing, control and distribution of corporate data, information and knowledge, which is increasingly likely due to the increasing complexity of data flows into, out of and within the organisation, as well as | • Create a data classification framework to ensure that appropriate departments and individuals are sighted on the data classes their role(s) demand, and which defines the management and handling of specific record types.<br>• Create an Information Sharing policy to ensure that consistent handling of critical information is defined | • Draft framework accepted. Work has begun to draft the business case for necessary resourcing to progress. Update: Work restarted - business case due for SLT review in November<br>• Treatment Completed: Information Sharing Policy published<br>• Initial scope identified and tangible deliverables documented. Ongoing examination on lists in action Update: Work delayed due to HMICFRS and GDPR Audit preparation | 16 | 16 | ⬌ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| significant change in organisational structure and personnel, then we can expect mishandling and loss of critical information as well as reduced efficiency in getting the right information to the right individuals for the right action to be taken, which is significant in respect to achieving all of our strategic objectives | • Review and update email distribution lists to reduce unnecessary exposure to information<br>• Create a document management policy to clarify the lifecycle management of information types and permissible modes of storage/transmission<br>• Establish a set of procedures, methodologies and measures to provide assurance of ongoing compliance to information management policy. | • Treatment completed: Interim Document Management policy published<br>• Will be incorporated into revised business case for presentation and approval in November | | | |
| **Volatility of funding (Risk: 506) Risk Owner:  Chief Fire Officer Inherent Risk Score:  24** | | | | | |
| If RBFRS fails to receive sufficient funding, which is becoming more likely given the level of national debt, the Government's fiscal policy, increasing volatility in local funding and increasing budget pressures, we can expect to face further reductions in service delivery and a loss of public trust, which | • Political engagement with Central Government to ensure new burdens are matched with new funding<br>• Political engagement with Government to remove precept cap and referendum requirements which will allow additional flexibility in local funding<br>• Engagement with Central Government, through Political lobbying, Fire Finance Network and | • Responded to Central Government on 2019/20 Local Finance Technical Consultation. Engagement with Berkshire MPs has been encouraging and engagement continues.<br>• Responded to Central Government on 2019/20 Local Finance Technical Consultation.   Chairman wrote to local MPs on Comprehensive Spending Review and Fire funding 2020/21 on 27 August 2019.<br>• Will input into consultations via NFCC if generic or through the Chairman if specific to Berkshire. | 18 | 22 | ↑ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| will severely impact on our ability to deliver our statutory duties and strategic objectives. | NFCC, on new Fire Funding proposals<br>• Engagement with fire minister and Home Office Officials to explain and clarify RBFRS pressures and risk/demand methodology.<br>• Write to all Berkshire MPs to gain support for our return to Government for the Local Finance Technical Consultation<br>• Respond to the one year settlement that will be announced on 4/9/19 | Chairman wrote to local MPs on Comprehensive Spending Review and Fire funding 2020/21 on 27 August 2019.<br>• Meeting with Jonny Bugg on 3 July to explain funding shortfalls and unavoidable cost pressures<br>• Chairman has written to all local MPs to canvas support for flexibility in precept funding. Chairman wrote to local MPs on Comprehensive Spending Review and Fire funding 2020/21 on 27 August 2019.<br>• | | | |
| **Management of Resources (Risk: 507) Risk Owner: Assistant Chief Fire Officer** <br> **Inherent Risk Score: 24** | | | | | |
| If we fail to manage resources tightly which is more likely in the short term given that the organisation has undergone substantial restructuring then we can expect that resource utilisation will be sub-optimal which will negatively impact on our ability to deliver an efficient and effective service to the public. | • Robust internal budget monitoring and management processes<br>• Initiate budget setting process for 2020/21 in September<br>• Agility in internal planning processes to ensure delivery plans are matched to Medium Term Financial Plan<br>• Effective and flexible Treasury and Reserves management<br>• Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified. | • 2018/19 outturn presented to management committee July 2019. Qtr1 19/20 to be presented at next meeting<br>• Budget setting timetable presented to SLT Aug 2019 with detailed work commencing September 2019. Savings template issued in Aug 2019<br>• Planning for IRMP projects delivery is in place. Regular forecasting in place to ensure resources being effectively utilised and to identify and address variances at an early stage (this includes new WBSM's).<br>• 15 year capital strategy presented to Fire Authority in February 2019. Annual refresh work to commence in September 2019<br>• On-going treatment. Work with Police, regional FRS's and SCAS through range of forums (ESMCP, SEORRG, LRF, BRG TV Collaboration and Partnership etc.).<br>• | 13 | 18 | 🔼 |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| **Property Capital Projects - Theale (Risk: 516) Risk Owner:  Head of Property Capital Projects and Estates** <br> **Inherent Risk Score:  22** | | | | | |
| If the site remediation works are more extensive than surveys indicate, which is possible on this site, then we could see an increase in the costs to carry out the remediation works. | • Site remediation is part of a separate tender to the main build contract.  Contractor will be nominated by RBFRS and will be a sub-contractor to the main contractor.  Site will be remediated in line with requirements for build contract and planning. <br> • Negotiation with site owners to ensure they are fully informed of state of remediation and impact on purchase negotiations. <br> • Close engagement with nominated remediation contractor will identify any additional risk factors that may impact on cost of remediation. | • Specialist contractor nominated and now forms part of main contractor tender process.  Main contractor tender will complete in December, at which point, both contractors will move forwards with this project together in full alignment. <br> • Network Rail have appointed in-house team to review remediation proposal, 4 week time period to complete review. Includes costs for remediation package, site clearance and servicing. Progressing legal agreement. <br> • All risks are being identified to ensure that they can be removed or mitigated to avoid any financial impact.  Any impact is now expected to be time based, not financial, therefore contingency will be built into project programme. | 22 | 18 | ⬇ |
| **Capacity to respond to Subject Access Requests (Risk: 556) Risk Owner: Head of Business Information Systems** <br> **Inherent Risk Score: 18** | | | | | |
| If we receive a significant volume of Subject Access Requests, which is increasingly likely due to recent introduction of new rights under GDPR/the data protection act 2018, we may be unable to respond within legislative timescales due to the | • Increase Capacity of Information Governance team to process and manage Subject Access Requests <br> • Investigation of tools and processes to reduce overall information search effort | • Update: Potential to fill IG Assistant role internally being investigated alongside restructure.  IGA role extended to 2020. <br> • Discussions with IG team and ICT team regarding process improvement options in progress.  Update: Engagement with procurement underway following SLT approval to proceed. | 18 | 15 | ⬇ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| complexity of subject data searches within RBFRS. | | | | | |

**Employer Pension Contribution Increases (Risk: 559) Risk Owner: Assistant Chief Fire Officer**
**Inherent Risk Score: 24**

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| If RBFRS fails to receive sufficient government funding to pay for increases in the employer contribution rates of firefighter pension schemes, which is likely given the squeeze on public finances, we can expect to face further reductions in service delivery and a loss of public trust, which will severely impact on our ability to deliver our statutory duties and strategic objectives. | • Political engagement with Central Government to ensure new pension burdens are matched with new funding<br>• Political engagement with Government to remove precept cap and referendum requirements which will allow additional flexibility in local funding to meet pension burdens<br>• Engagement with Central Government, through Political lobbying, Fire Finance Network and NFCC, on new Fire Funding proposals to take account of pension burdens<br>• Write to all Berkshire MPs to explain pension pressure | • Highlighted issue via response to consultation on Fire Funding Formula<br>• Met with Jonny Bugg, Deputy Director responsible for the Fire Strategy and Reform Unit at the Home Office on 3 July. Further engagement one the one year settlement is announced.<br>• NFCC has written to the Chief Secretary to the Treasury to lobby for additional funding to cover the pension increases<br>• Will liaise with the Chairman following the announcement of the one year settlement | 24 | 24 | ↔ |

**No deal EU exit (Risk: 561) Risk Owner: Deputy Chief Fire Officer**
**Inherent Risk Score: 21**

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| If a 'no deal' EU exit happens, which is becoming more likely given the political uncertainty surrounding the governments proposed deal the we can expect potential disruption to goods, services and finance and | • Produce action plan to address mitigation/treatments for sign off at SLT<br>• Escalate significant risks through LRF EU response structure<br>• Incorporate Potential EU exit outcomes in BCM testing and exercising plan for 19/20 | • Threat of a 'No deal' exit from the EU is high. SCG and TCG groups set up. Meeting booked for relevant HoS and a request sent for their EU risks to be updated. Risk treatments to be updated post this meeting.<br>• LRF EU exit group have updated the risk assessment based on the latest iteration of a 'no deal' EU exit national planning assumptions. Telecons now booked in on the run up and post | 18 | 17 | ↓ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| personnel which is significant in managing and delivery our core services | • Establish and Maintain NFCC reporting in line with NFCC update report of 31 July 2019 <br> • Review and assure that identified actions in NFCC report of 31 July 2019 have been considered and effective arrangements in place | 31/10 with TVLRF. PB to continue to attend TVLRF EU exit meetings. <br> • To be confirmed. This will be informed by the LRF EU exit planning meeting, current situation is still the same. However the election of a new prime minister may alter this and this is being constantly reviewed by the LRF. <br> • Daily teleconferences with the TVIOWLRF are now booked into Paul Binyon diary. Duty Officers have been informed/reminded of reporting responsibilities to NFCC. <br> • Work previously undertaken believed to have addressed identified actions however, a review will be carried out to reconfirm and increase treatment assurance | | | |
| **Firefighter Pensions (Risk: 563) Risk Owner: Head of HR and L&D** <br> **Inherent Risk Score: 21** | | | | | |
| If we do not comply with the various pension regulations and keep up to date with pension arrangements; which is becoming increasingly likely given the complexity, frequency of changes and limited | • Pension Audit -Audit activity by the Pension Administrators and RSM to ensure application of regulations and accurate records exist <br> • Pension Board (PB)- PB to ensure the Employer is responding to legislative changes and requirements e.g. various surveys | • Audit undertaken - substantial assurance received - one low action identified in relation to succession plans for WYPF - completed. New 2019/20 audit scope being defined. <br> • PB reviewed comms.  Bulletins examined and checks to ensure both the employer and Administrator complete activities to deadlines - reg reviews. Case outcomes to have impacts TBC and additional treatment added. | 18 | 18 | ⬌ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| pensions expertise and capacity within the HR department, then we can expect to be in breach of the regulations, subject to scrutiny from The Pensions Regulator, potential enforcement and penalty notices and adversely impact employees and pensioners, which are significant in respect to our financial security, employer duties and our reputation. | • Technical Expertise - Engage in Pensions forums and workshops to access up to date information and share learning<br>• Scrutiny - Provide six monthly performance reports to Audit and Governance Committee from PB<br>• Administrator - Ensure Pension Administrator provides regular monitoring reports indicating performance against SLAs and legislative changes and other administration requirements<br>• HR team - Regular review of bulletins and communications to ensure action is directed to the correct place and timelines can be met. Regular engagement with Finance department.<br>• Finance Team - Monthly reconciliation of Pension Account<br>• Gather intelligence from all sources to ensure application of tax charges (LTA) are applied appropriately to support retirees<br>• Review position on split pensions following FPS bulletin 18<br>• Case law impacts individuals tapered out of 1992 scheme and application of modified scheme - FRSs awaiting guidance on how to manage - Resources to address to be identified<br>• | • Engage in regional meetings & via WYPF. Finance & HR reps attend LGA conferences. Data conference 3/4/19. Tech updates via WYPF & bulletins. Further LGA training for PB and others. Latest meeting 26/7/19<br>• Six monthly reports now provided to A&G - last March 2019. No change to Employer reps no need to go to FA June 2019<br>• Monthly reports provided and updates on specific actions arising from Pension Bulletins confirmed and shared with Pension Board for scrutiny. - Completed and ongoing<br>• Review of bulletins issued each month - actions and progress recorded on HR pension's action plan. Await guidance following outcomes of cases - modified/1992.<br>• Monthly reconciliations completed by Accounting Manager, any discrepancies raised with HR, payroll provider and made known to WYPF as necessary<br>• COMPLETE - Sought confirmation from WYPF and others provide opportunities for affected individuals to receive 1 to 1<br>• WYPF confirmed applying rules correctly. Review of historic records underway to identify whether any affected individuals. WYPF to factor in additional work to check impacts and understand impact on individuals<br>• NEW TREATMENT - consider additional resources (HR/WYPF) req'd to support administration of pension changes which are not currently clear. Expertise from within FRS expected to manage | | | |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| **Asset Management (Risk: 565) Risk Owner: Deputy Chief Fire Officer** <br> **Inherent Risk Score: 21** | | | | | |
| RBFRS needs clear visibility of assets and equipment through records, maintenance regimes and management systems to ensure effective use, efficiency and safety throughout their lifecycle. Failure to do this could led to assets and equipment that are not fit for purpose remaining in service, higher than necessary costs and a potential increase in the likelihood of equipment failure. | • We are maintaining existing mechanisms for recording assets and equipment to support maintenance regimes. <br> • Established maintenance schedules for vehicles and equipment and PPM for Buildings. <br> • Roles in place for operational management and improvement of assets and equipment (vehicles, equipment and buildings). <br> • A full review of working processes is underway. Libreea have facilitated the first few stakeholder meetings. Outcomes to be analysed in coming months and business case developed <br> • Consideration of existing and potential alternative management systems and tools to underpin and improve any renewed ways of working, policies and practices. <br> • Ensure any asset management process improvement or system developments align with finance asset register to ensure it is maintained accurately and in a timely manner <br> • All new property builds will have asset marking built into the requirements specification ahead of tender | • Tranman in place for vehicles; Firewatch in place for equipment requiring on-going maintenance or managed lifecycle; Kier maintain records of electrical and mechanical building assets for service and maintenance. Facilities processes to be reviewed. <br> • Fleet and equipment being managed to planned schedules. Statutory compliance near 100% for buildings. Compliance reported on a monthly basis. Reporting procedures to be reviewed as part of facilities transition to different contractors. <br> • Fleet manager and Team ensuring compliance with servicing schedules; REO, Supplies and Assets mgr and equip. techs ensuring Ops. Equip. recorded, managed and serviced. Facilities Mgr. & team managing facilities and overseeing compliance. <br> • A full review of working processes is underway. Libreea have facilitated the first few stakeholder meetings. Outcomes to be analysed in coming months and business case developed <br> • No new systems will be considered until further work has been completed on improving ways of working and processes for management of assets. Future direction yet to be decided. Awaiting outcomes from Libreea work and subsequent business case. <br> • Finance are now an active stakeholder in improvement process work. Considering the functionality of P2P system and how that may link into asset and or inventory/stock management. <br> • Once established, HoCPE will include within new build/ refurb build specs. | 18 | 18 | ⬌ |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| **High Rise Evacuation Management (Risk: 570) Risk Owner: Deputy Chief Fire Officer**<br>**Inherent Risk Score: 18** | | | | | |
| If we do not provide clear guidance and training to effectively manage high rise evacuation strategies and tactics, which is likely to attract increased scrutiny following the Grenfell incident, then we can expect potential loss of life or injury to occupants which is significant in respect of managing community risk and our public reputation | • Provide training to TVFCS staff and officer lines on learning outcomes from Grenfell<br>• Provision of assurance through testing and exercising<br>• Set up a task and finish group to look at Policy, procedures, tactics and equipment required. | • Training delivered to 3 TVFCS watches, Officer line training to commence 16 march. One more catch up session for TVFCS. 3 officer lines completed<br>• A high rise operational exercise is being planned by Central Hub in conjunction with Richie Hamilton / Tim Rickard to test policies and procedures<br>• Paul Binyon to discuss availability of staff with Policy and Collaboration to free time up to support a Task and Finish group. Once populated the group will be established and T.O.R. agreed. Agreement from ACO to utilise SM Rickard T&F now set up | New risk | 18 | n/a |
| **Facilities Contractors (Risk: 575) Risk Owner: Deputy Chief Fire Officer**<br>**Inherent Risk Score: 23** | | | | | |
| If our main facilities contractor cannot provide maintenance and repair services to our estate, which is increasingly likely given the wider industry landscape involving similar service providers then we can | • Conducting regular company credit checks.<br>• Monthly contract meeting in place to discuss overall performance and company landscape.<br>• Establish alternative ways to provide the services required.<br>• Facilities team to take more of an active role in future contract | • Last check conducted on 06 August still shows a credit score resulting in above average risk. Checks to be conducted monthly. Treatment CLOSED as per SLT on 20/08/19<br>• Termination notice served by Kier on 18/07. Confirmed end of contract 29/11. Regular demobilisation meetings to be scheduled in with Kier from now until end of contract. | New risk | 21 | n/a |

| Risk | Key Controls and Mitigations | Risk Movement | Q3 risk score | Current Risk Score | Direction of travel |
|---|---|---|---|---|---|
| expect that our statutory compliance, preventative maintenance schedules and defect repair capability will be severely affected. This impact could affect our ability to respond effectively from our stations and have adverse effects on our financial position by having to source alternative service providers. | management of certain suppliers across multiple disciplines | • Procurement/facilities are currently identifying the required contracts needed and possible routes to market. Ridge have been instructed to assist and support process with technical and contractual expertise.<br>• Weekly team meetings to in place to discuss current and future workloads. Plan to distribute management of contracts across the team once new ways of working are established. | | | |

## Risks Closed During Q1

| Failure in delivery of ESMCP National Programme (Risk: 425) Risk Owner:  Deputy Chief Fire Officer<br>Inherent Risk Score:  22 | |
|---|---|
| If the ESMCP National Programme fails to deliver a new Emergency Services Network (ESN) or key component parts of ESN that properly enable FRS mobile communications, then the service risks not having robust mobilisation and communications systems to support operational crews and officers or insufficient time to implement its own replacement systems. This would directly impact delivery of services and consequentially public confidence and reputation. | Reason Risk Closed: Risk reviewed – no longer a high level risk. |
| **Fire Service College (Capita) (Risk: 479) Risk Owner:  Head of HR and L&D**<br>**Inherent Risk Score:  13** | |
| If the Fire Service College fails to deliver its services, which may become more likely given the financial health of the parent company (Capita PLC), then we can expect to see a cessation or reduction in the availability of training courses for new firefighters and existing staff (covering a range of areas), which will be significant in relation to our need to develop and maintain a safe and competent workforce. | Reason Risk Closed: No longer a Corporate risk – managed by Head of Service |
| **Ongoing viability of Capita Communications and Control Solutions (Risk: 480) Risk Owner:  Head of Business Information Systems**<br>**Inherent Risk Score:  20** | |
| If Capita Communications and Control Solutions ceases trading, is sold or divested, or stops providing services to RFBRS, which is an increased possibility given Capita Systems recent profit warning, then we can expect software and hardware support for the Vision Mobilisation and control systems to be disrupted, degraded, or cease altogether, which is significant in respect of our Service delivery response, and Collaboration objective. | Reason Risk Closed: No longer a Corporate risk – managed by Head of Service |
| **Impact of GDPR Non-compliance (Risk: 481) Risk Owner:  Head of Business Information Systems**<br>**Inherent Risk Score:  18** | |
| If we do not manage the service's compliance to GDPR requirements, which is increasingly likely due to impending legislative enforcement, then we can expect increased likelihood of negative reputational impact and significant financial penalties in the event of a personal data breach. | Reason Risk Closed: No longer a Corporate risk – managed by Head of Service |
| **Data reliability, validity and analysis (Risk: 483) Risk Owner:  Director of Support Services**<br>**Inherent Risk Score:  21** | |
| If we fail to maintain reliable systems and accurate data that supports effective and timely analysis and continuing improvement of knowledge about our activities and their impacts, then we will not be able to make informed, evidence based decisions, manage and improve performance of services, report effectively on this performance to the Fire Authority and the public and respond to audit needs - such as HMICFRS. This would substantially undermine our financial and resource efficiency, operational effectiveness and our political and public reputation. | Reason Risk Closed: Risk reviewed and new service level risk created |

| **Response to Home Office Reform Programme (Risk: 484) Risk Owner: Director of Support Services**<br>**Inherent Risk Score: 21** | |
|---|---|
| If RBFRS fails to meet the expectations of the Home Office Fire Reform Programme and fails to deliver against the revised national framework as monitored by the HMICFRS Inspection Programme, which may become increasingly likely given absence of clarity on the details of the inspection programme, then we can expect to receive a lower than desired inspection assessment, reputational damage and loss of public confidence which will be significant in our ability to meet our strategic objectives. | Reason Risk Closed: Risk reviewed and new service level risk created |

## Accident Investigations

| Measure | | Q1 Actual | Q2 Actual | Q3 Actual | Q4 Actual | 2019/20 YTD | 2018/19 YTD |
|---|---|---|---|---|---|---|---|
| Accidents Requiring Investigation | Minor | 4 | | | | 4 | 12 |
| | Moderate | 5 | | | | 5 | 6 |
| | Major | 0 | | | | 0 | 0 |
| Near Misses Requiring Investigation | Minor | 2 | | | | 2 | 5 |
| | Moderate | 5 | | | | 5 | 4 |
| | Major | 1 | | | | 1 | 0 |
| *Accident Investigations Outstanding | Minor | 0 | | | | 0 | |
| | Moderate | 0 | | | | 0 | |
| | Major | 0 | | | | 0 | |
| *Near Miss Investigations Outstanding | Minor | 0 | | | | 0 | |
| | Moderate | 0 | | | | 0 | |
| | Major | 0 | | | | 0 | |

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

**Minor -** an accident which causes only a slight injury, with little pain or discomfort, and not requiring medical attention other than first aid, with no potential to have been more severe, or a near miss event with the potential to cause slight injury. The local workplace manager investigates these events.
**Moderate -** an accident which causes an injury requiring medical treatment immediately (not including first aid) or at a later date (for example physiotherapy), and/or an accident that is likely to lead to more than three days' absence from work or normal duties (i.e. restricted duties) but is not a specified injury as defined under RIDDOR, or a near miss event, including Dangerous Occurrences as defined under RIDDOR, which had the potential to have caused such injuries. These investigations are carried out by someone who is trained in analytical accident investigation, known as an Accident Investigation Officer (AIO).
**Major -** an accident that causes a death or a specified injury as defined under; or a near miss event, including Dangerous Occurrences as defined under RIDDOR, which had the potential to have caused such injuries. Major events are investigated by a team of AIO's, co-ordinated and led by an Area Manager.
**Near miss** definition: An unplanned event including damage to equipment and property that had the potential to cause death, injury or ill health.
Accident categories may be re-categorised at any point before or during the investigation, which can retrospectively affect the numbers.

# Audit Recommendations

The audits shown have been undertaken and recommendations agreed. The information provides a progress on those open recommendations as of 25/07/2019.

| Ref: | Audit title | Audit Action | Date by | Revised Completion Date | Priority | Progress | Status | Open / Closed | Date of Audit | Allocated to |
|------|-------------|--------------|---------|-------------------------|----------|----------|--------|---------------|---------------|--------------|
| 156 | **Procurement Advisory Review** | Recommends RBFRS considers investing in contract management software which may serve as a repository of documents alongside providing other information such as key trigger dates within contracts. | 31/12/2018 | 31/03/2020 | n/a | UPDATE July 19: The Authority is currently planning to purchase an additional Sage module that will encompass this information and link this to the scanned copies of live contracts on the S drive. Current processes have been reviewed and a specification which incorporates a requirement for contract management software will be issued to the market in quarter 2 2019/20. | AMBER | **Open** | 07/12/2017 | Procurement Manager |

**Audit Recommendations Closed during Q1**

| Ref: | Audit Title | Audit Action | Date by: | Revised Completion | Priority | Progress | Date of Audit Report | Allocated to: |
|------|-------------|--------------|----------|--------------------|----------|----------|----------------------|---------------|
| 195 | **Recruitment** | The recruitment Policy will be updated to include timeframes on the Green book recruitment process. | 30-Apr-19 | TBC | | To be published July 19 | 26-Feb-19 | HR Manager |
| 196 | **Recruitment** | The authority will ensure all means of recruitment will be referenced centrally in the Recruitment Policy and Procedural document. This will include links to operational and non-operational recruitment processes. | 30-Apr-19 | TBC | | To be published July 19 | 26-Feb-19 | HR Manager |

**APPENDICES**

# Appendix A: Update on Progress of ICT Strategy

**Tony Vincent, Head of Business and Information Systems**
This ICT strategy is intended to design and embed a reliable, resilient ICT support service that will technically enable the implementation and ongoing delivery of the Strategic Commitments and Vision 2019. This is a high-level update for items agreed as part of the action plan and reflects the period April to June 2019. The current strategy will be replaced in Q2 with a new five year ICT strategy and action plan after appropriate approvals and consultation have been completed.

| Task | Progress | RAG |
|---|---|---|
| ICT information governance framework established and approved by IRMP | All information governance framework primary policies have now been created, reviewed, consulted on and published. This Activity is therefore complete. | 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. Both outstanding audit action items have been completed. An IT health check and Cyber Essentials Plus certification activity is arranged for Q3 2019/2020 | G |
| ICT infrastructure is fit for purpose and supports a reliable, robust IT environment | Issues identified through robust problem management discipline with allocated server disk space have led to a comprehensive review and procurement of additional space for both our primary and disaster recovery sites. | G |
| Software and Hardware Asset management plans established | RBFRS now has 100% visibility of all software and hardware assets, their lifecycle position, refresh dates, and licensing compliance. Automated processes for notification, identification and resolution of software licensing problems are developed and being methodically applied across the estate. The first tranche of standard Laptop replacements have been ordered for deployment in Q1 2019/20, and a standard laptop specification has been agreed, leading to a 33% reduction in cost per client going forward, no reduction in user experience, and reduced support duplication effort. We have moved from a position of no visibility of what we had, or any meaningful way to manage it, to a comprehensive understanding of the hardware and software estate, and the means to use this information to provide efficiencies and improvements to the service. | G |
| Cross training and up skilling of the ICT team | A set of budget bids have been created to alleviate resourcing pinch points in the organisation and to reduce overall reliance of fixed term or temporary contract positions further. Ongoing specialist training is identified in individuals training plans and fed into the overall training requirements for the organisation. | G |
| ICT Service SLA and Service catalogue created | The new look and feel for vFire has been created and consulted on with key non-HQ staff groups. The rollout has been completed with positive feedback. | G |
| ICT work plan of BAU activities and prioritised development implemented | Annual work plan agreed and currently on schedule. The 2019/20 service plan has been compiled, published and updated for Q1. | G |

| Task | Progress | RAG |
|------|----------|-----|
| Applications portfolio (a list of all our systems) will be realigned to remove unnecessary applications | The license management capability is fully up and running and is now being used to ensure licensing compliance against actual use. Unused software will begin to be automatically removed (with notifications and opportunities to confirm need) from end user systems following the compliance check being completed. A target of 75% overall reduction in the number of installed applications has been set in the next generation of the ICT strategy, which is due for publication in 2019. | G |
| Flexible working framework is developed to support new ways of working as part of the OD programme | Support for flexible working has been included as a key activity within the next generation of ICT strategy, which is due for publication in 2019. | G |
| ITIL best practice standards in place embedded across whole of ICT | Robust application of ITIL principles, in particular within the problem and change management disciplines, continues to provide additional stability and capability to react to issues.  Recent examples include the decision to implement a change freeze prior to Christmas and the HMICFRS inspection, which resulted in the second year without major ICT Incident in a row, and the decision to implement additional storage capability at Whitley Wood BEFORE HQ in order to resolve space issues more expeditiously without violating the aforementioned change freeze. | G |
| Timelines for retendering, aligned to joint and shared tender opportunities | Automated notifications of impending contractual renewals, and reports that provide forward planning capability are now in place.  There was recent agreement within the NFCC ICT manager's group to share ICT strategies in an attempt to surface joint procurement opportunities further ahead than is currently possible. | G |
| A corporate content management solution is in place | RBFRS continues to work with Ideagen to resolve ongoing issues at all levels within the content management system, the underlying platforms, and the support and escalation arrangements that are currently in place.  We have requested the instigation of quarterly service review meetings, more transparency regarding support arrangements, additional support from a release management perspective, and named contacts within Ideagen at each level of escalation.  Our intention is to attempt to build a meaningful partnership with Ideagen rather than operate as a "nuisance" customer.  The only realistic option should this fail is retendering for some or all elements of the current contract for Intranet, external website and content management systems.  Given the current renewal date, it is likely that if we are forced to pursue this avenue, we will need to extend our current contact temporarily for at least a year to allow proper preparation and migration to any new partner.  In the meantime, the team are managing around system deficiencies, largely by manual intervention. | A |

# Appendix B: Update on Progress of Fleet

**Andrew McLenahan, Head of Facilities, Fleet and Equipment.** The 2019-2023 Fleet and Equipment Strategy is intended to set out the intent to continuously improve the Fleet and Equipment Department, which will result in assisting the implementation and ongoing delivery of the Strategic Commitments. This is a high-level update for items agreed as part of the action plan and reflects the period April to June 2019.

| Task | Progress | RAG |
|---|---|---|
| Fleet and Engineering Management structure designed to meet future needs<br>Fleet Strategy and principles agreed and Partnership with HFRS implemented | The Joint Working Agreement with our partner Hampshire FRS to maintain our red fleet vehicles is established and working well.<br>The Vehicle Fleet & Equipment Strategy for 2019-2023 has driven our service plans for the coming year. This strategy forms a basis from which to build upon the progressive work already undertaken to ensure RBFRS have a modern, efficient and fit for purpose fleet. | G |
| Agree 4 year Main Pumping Appliance renewal plan - Commence Procurement exercise with TVFRS's | Two new Volvo pumping appliances have enter the service and operator training is now underway to have the vehicles operational within the coming weeks.<br>Work has started on our procurement approach for appliance provision for 2021 onwards. We will continue with the principle of doing this in collaboration with our partners in Oxfordshire and Buckinghamshire Fire and Rescue Services. | G |
| Review Equipment notes and technical information and create appropriate reference database | The delivery of equipment notes in the new tri service format is continuing. The work is continuing on a priority basis focused on the Thames Valley Appliance, with older notes converted as part of the review process. Other technical documentation (presentations, reports etc.) are now being prepared in a tri service format and shared across the Thames Valley | G |
| Fleet Investment plan is created to align to medium term financial plan - Fleet and Equipment Asset Management plans established | The recently revised Strategic Asset Investment Framework (SAIF) and the new Vehicle Fleet & Equipment Strategy, identify a path of continuous improvement for the coming years in relation to fleet and equipment.<br>The financial plans and fleet strategy show the planned programme of replacement of fleet and equipment assets. Further detailed work around our white fleet utilisation will be on-going with a view to look for more efficiencies in this area.<br>Work to establish an agreed asset management process is continuing. The team are exploring opportunities for further collaboration with other FRS' in regards to any potential procurement that may be identified during the course of this process. As part of recent work, visits have been made to other FRS' to understand and view live systems and processes which have been already established to gain an overall view of possible options that would best suit RBFRS. | G |
| Agree replacement programme for Special Appliances | As per the newly revised SAIF and the new Vehicle Fleet and Equipment Strategy, the programme to replace Special Appliances is underway. This is starting with reviewing the Operational Support Unit (OSU), Hazardous and Environmental Response Unit (HERU) and 4x4 appliance at Maidenhead. Once the review of requirements is complete we will be in a | G |

| Task | Progress | RAG |
|------|----------|-----|
| | position to put forward recommended types of vehicles to replace our existing vehicles to contribute to providing a more modern and efficient fleet that effectively deal with our risks. | 92 |
| Determine multi-use vehicles requirements, available to provide off road access, flexible and effective back-up vehicles | As part of the above, a clearer picture of our options around 4x4 capability and multi-use vehicles should develop. This also is linked to the impending white fleet review and will help identify and shape our future white fleet vehicles in order to maximise fleet utilisation and efficiency. | G |

# Appendix C: Information Governance Report

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

| Information Requests… | April 19 | May 19 | June 19 | Total | Q1 2018/19 Total |
|---|---|---|---|---|---|
| New Information Requests Received | 13 | 13 | 11 | **37** | **43** |
| Total Information Requests Actioned | 19 | 23 | 21 | **62** | **71** |
| IGT - Hours Spent on Information Requests | 27 ½ | 35 | 37 | **98 ½** | **98 ¾** |
| Others - Hours Spent on Information Requests | 36 | 28 ½ | 38 ½ | **103** | **44 ¾** |
| Timeframes not met (figures relate to request due date) | 2 | 4 | 1 | **7** | **4** |
| Internal Reviews (figures relate to request due date) | 1 | 0 | 0 | **1** | **0** |

**Incident Reports**

| Incident Reports… | April 19 | May 19 | June 19 | Total | Q1 2018/19 Total |
|---|---|---|---|---|---|
| New IRS/FI requests received this month | 16 | 22 | 17 | **55** | **51** |
| IRS/FI requests confirmed *(includes not charged for)* | 4 | 5 | 8 | **17** | **16** |
| Total IRS/FI requests actioned *(incl. still in progress)* | 21 | 28 | 24 | **73** | **66** |
| Income from requests Figure in brackets - total ££ so far this year | £105.00 (£105.00) | £105.00 (£210.00) | £420.00 (£630.00) | **£630.00** | **£918.00** |

Incident Recording System (IRS) Reports are charged at £105.00 (2019/20). (£102.00 in 2018/19)
Fire Investigation (FI) Reports (where produced) are charged at £364.00+VAT (2019/20).  (£354.00+VAT in 2018/19)
Report costs are waived for TVP, local authorities, and other public sector agencies.

# Appendix D: Quadrant One: Service Provision Measures Definitions

| CM | Measure | Definition |
|---|---|---|
| 1 | Number of fire deaths in accidental dwelling fires | The total number of deaths that occur as a result of an accidental dwelling fire. This includes a person whose death is attributed to an accidental dwelling fire, even when the death occurs weeks or months later. |
| 2 | Number of fire casualties in accidental dwelling fires | The total number of casualties that occur as a result of an accidental dwelling fire. This includes a person or persons whose injuries may be slight or serious and require hospital treatment and which are attributed to the accidental dwelling fire. |
| 3 | % of safeguarding referrals made to local authorities within 24hours | To ensure that safeguarding referrals are made in a timely manner for the protection of individuals. This is the time taken from the Duty Officer or Safeguarding Coordinator being made aware of a safeguarding case, to the referral being made to the local authority. |
| 4 | The number of deliberate primary fires | This is the total number of primary fires, where the cause has been identified that the fire was started deliberately. |
| 5 | The number of deliberate secondary fires | This is the total number of secondary fires, where the cause has been identified that the fire was started deliberately. |
| **Prevention** | | |
| 6 | Number of Safe and Well visits (S&W's) delivered to those who are at heightened risk of dying in the event of an accidental dwelling fire | Research has shown that certain vulnerable groups are at heightened risk of dying in an accidental dwelling fire.  S&W's will be targeted towards these vulnerable groups. |
| 7 | Number of S&W's delivered to those who are at heightened risk of having an accidental dwelling fire and being injured as a result | Research has shown that certain groups of people are at heightened risk of having an accidental dwelling fire and being injured as a result.  S&Ws will be targeted towards these groups. |
| 8 | % of home safety referrals, where there has been a threat or incidence of arson, completed within 48 hours | When RBFRS are made aware of the threat or incidence of arson against an individual(s) a home safety visit is conducted within 48-hours. |

| CM | Measure | Definition |
|---|---|---|
| 9 | % of priority home safety referrals, where there is a significant heightened risk of an individual dying in the event of an accidental dwelling fire, completed within 48 hours. | When RBFRS are made aware of a home or an individual who is at significantly high risk of dying in the event of an accidental dwelling fire, a home safety visit is conducted within 48-hours. |
| **Protection** | | |
| 10 | Total Number of Full Fire Safety Audits carried out | This is the total number of full fire safety audits carried out in premises in Berkshire. This is calculated once the service has been closed by RBFRS and only includes the initial full fire safety audit. A Fire Safety Audit is carried out to enforce the Regulatory Reform Order (RRO) 2005, which applies to virtually all non-domestic premises and covers nearly every type of building, structure and open space. |
| 11 | % of audits where the results were satisfactory | This is the number of closed fire safety audits carried out in commercial premises, where the result was satisfactory and no further action or follow-up was required. |
| 12 | The number of formal and informal fire safety activities | This is the total number of formal or informal fire safety activities that have been issued a:<br>• Action plan<br>• Deficiency Notices<br>• Enforcement Notice<br>• Prohibition Notice<br>• Alternations Notice<br>• Voluntary Restriction<br>• Formal Caution<br>• Prosecution Notice |
| 13 | Success rate when cases go to court | This is the ratio of successful prosecutions following fire safety audits. |
| 14 | % of statutory fire safety consultations completed within the required timeframes | *Statutory fire consultations have a set timeframe in which they must be completed and include:*<br>• *Licensing*<br>• *Building regulations*<br>• *Building regulations approved supplier*<br>• *Marriage Act* |

| CM | Measure | Definition |
|---|---|---|
| **Response** | | |
| 15 | % of occasions where the first fire engine arrives at an emergency incident within 10 minutes from time the emergency call was answered | This measure looks at the time taken from when the Fire Control Room Operator answers the phone until the time the first fire engine (appliance) arrives at the scene of the emergency incident, and on how many occasions RBFRS does this in under 10 minutes. |
| 16 | % of full shifts where there is adequate crewing on all wholetime frontline pumping appliances | This is the percentage of shifts (day or night) where there is sufficient minimum qualified fire fighters (4 personnel) on all wholetime pumping appliances (fire engines). A wholetime frontline pumping appliance is available 24/7, 365 days a year. |
| 17 | % of hours where there is adequate crewing on all retained frontline pumping appliances (based on 24/7 crewing) | This is the percentage of hours where there is sufficient minimum qualified fire fighters (4 personnel) on retained pumping appliances (fire engines).  Retained frontline pumping appliances are crewed mainly by on-call fire fighters who are based at stations in more rural locations, and are ready to leave their place of work or home and attend emergencies from the local retained station, when they receive the call. |
| **Customer Feedback** | | |
| 18 | % of domestic respondents satisfied with the overall service | Results are from a customer feedback questionnaire which is sent to those who have experienced a dwelling fire asking about their satisfaction and experience with the service they received from RBFRS. |
| 19 | % of commercial respondents satisfied with the overall service | Results are from a customer feedback questionnaire which is sent to business owners/ managers who have experienced a fire in their commercial premises asking about their satisfaction and experience with the service they received from RBFRS. |
| 20 | % of respondents satisfied with the services with regards to Fire Safety Audits | Results are from a customer feedback questionnaire which is sent to business owners/ managers who have had a full fire safety audit, asking about their satisfaction and experience with the service they received from RBFRS. |
| 21 | % of domestic respondents satisfied with the service regards their safe and well visit | Results are from a customer feedback questionnaire which is sent to a sample of individuals who have received a safe and well visit and asks about their satisfaction and experience with the service they received from RBFRS. |

## Service Provision Service Measure Definitions

| SM | Measure | Definition |
|---|---|---|
| 1 | The percentage of occasions a second fire appliance attending a dwelling fire arrives within 2 minutes of the first appliance to arrive. | |
| 2 | The percentage of occasions a second fire appliance attending a road traffic collision arrives within 2 minutes of the first appliance to arrive. | |
| 3 | % of occasions where the time to answer emergency calls is within 10 seconds | This measure uses the time taken from when the Fire Control Room system receives emergency incoming call alerts to the moment they are answered by a TVFCS Operator |
| 4 | % of occasions where time to mobilise is within 90 seconds | This measure is calculated from when emergency calls are answered to when control room staff request stations to mobilise the appliance. |
| 5 | % of occasions where Wholetime Duty System crew turnout time is in under 90 seconds | This is calculated from the time control staff request wholetime stations to mobilise the appliance to the start of travel to the emergency incident. This time will vary according to the station. |
| 6 | % of occasions where RDS crews turnout within the agreed timeframes | This is calculated from the time control staff request retained (RDS) stations to mobilise the appliance to the start of travel to the emergency incident. This time will vary according to the station. |
| 7 | % of complaints received from the public responded to within set timescales | |

## Appendix E: Quadrant Two: Corporate Health Measures Definitions

| CM | Measure | Definition |
|---|---|---|
| **Human Resources and Learning & Development** | | |
| 22 | % 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. |
| 23 | % 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. |
| 24 | % of eligible staff with Personal Development Appraisals | This measure reflects the percentage of eligible employees who have had a Personal Development Appraisal meeting.  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. |
| 25 | % of eligible operational staff in qualification | This measure examines performance in the key qualifications, outlined in the 8 core areas of the Fire Professional Framework, required by staff to maintain effective service delivery . |
| 26 | Percentage of Protection Staff in qualification | This measure examines performance in the key qualifications, required by staff to maintain effective service delivery . |
| **Health and Safety** | | |
| 27 | All RIDDOR accidents | RIDDOR(*Reporting of Injuries Diseases and Dangerours Occurrences Regulations*) are more serious injury accidents |
| **Finance and Procurement** | | |
| 28 | % of spend subject to competition | This measure is looking at all items of expenditure over £10k as RBFA must obtain quotes or tenders for all these purchases. This excludes statutory payments such as local authority charges or HMRC. |

| 29 | 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** | | |
| 30 | Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act and Environmental Information Regulations). | Number of decision notices issued by the ICO that uphold any part of a    complaint that we have breached the relevant legislation. |
| 31 | Number of Information Commissioner assessments finding that the Service has breached Data Protection Legislation (Data Protection Act and forthcoming legislation) | Number of occasions where the Information Commissioner has informed  RBFRS that we have breached the legislation. |

# Appendix F: RDS Establishment/ Development Trainees rates

The planned establishment for each RDS station against the actual number of RDS employees including those staff currently in development.

| | Staff in Post | FTE | Establishment | In Development | FTE In Development /Trainee | SIP v Est | FTE v Est | % of staff In Development / Trainee |
|---|---|---|---|---|---|---|---|---|
| 05 Hungerford | 16 | 6.7 | 13 | 11 | 4.4 | 123.1% | 51.9% | 68.8% |
| 06 Lambourn | 8 | 3.4 | 13 | 7 | 2.9 | 61.5% | 26.1% | 87.5% |
| 07 Pangbourne | 6 | 3.3 | 13 | 2 | 1.2 | 46.2% | 25.7% | 33.3% |
| 09 Wargrave | 14 | 8.2 | 13 | 13 | 7.9 | 107.7% | 63.0% | 92.9% |
| 11 Mortimer | 12 | 6.2 | 13 | 12 | 6.1 | 92.3% | 46.6% | 100% |
| 15 Crowthorne | 15 | 8.4 | 13 | 8 | 4.3 | 115.4% | 64.6% | 53.3% |
| 19 Maidenhead | 19 | 7.7 | 13 | 11 | 5.1 | 146.2% | 59.0% | 57.9% |
| **Total** | 90 | 43.8 | 91 | 64 | 31.8 | 98.9% | 48.1% | 71.1% |

# Appendix G: HR Supporting Charts



**Staff in Post Annual Trends**
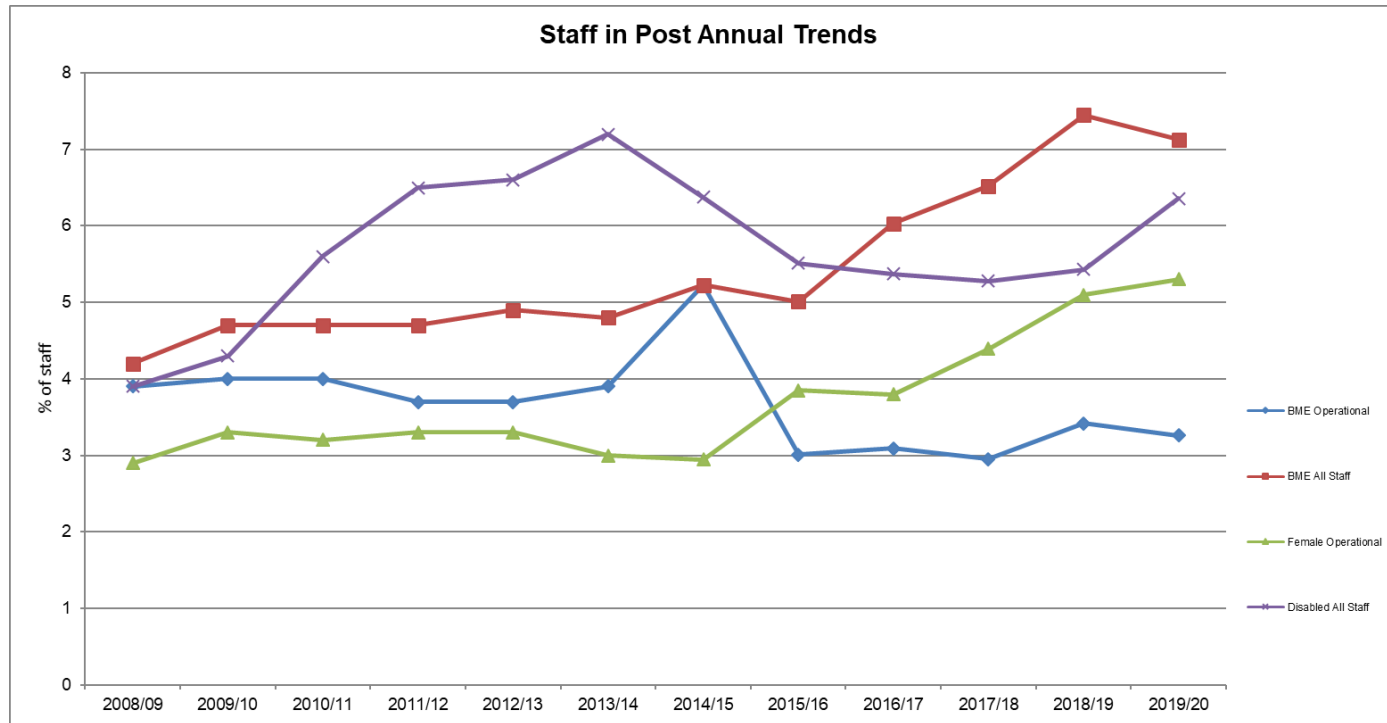
| Quarter 1 – 2019/20 | |
|---|---|
| Percentage of BME operational | 3.26% |
| Percentage of BME all Staff | 7.13% |
| Percentage of Female Firefighters | 5.30% |
| Percentage of Disabled staff | 6.36% |



**Staff in Post**

**Staff Age Profile**



Age Profile of Workforce for Quarter 1
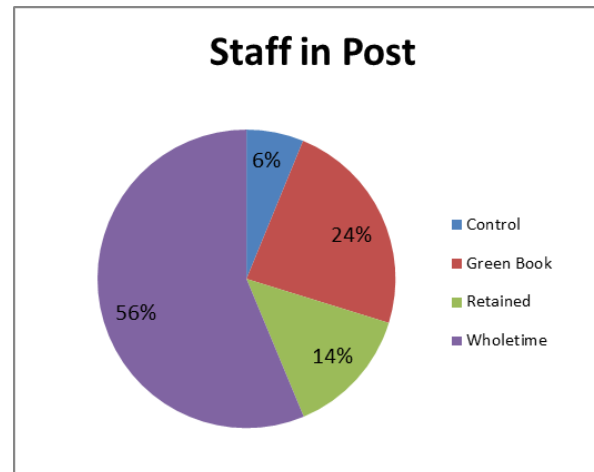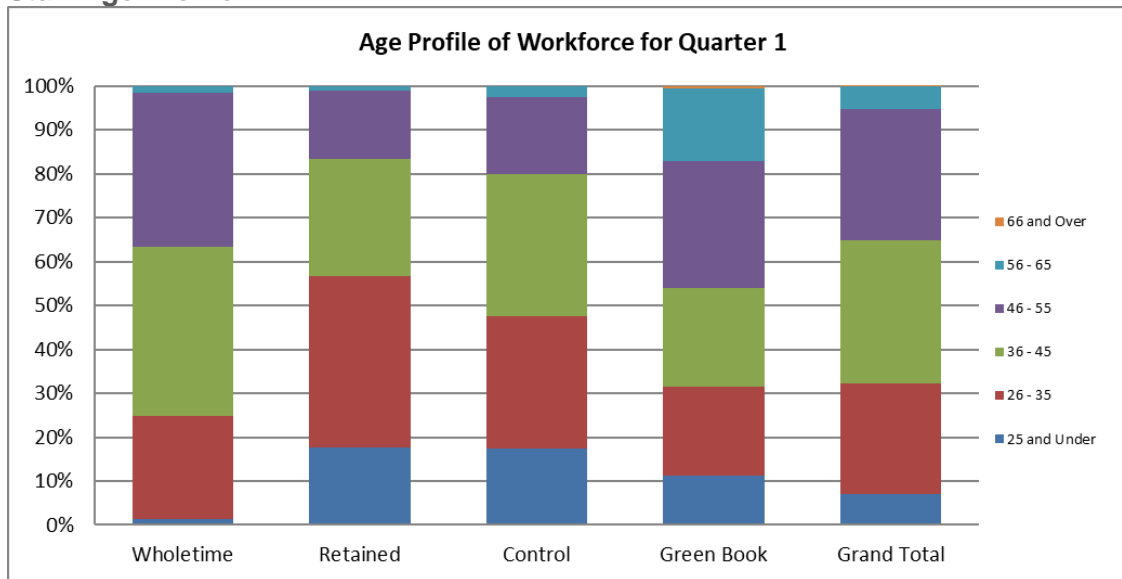
| Age Group | Wholetime | Retained | Control | Green Book | Grand Total |
|-----------|-----------|----------|---------|------------|-------------|
| 25 and Under | 5 | 16 | 7 | 17 | 45 |
| 26 - 35 | 85 | 35 | 12 | 31 | 163 |
| 36 - 45 | 140 | 24 | 13 | 34 | 211 |
| 46 - 55 | 127 | 14 | 7 | 44 | 192 |
| 56 - 65 | 6 | 1 | 1 | 25 | 33 |
| 66 and Over | 0 | 0 | 0 | 1 | 1 |
| **Grand Total** | 363 | 90 | 40 | 152 | 645 |

**Gender of Staff**



Gender Profile - Wholetime: Female 4%, Male 96%
Gender Profile - Retained: Female 9%, Male 91%
Gender Profile - Control: Male 28%, Female 72%
Gender Profile - Green Book: Male 43%, Female 57%
Gender Profile - All Staff: Female 22%, Male 78%
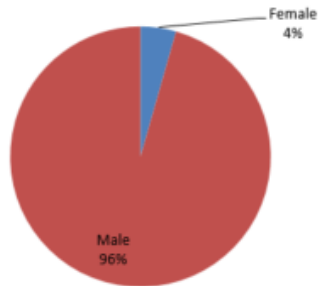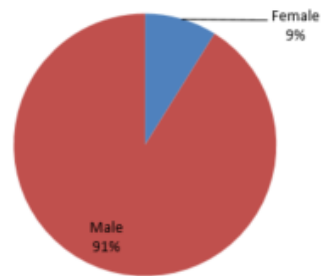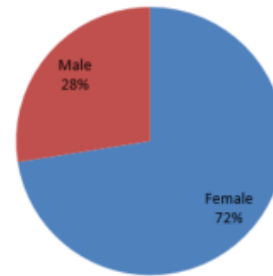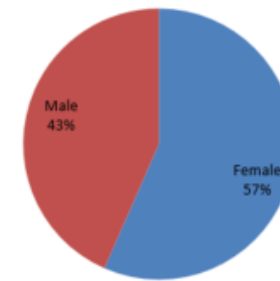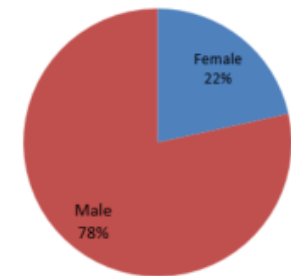
| Gender | Wholetime | Retained | Control | Green Book | All Staff |
|--------|-----------|----------|---------|------------|-----------|
| Female | 16 | 8 | 29 | 86 | 139 |
| Male | 347 | 82 | 11 | 66 | 506 |
| **Total** | 363 | 90 | 40 | 152 | 645 |

**Ethnicity of Staff**

### Total number of staff in Q1 broken down by ethnicity
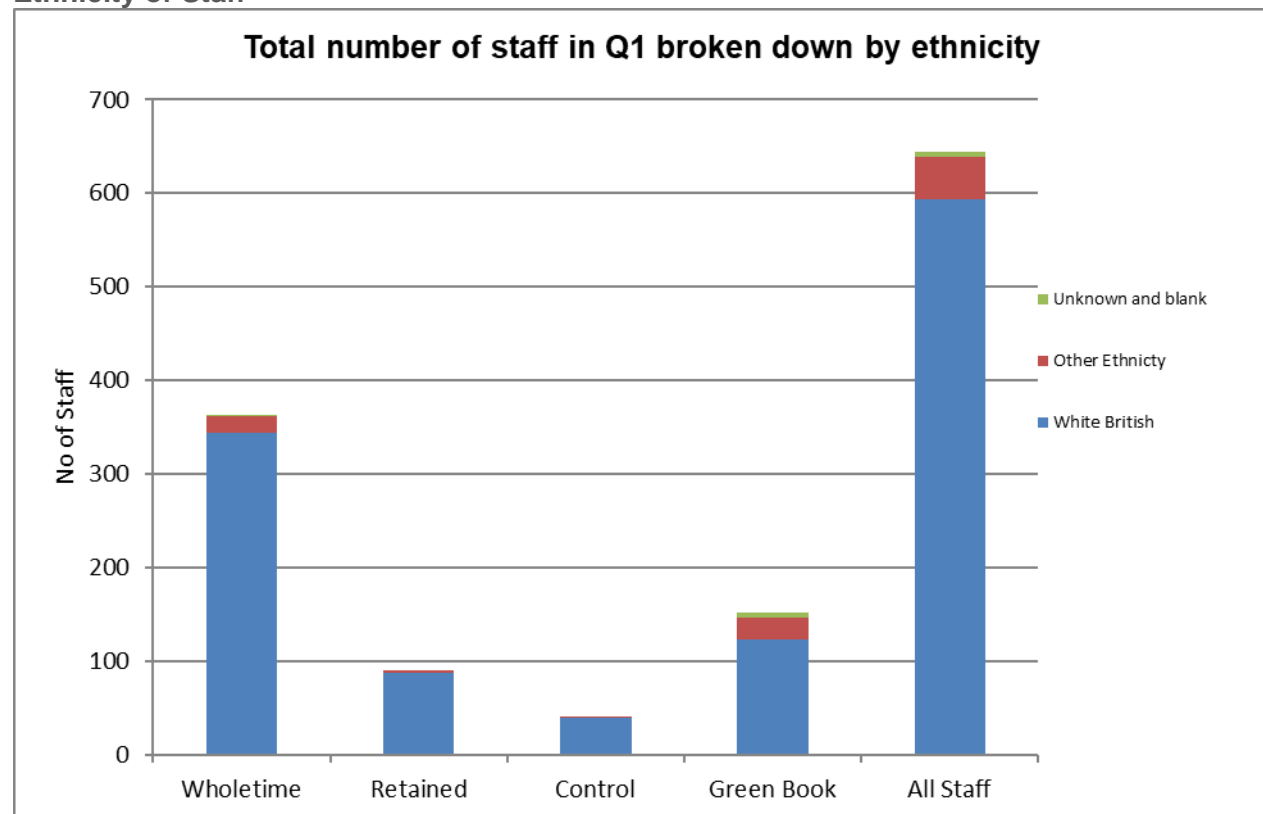


| Ethnicity | Number of Staff |
|---|---|
| Asian or British Asian: Indian | 4 |
| Asian or British Asian: Other | 4 |
| Black or Black British African | 4 |
| Black or Black British Caribbean | 4 |
| Black or Black British other | 2 |
| Chinese | 1 |
| Mixed White and Asian | 3 |
| Mixed White and Black Caribbean | 1 |
| Other | 1 |
| Other Mixed | 5 |
| Unknown | 6 |
| White British | 593 |
| White Irish | 5 |
| White Other | 11 |
| Asian or British Asian: Pakistani | 1 |
| **Grand Total** | **645** |

| Ethnicity | Wholetime | Retained | Control | Green Book | All Staff |
|---|---|---|---|---|---|
| White British | 344 | 87 | 39 | 123 | 593 |
| Other Ethnicity | 18 | 3 | 1 | 24 | 46 |
| Unknown and blank | 1 | 0 | 0 | 5 | 6 |
| **Total** | 363 | 90 | 40 | 152 | 645 |

**Days Lost to Sickness**

**Percentage of days lost to key causes for Q4**



**Percentage of days lost to key causes for Q1**
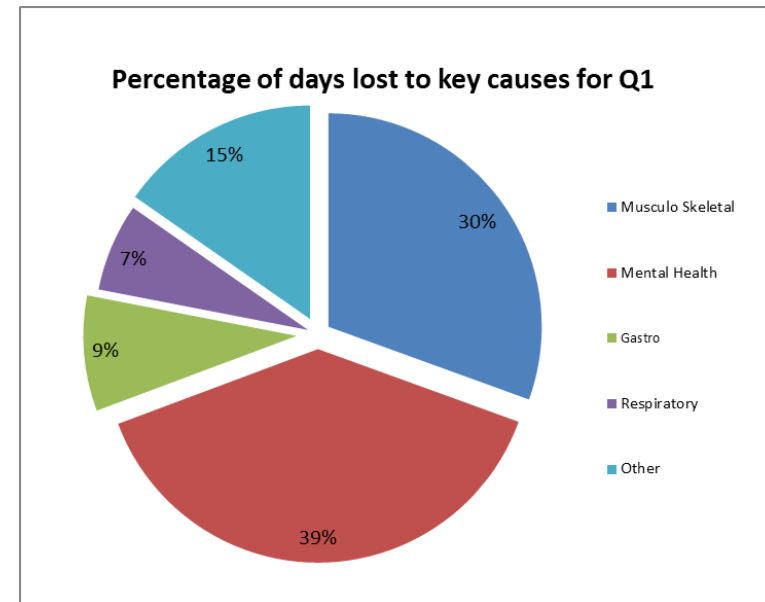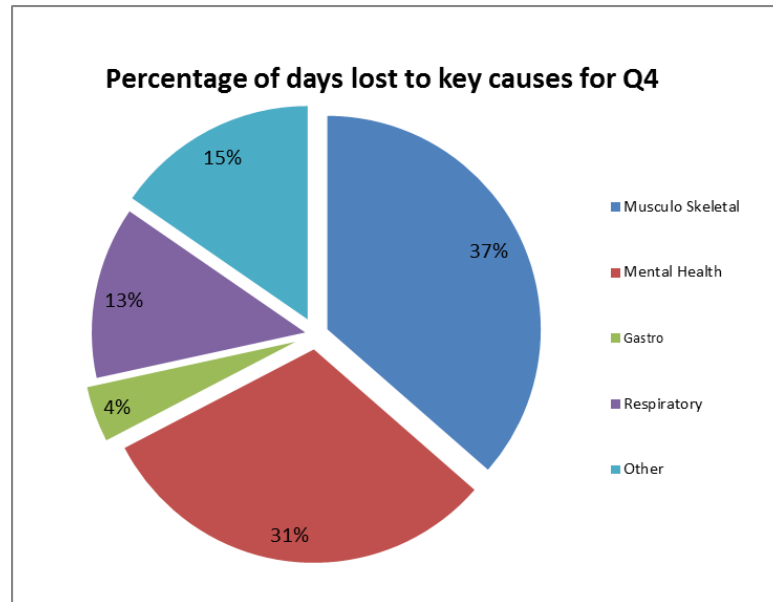


| Cause | Q4 18/19 | | Q1 19/20 | |
|---|---|---|---|---|
| | Days Lost | Occurrences | Days Lost | Occurrences |
| Gastro | 59 | 23 | 109 | 40 |
| Mental Health | 432 | 17 | 484 | 19 |
| Musculo Skeletal | 509 | 46 | 381 | 45 |
| Respiratory | 182 | 59 | 83 | 25 |
| Other | 215 | 53 | 191 | 46 |

**Percentage of working time lost to Sickness – Quarterly Comparison by Contract**

The charts in this section have been changed to reflect the Corporate Measure of % of working time lost rather than days lost per employee.

% of working time lost to sickness Q1 18/19 to Q1 19/20
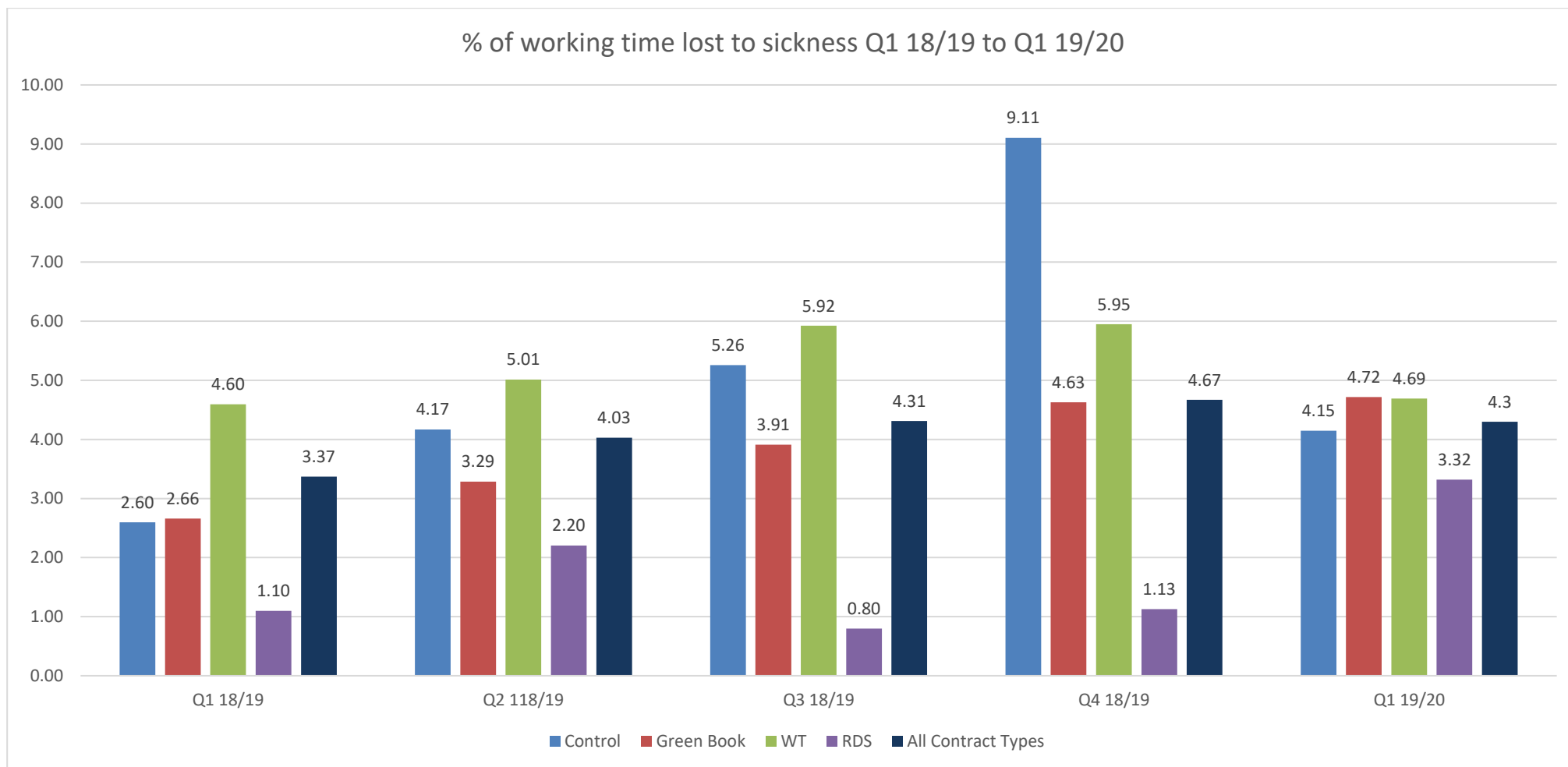
**Sickness across other FRS - April 2018 to March 2019**

Average

Values shown above bars (left to right):
13.73, 11.37, 11.35, 11.07, 11.04, 10.28, 9.76, 9.00, 8.84, 8.60, 8.54, 8.51, 8.48, 8.47, 8.23, 8.20, 8.04, 7.85, 7.84, 7.82, 7.68, 7.49, 7.21, 7.17, 7.05, 7.04, 6.61, 6.49, 6.09, 6.01, 5.45

FRS (left to right): Northern Ireland FRS, Northumberland FRS, Avon FRS, Essex FRS, Warwickshire FRS, London Fire Brigade, Staffordshire FRS, Norfolk FRS, Dorset & Wiltshire FRS, Surrey FRS, East Sussex FRS, Hereford & Worcester FRS, Lincolnshire FRS, Hampshire FRS, Humberside FRS, Cleveland Fire Brigade, West Midlands FRS, Tyne & Wear FRS, Northamptonshire FRS, Devon & Somerset FRS, Nottinghamshire FRS, Royal Berkshire FRS, Cumbria FRS, North Yorkshire FRS, Cornwall FRS, West Yorkshire FRS, Merseyside FRS, Leicestershire FRS, Lancashire FRS, Durham FRS, Derbyshire FRS

This graph (provided by Cleveland FRS) compares the percentage of working days lost to sickness for all staff in each Fire and Rescue Service. The days lost are shown as a per person figure for the period **1 April 2018 to 31 March 2019.**

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

The national data supplied confirms the top reasons for sickness across all fire and rescue services were similar to RBFRS absence as at Q4: Mental Health, MSK, Gastro and Respiratory.

# Appendix H: Abbreviations

| | | |
|---|---|---|
| ACFO | Assistant Chief Fire Officer | |
| ALP | Aerial Ladder Platform | |
| AM | Area Manager | |
| APB | Additional Pensionable Benefit | |
| AR3 | Animal Rescue Level 3 | Officer or team specialising in animal rescue |
| ARU | Animal Rescue Unit | |
| AWE | Atomic Weapons Establishment | High Risk site which falls under Office for Nuclear Regulations |
| BA | Breathing Apparatus | |
| BFBC | Bracknell Forest Borough Council | One of Berkshire's six Unitary Authorities |
| CAFS | Compressed Air Foam System | Most appliances have this for extinguishing small fires quickly |
| CFO | Chief Fire Officer | |
| CM | Crew Manager | |
| COMAH | Control of Major Accident Hazards | Top tier and low tier sites throughout Berkshire. High risk sites. |
| CS | Community Safety | |
| DCFO | Deputy Chief Fire Officer | |
| DIM | Detection Identification Monitoring | Mobilised from Oxfordshire Fire and Rescue Service |
| DRA | Dynamic Risk Assessment | One of the methods for identifying risk in the workplace and recording it for legal reasons |
| DSS | Director of Support Services | |
| DVR | Digital Voice Recorder | |
| EPM | Emergency Planning Manager | One for each of the six Unitary Authorities |
| EPO | Emergency Planning Officer | Some of the EPM's have a EPO, such as Reading Borough Council |
| FARRG | Fire and Rescue Risk Group | |
| FBU | Fire Brigades Union | |
| FCP | Forward Control Point | A nominated point area where resources can be deployed from to meet the needs of an incident |
| FDO | Flexi Duty Officer | |
| FF | Firefighter | |

| | | |
|---|---|---|
| FIO | Fire Investigation Officer | A nominated Officer with the skills to assess what caused a fire and why |
| FPS | Firefighters' Pension Scheme | |
| FRIC | Fire and Rescue Indemnity Company | |
| FS | Fire Safety | Green/Grey book personnel carrying out inspections within buildings and events |
| GDPR | General Data Protection Regulations | |
| GM | Group Manager | |
| HERU | Hazardous Environmental Response Unit | |
| HGV | Heavy Goods Vehicle | |
| HMEPA | Hazardous Materials Environmental Protection Advisor | Was known as a Hazmat Officer. Specialist Officer with the skills to deal with chemical incidents. |
| HMICFRS | Her Majesty's Inspectorate of Constabulary & Fire and Rescue Services | |
| HoS | Head of Service | |
| HRU | Heavy Rescue Unit | Attends road traffic collisions of 3 or more cars HGVs |
| ICT | Information Communication Technology | |
| ICU | Incident Control Unit | Large bus mobilised on 7 pump or more incidents |
| IRMP | Integrated Risk Management Plan | |
| IRS | Incident Recording System | |
| JESIP | Joint Emergency Services Interoperability Principles | |
| JO | Junior Officer | |
| JY | Juliet Yankee | RBFRS call sign in Control for all appliances |
| L1 | Level 1 Officer | Crew and Watch Manager |
| L2 | Level 2 Officer | Station Manager/Group Manager A |
| L3 | Level 3 Officer | Group Manager A & B |
| L4 | Level 4 Officer | Area Manager and Principal Officer |
| LGPS | Local Government Pension Scheme | |
| LGV | Light Goods Vehicle | |
| LPP | Light Portable Pump | |
| LRF | Local Resilience Forum | |
| MDT | Mobile Data Terminal | |
| MORRG | Management of Road Risk Group | |

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|---|---|---|
| MRV | Multi Roll Vehicle | |
| NILO | National Interagency Liaison Officer | |
| NOG | National Operational Guidance | |
| NVQ | National Vocational Qualification | |
| OFRS | Oxfordshire Fire and Rescue Service | |
| OiC | Officer in Charge | |
| ONR | Office for Nuclear Regulations | |
| OPAS | Operational Policy and Support | |
| OQP | Operational Qualifications Planner | |
| OSEP | Operational Support and Emergency Planning | |
| OSR | Operational Support Room | |
| OSU | Operational Support Unit | |
| OTB | Over the Border | |
| OTP | Officer Training Programme | |
| PDA | Pre-determined Attendance | |
| PDI | Personal Development Interview | |
| PFI | Post Fire Inspection | |
| PPE | Personal Protective Equipment | |
| PPV | Positive Pressure Ventilation | |
| PQA | Personal Qualities and Attributes | |
| PRF | Personal Record File | |
| QCF | Qualifications Credit Framework | |
| RA | Risk Assessment | |
| RBWM | Royal Borough of Windsor and Maidenhead | |
| RDS | Retained Duty System | |
| RMS | Remotely Managed Stations | |
| RRT | Risk Reduction Team | |
| SAG | Safety Advisory Group | |
| SCAS | South Central Ambulance Service | |
| SCC | Strategic Command Centre | |
| SDMT | Service Delivery Management Team | |
| SECTU | South East Counter Terrorism Unit | |
| SJCC | Staff Joint Consultative Committee | |

| | | |
|---|---|---|
| SLT | Senior Leadership Team | |
| SM | Station Manager | |
| SPB | Strategic Performance Board | |
| Stn 1 | Station 1 – Caversham Road | Wholetime |
| Stn 2 | Station 2 – Wokingham Road | Wholetime |
| Stn 3 | Station 3 – Dee Road | Wholetime |
| Stn 4 | Station 4 - Newbury | Wholetime |
| Stn 5 | Station 5 - Hungerford | Retained (On Call) |
| Stn 6 | Station 6 - Lambourn | Retained (On Call) |
| Stn 7 | Station 7 – Pangbourne | Retained (On Call) |
| Stn 9 | Station 9 – Wargrave | Retained (On Call) |
| Stn 10 | Station 10 – Wokingham | Wholetime |
| Stn 11 | Station 11 – Mortimer | Retained (On Call) |
| Stn 14 | Station 14 – Ascot | Satellite Station (operates from 0900-1800 hours daily) |
| Stn 15 | Station 15 – Crowthorne | Retained (On Call) |
| Stn 16 | Station 16 – Bracknell | Wholetime |
| Stn 17 | Station 17 – Slough | Wholetime |
| Stn 18 | Station 18 – Langley | Wholetime |
| Stn 19 | Station 19 – Maidenhead | Wholetime |
| Stn 20 | Station 20 – Whitley Wood | Wholetime |
| Stn 21 | Station 21 – Windsor | Satellite Station (operates from 0900-1800 hours daily) |
| TCR | Training Course Request | |
| TIC | Thermal Image Camera | |
| TRI | Training Records Indicator | |
| TVFCS | Thames Valley Fire Control Service | |
| TVP | Thames Valley Police | |
| UA | Unitary Authority | |
| USAR | Urban Search and Rescue | |
| WAH | Working at Height | |
| WBDC | West Berkshire District Council | |
| WM | Watch Manager | |
| WRT | Water Rescue Team | |
| WT | Wholetime | |