

Strategic Performance Report



Quarter 2 2017/18



We will ensure appropriate fire safety standards in buildings



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



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



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



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



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

**ROYAL BERKSHIRE
FIRE AND RESCUE SERVICE**

Enabling people to lead safe and fulfilling lives



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Strategic Performance Report Q2 2017/18

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This version of the report was updated on 07/12/2017

Introduction

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









This report contains performance across four Quadrants:

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

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

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

Key to Icons and Colours

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

Key Highlights

Quadrant One: Service Provision

Grenfell Tower related achievements and impact

- This quarter has seen important work resulting from the Grenfell tower fire. We have:
 - Conducted over 4700 interactions with people living in high rise buildings (including leaflet drops and face to face meetings).
 - Carried out urgent inspections of all 155 residential high rise buildings in Berkshire, at the request of DCLG.

The management of this emerging national risk and priority has had an impact on the ability of the organisation to deliver against existing targets. There has been a particular impact on the completion of Inspections and Home Fire Safety Checks and the figures below and in the report should be viewed in this light. The Authority has taken a proactive step to ensure additional resources are available to meet the ongoing requirements resulting from this incident.

Prevention

- **Targets were met in the area of fire deaths and casualties.** The quarter saw no fire deaths from accidental dwelling fires, and only one casualty (lower than the previous quarter and the previous year). We continue to pursue high quality referrals and up to date data to enable targeting of those at risk.
- **Home Fire Safety Check (HFSC) target numbers were not achieved this quarter for those at risk of death.** This is likely to have been effected by the re-prioritisation of resources to manage the response to the Grenfell tower fire (see above). The involvement of operational crews has now ceased and future quarters should see no further impact.
- All referrals from Thames Valley Police for vulnerable persons identified as being at risk from arson resulted in a Home Fire Safety Check **within the 3 day target period.**

Protection

- **The number of full audits completed continues to be below target.** The response to the Grenfell tower fire has diverted resources in this area. The high rise inspections that have been carried out are often complex and result in ongoing multi agency work.
- Targeting of inspections on premises presenting the greatest risk (as introduced by the IRMP Service Redesign project) **has improved since last year but is still below target.** Whilst additional resources are being added to teams there is a lag whilst individuals are recruited and trained. Now that the initial phase of work on high rise premises as directed by DCLG has been completed efforts can be refocused onto high risk premises such as HMO's.

Response

- **72% of emergency incidents were attended within ten minutes this quarter.** This is below the target of 75% and has not changed from Quarter 1. There are a range of interdependencies that contribute to achieving this target. The Service Delivery Hubs have started to work closely with the Data and Performance team to further analyse the data to identify causes. Action from this, such as understanding further how training in more remote locations can affect availability and the benefit of early identification and analysis of response time failures, will then be taken.
- Retained Duty System (RDS) availability **remains low at just under 37% on average.** This also has an impact on overall response times. Increasing the number of RDS firefighters and the subsequent increase in availability that this should bring is a key focus for the organisation that, from quarter two, is being addressed by the RDS project board.

Quadrant Two: Corporate Health

- In this quarter we have seen **a slight increase in the percentage of working time lost to sickness on the previous quarter**. This increase is attributable to long term absence cases and we continue to see a downward trend in short term absence levels suggesting interventions in this area are having a positive impact. We remain one of the highest performing Fire and Rescue Services in respect of this measure.
- **Mental health causes account for over a third of sickness absences this quarter**. A Wellbeing Adviser (Mental Health) joined RBFRS in August with a focus of the provision of awareness training, health promotion and development of mental health initiatives. Absence due to musculoskeletal issues continues to reduce.
- **A full budget position with supporting comments and analysis will be provided for quarter 3** of 2017/18 reflecting the new structure in service delivery and risk and performance, and the impact of emerging pressures within the financial year.
- To date, £1,054,606 of the overall Transition Fund budget of £2,000,000 has been spent. In total, £1,581,995 has been allocated.
- There has been good progress in the area of procurement processes and contract management, with a clear procurement plan and strategy in place.

Quadrant Three: Priority Programmes

IRMP Programme

Three IRMP programme projects are on track and being managed by the respective teams. Two projects are at amber status:

- Emergency Services Mobile Communication Programme (ESMCP) – a lack of information from the National programme is hindering progress and we are having to make some planning assumptions with greater understanding and information expected in Q3
- Whitley Wood – following a review, options are to be reconsidered and cost estimates to be re-provided. It is likely that the options will cost more than the original indications within the Strategic Asset Investment Framework.

Organisational Development Programme

- We are currently working to complete the original elements of the organisational development plan which will shortly be replaced with a **revised people strategy** to further develop and evolve the organisation and the workforce in order to better serve the people of Berkshire.
- In the last quarter, a significant amount of progress has been made in the development of a **leadership development programme for middle managers** (to be launched in quarter 3). The delivery of this programme will remain a core element of the revised people strategy.
- **Investors in People** has been postponed to better understand the assessment requirements and accreditation process and align this work to a revised People Strategy.
- Progress has also been made on the Apprenticeship Scheme with a **number of business administration apprentices joining the workforce**. This will be further progressed in quarter 3 including consideration of the option to become an Approved Training Provider.

Quadrant Four: Risk

- We continue to perform robust and systematic reviews of those risks we believe could seriously affect the organisation's performance in relation to safety of our staff, our reputation and the ability to deliver against our strategic commitments.
- There has been positive reduction in the recorded risk scores in three areas;
 - **Closer working and an agreed framework** with Thames Valley Partners has seen the Collaboration, partnership and shared service risk reduce.
 - The creation of a **dedicated Project Officer** to coordinate the activities associated with the Grenfell disaster has seen improvements in this area of work, with greater controls and measures in place.
 - **Greater resource and closer management** of the Payroll contract has seen a reduction in risk in this area
- There are 4 areas of risk which have not moved, but remain at a Red status due to the level of risk, these are;
 - Fire fighter Safety
 - Compliance with the Home Office Reform Programme
 - Ensuring Capacity, Capability and Resilience
 - Volatility of Funding
- All these higher level corporate risks are considered and discussed on a regular basis by the Senior Leadership Team and reviewed by the Audit and Governance Committee.
- Accident reporting continues to be monitored, with **no increase in the number of accidents requiring investigations in this quarter.**



Supporting Performance Information

Quadrant One: Service Provision

(data accurate as of 10 October 2017)

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Dwelling Fire Deaths and Safeguarding											
1	Number of Fire Deaths in Accidental Dwelling fires*	0	2	0↑			2	0	0	0	
		(Source: Scorecard Corporate Measures (P&P) / IRS9.06a)									
		There were no fire deaths in accidental dwelling fires for Q2. The primary focus of the Service's prevention activity is to maintain this level of performance. In Quarter 2, the team has carried out work to identify the lessons that can be learned from the 2 accidental dwelling fire deaths that occurred in Quarter 1 and are developing an action plan to implement changes to deliver more effective services to the most vulnerable in our communities. The recently introduced Adults at Risk Programme (ARP) seeks to gain high quality referrals from those coming into contact with the most vulnerable members of our communities and builds on the existing data sharing arrangement with the NHS.									
		The recent restructure which was introduced on 1 st September enables the delivery of the majority of services to the public through the 3 Service Delivery Hubs (West, Central and East, each serving two unitary authority areas). The plan is to create harmonised and locally co-ordinated prevention, protection and response activities that actively identify and reduce risk across each hub area.									
		Services are now delivered in each hub area by:									
		Operational crews –these personnel carry out home fire safety visits and safety education work in schools.									
		Safe and Well Technicians – we are doubling the number of these posts from 3 to 6 as part of our Service Restructure. These personnel deliver the more complex home visits to the most vulnerable and immobile members of our communities.									
		Fire Safety Inspecting Officers (FSIOs) – these personnel conduct fire safety audits, post fire inspections, investigate fire safety concerns and respond to consultations on proposed changes to buildings or on plans for new developments. Following the direction given through Fire Authority's Service Redesign process, we have refocused our fire safety reinspection programme to address premises that pose the greatest risks.									
		By the close of Quarter 2, and in response to the Grenfell Tower incident, RBFRS had carried out over 4700 visits to the homes of those living in high rise buildings to provide fire safety advice and reassurance.									

*See appendix D for service provision measure definitions

Strategic Performance Report Q2 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
2	Number of Fire Casualties in Accidental Dwelling Fires*	29 MAX	7	1↑			8	14 MAX	9	15	↑
		Source: Scorecard Corporate Measures (P&P) / IRS9.06a) (Please note Q1 figure updated from 5 to 7 due to IRS recording update.)									
		Whilst it is encouraging to see the progress made in Q2 and the significant improvement against last year's figures we are still improving our information sources to ensure we are carrying out home fire safety checks targeted at those residents that are more likely to have a fire in their home and to be injured as a result. We are currently updating and refreshing the 'demographic and lifestyle classification software (Mosaic' data) to enable better targeting of those at risk. By focusing our fire safety enforcement activity at those premises that are less likely to have adequate fire risk management processes in place such as houses in multiple occupancy (HMOs) we also hope to reduce the number of casualties in accidental dwelling fires.									
3	% of safeguarding referrals made to Local Authorities within 24 hours*	100%	100%	100%↔			100%	100%	N/A	N/A	N/A
		(Source: Manual calculation by Safeguarding Coordinator)									
		This is a new Corporate Measure for 2017/18 which records performance in the discharge of our statutory responsibility to report safeguarding issues involving children and vulnerable adults. We have generated 51 safeguarding referrals in Q2 managing them all within the required timeframe. We have a statutory duty to report safeguarding concerns to the appropriate authority where our staff encounter situations, environments or persons at potential risk. RBFRS recognises and acknowledges the importance of the duty placed on our Service and staff. In recognition of the importance of this duty we have introduced this time bound measure (The timeframe is not required or directed through legislation or guidance and may not be present within other organisations).									
Prevention											
4	Risk of Death	7000	1419	974			2383	3500			
5	Risk of Injury	2500	764	792 ↑			1556	1250			
	TOTAL	9500	2183	1766			3939	4750			
	Number of Home Fire Safety Checks (HFSC) delivered to those who are at heightened risk	(Source: SQL Home > Stats > Corporate Measures > SC_HFSC_CorporateMeasures_Audit) (Please note Q1 figure updated due to data entry lag) There has been considerably reduced activity for this measure due to the work directed by DCLG in the aftermath of the Grenfell disaster. RBFRS has carried out a considerable amount of work to provide advice and reassurance to residents of high rise buildings across the									

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Strategic Performance Report Q2 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
	of dying/being injured in the event of an accidental dwelling fire*	County since the Grenfell tower fire on 14 June. The majority of this additional work, some 4700 visits, whilst vital to ensuring public safety and confidence, do not contribute to this measure. Operational crews' involvement in this area has now ceased and focus has returned to the completion of HFSCs and other Prevention initiatives. Consequently, numbers of HFSCs will now improve but are unlikely to reach the target by year end. Crews are currently receiving training that will broaden the scope of home visits to encompass identification of vulnerabilities beyond the hazards posed by fire. This is in line with the decisions made by the Fire Authority in the Service Redesign process. The transition to Safe and Well visits supports the principle of making every contact count (MECC). The new and improved visits may take longer to complete but there will be an increase in the number of Safe and Well Technicians to provide additional capacity.									
6	% of dwelling fires RBFRS attends where there was either no working smoke alarm installed, or a smoke alarm did not operate despite being present. This is measured against the total number of dwelling fires. *	41% MAX	38.9%	38.7%↑			38.8%	41% MAX	47.1%	46.6%	↑
(Source: Scorecard Corporate Measures – IRS 5.0e) Number of dwelling fires = 106 The number of dwelling fires in Quarter 2 remains similar to that experienced in Q1, however, the percentage of those where a smoke alarm did not activate is marginally down against the last quarter. Resources are being applied to drive both elements down through the fire safety education work delivered by operational crews and the newly formed Fire Safety Education Team and through the delivery of our targeted Home Fire Safety Check programme. Detailed post incident reports from crews allow identification of the reasons why alarms didn't operate. Of the 41 occasions that fall into the definition for this measure, 16 were due to a smoke alarm not being installed, on 5 occasions the alarm did not operate due to a fault or missing batteries; 13 were attributable to the location of the smoke detector not being located near the incident and the incident dealt with before the smoke alarm could operate and the remainder were reasons recorded as 'other'. On each occasion the crews conducted remedial action such as a full Home Fire Safety Check and/or the fitting of a functional smoke alarm.											
7	% of category 1 HFSC referrals, where there has been a threat or incidence of arson, completed within three days*	100%	80.00%	100%↑			87.5%	100%	0%	32.4%	↑
(Source: SQL Home > Stats > Corporate Measures > SC_HFSC_CorporateMeasures_Audit) This is one of the most risk and time critical of all the referrals made to RBFRS for a home visit. The number of referrals is not high, with only 4 in the Quarter, however, this is a significant improvement and demonstrates our commitment to a much greater emphasis on prioritising activity based on risk and on protecting the most vulnerable without delay.											

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Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Protection											
8	Full Audits*	1400	242	249 ↑			491	700	463	913	
9	Audits & Follow Ups*		273(TBC)	Data not available			TBC				
	Total Number of Full Fire Safety Audits and follow-up visits carried out*	<p>(Source: FSR101 + FSR103 – Scorecard FSR Home Office Book. Data feeds for Audits and Follow-ups are still being developed to obtain accurate figures)</p> <p>Following the Grenfell Tower incident, RBFRS carried out inspections of all 155 residential high rise buildings in Berkshire along with a great deal of additional work to ensure the buildings with Aluminium Composite Material (ACM) cladding met the interim guidance issued by the DCLG. This work was over and above our existing pre-planned, targeted fire safety re-inspection programme. This has meant that less capacity was available to deliver the re-inspection programme in Quarter 2.</p> <p>Whilst it is still unclear if there will be ongoing additional workloads on the service as a result of the Grenfell tragedy, the Fire Authority has taken proactive steps to ensure adequate resources are in place to meet any emerging additional work. Using the additional resources, a multi-agency problem solving approach is now being adopted to manage fire safety enforcement across the high rise building stock within Berkshire.</p> <p>The additional inspections of high-rise buildings resulted in a significant amount of work being carried out urgently that will subsequently result in further, more comprehensive multi-agency visits taking place. These inspections have not been recorded as completed full fire safety audits at this stage. Therefore, these visits are over and above the number of completed fire safety audits recorded against this target in Quarter 2.</p> <p>A project has been initiated through the Programme Board to streamline and harmonise protection administration across the hub areas and to improve ways of working to deliver greater productivity.</p>									
10	Satisfactory*	50% max	64.05%	61.45% ↑			62.73%	50% max	80.7%	80.7%	↑
11	Informal Activity*	45% min	28.93%	30.12% ↑			29.53%	45% min	19.6%	19.6%	↑
12	Formal Activity*	5% min	0.61%	0.61% ↔			1.22%	5% min	0.04%	0.04%	↑
13	Success Rate*	95% min	100%	100% ↔			100% (0)	95% min	100%	100%	↔
	Outcomes of Full Fire Safety Audits (above)*	<p>(Source: FSR 102 – Scorecard FSR Home Office Book)</p> <p>The Service is working to the direction set by the Fire Authority through the Service Redesign process to deliver the requisite number of audits and to target those audits at the premises presenting the greatest risk set out by the IRMP. Significant improvement has been made</p>									

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Strategic Performance Report Q2 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance			
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD	
		in comparison to Q2 last year across all elements of these related targets. This reflects the fact that our Fire Safety Inspecting Officers (FSIOs) are actively targeting premises that are likely to be contravening the Regulatory Reform (Fire Safety) Order. The performance trend continues to track towards targets although more work needs to be done to locate and deal with the highest risk premises which will result in more formal enforcement activity being taken. To that end, Fire Safety Inspecting Officers are sharing intelligence and working with local authority housing departments to identify and inspect houses in multiple occupancy (HMOs). History has demonstrated that these inspections are more likely to result in recommendations for improvement and more formal activity. The Service Restructure has enabled us to become more effective at targeting local risk. FSIOs work as part of their local hub teams and are now better placed to influence the risk-based inspection programme to ensure it is suited to their local community.										
Response												
14	% of occasions where the first fire engine arrives at an emergency incident within 10 minutes, from time the emergency call was answered*	75.0%	72.1%	72.5%↑			72.3%	75.0%				↑
		(Source: Scorecard incident recording system-section 3. /IRS30e (based on the total of all emergency incidents responded to within 10 minutes, divided by the total of all emergency incidents responded to)).										
		Service Delivery area (hub)						Total incidents		% within 10 mins		
		West (Reading and West Berkshire)						872		70		
		Central (Bracknell and Wokingham)						365		68		
		East (Royal Borough of Windsor and Maidenhead and Slough)						636		78		
		Officers within the service delivery Hubs work closely with the Performance and Data team to review and analyse the causes that contribute to fire engines not being able to achieve the 10 min response standard. Modelling already suggests that on 25% of occasions we are unlikely to attain this, therefore understanding what the issues are and where we can have a positive influence is vital in attempting to improve our performance to meet the 75% target.										
		Currently our analysis leads us to centre on the three main elements that make up response times:										
		<ul style="list-style-type: none">Call handling time – Service Delivery managers work alongside TVFCS to identify where these are impacting on overall response times. TVFCS managers continue to find opportunities for improvement. A call handling time of 90 seconds or less provides the optimum window to achieve a 10 min response. Call handling performance is detailed in the Service Measures section of this report.Appliance turn out time – Service Delivery Hub managers work with and enable the station teams to ensure ownership of performance at the local level. This allows for a deeper understanding of the cause and effect of the local factors influencing										

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Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		response times such as training in remote locations and the implications of appliance movements across the county. This on-going performance management and making small adjustments to local ways of working will positively influence performance towards the target. <ul style="list-style-type: none">Travel time – Analysis of statistical and geographical data is being conducted to identify failure hotspots for the application of remedial action. Contributing factors such as the availability of retained appliances have a part to play in improving travel times by reducing the occasions on which wholtime appliances are relied upon to react to incidents in retained areas. The analysis of data has identified that the majority of incidents in RDS station areas are not being attended within 10 minutes. Local managers, specialists and station personnel are all involved in the work to improve retained recruitment which will subsequently improve retained appliance availability reducing the reliance on wholtime appliances for fire cover in the more rural areas.									
15	Whole Time	100.0%	100%	99.95%			99.98%	100.0%	100.0%	100.0%	
16	RDS	50.0%	35.6%	36.68% ↑			36.1%	50.0%	45.9%	45.9%	
	% of hours where there is adequate crewing on frontline fire engines (above)*	<p>(Source: Scorecard Central Team (CT) Book – (CTT07a) based on shifts worked at planned appliance crewing for WT (56) and a manual check of FireWatch)</p> <p>RDS</p> <p>Availability at RBFRS RDS Stations ranges between 11.5% and 75%. Whilst there has been a reduction since 2016/2017, we have improved slightly in Q2 at a time of year where absence due to leave is at its highest.</p> <p>RBFRS is now working in partnership with Oxfordshire Fire and Rescue Service in training our RDS recruits. This increases access to training and has resulted in new recruits being able to ride the fire engine as a qualified BA wearer in approximately eight months. This is up to nine months earlier than was previously possible. This has a positive effect on increasing availability and retaining personnel.</p> <p>A focus on recruitment has seen increases in establishment at a number of stations and, as these individuals' progress through the more streamlined training programme, there should be a corresponding effect on availability into the latter part of this year and through 2018.</p> <p>Wholtime</p> <p>The service aims to maintain 14 Whole time crewed fire engines on a 24/7/365 basis. There are a number of watches running under establishment. This can have an effect on crewing with the risk that fire engines may have to be taken out of service for the duration of a shift. A number of measures have been adopted to address this; a Wholtime transferee process took place in Q2 with successful candidates starting on stations throughout Q4. In Q3 a station manager promotion process will start which will reduce the impact of the temporary promotions and associated backfilling of posts. In addition to this a new leave policy will be introduced from January 2018.</p> <p>In the short term additional measures for monitoring global crewing have been put in place by the new Operational Policy and Support Department (from 1 September 2017.) These include:</p>									

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Strategic Performance Report Q2 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		<ul style="list-style-type: none">Monitoring crewing on a daily (Monday to Friday) basis at 0730hrs to identify predicted shortfalls across all watchesMonitoring shortfalls up to and beyond the 0900hr shift change and taking direct interventions when requiredIdentifying predicted weekend shortfalls and taking direct interventions to support the weekend Duty Officer cadreMaintaining an issues log to identify patterns of concern across all stations and watchesIssuing additional guidance and prompts to Hub management if required <p>To provide longer term assurance an Establishment Management board has been put in place. This board will have cross directorate membership and will inform long term plans for recruitment, promotion and succession planning.</p>									
Customer Service											
17	Domestic Respondents	100%	100%	98.65%			98.65%	100%	N/A	N/A	N/A
18	Commercial Respondents	95%	100.00%	100.00%			100.00%	95%	N/A	N/A	N/A
19	Fire Safety Audit Respondents	90%	100.00%	100.00%			100.00%	90%			
	% of Questionnaire respondents satisfied with the overall service (above)*	<p>(Source: Owned by Risk & Performance - manual calculation from results of postal surveys returned)</p> <p>During Q2 there were 74 responses to the customer feedback survey following a domestic dwelling fire. One survey returned a not satisfied response. This response is being resolved through the RBFRS complaints procedure, and in conjunction with London Fire Brigade, who also attended this incident.</p> <p>13 responses were received following a fire in a commercial premise. All respondents were satisfied with the response they received.</p> <p>34 responses were received following a fire safety audit and all respondents were satisfied with the way in which the audit was conducted.</p>									

*See appendix D for service provision measure definitions

Service Provision - Service Measures

(data accurate as of 10 October 2017)

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Response Service Measures											
1	Dwelling Fire		52.5%	53.1%↑			52.8%		50.0%	50.0%	↑
2	Road Traffic Collision		53.8%	52.1%			52.9%		45.7%	45.7%	↑
	The percentage of occasions a second fire appliance attending arrives within 2 minutes of the first appliance to arrive.	<p>(Source: Scorecard IRS Book Section 3. Unitary Attendance Measures IRS 3.0f and IRS 3.0g)</p> <p>Performance against both measures is up on last year and is remaining steady within a few percentage points. The context surrounding these measures is important to note as the number of dwelling fires and RTCs for the quarter were 106 and 102 respectively and the performance at one incident will impact the overall figure by around one percentage point.</p> <p>The functional leads within each hub area responsible for response standards will also take responsibility for analysing the data that feeds into these service measures and making recommendations for improvement. Although not corporate measures these two service measures allow the organisation to maintain a richer understanding of the general health of appliance fire cover across the county.</p>									
3	5 seconds	92%	88.8%	89.7%↑			89.3%	92%	86.2%	86.2%	↑
4	10 seconds	97%	97.5%	97.7%↑			97.6%	97%	97.4%	97.4%	↑
	% of occasions where time to answer emergency calls is within (above)	<p>(Source: Scorecard Corporate Measures Book Section Response Measures IRS 2.0 a,b and f)</p> <p>These measures have been put in place to focus attention on continual improvement within the TVFCS's operations. There has been an improvement in both measures during Quarter 2. The measure for calls answered within 10 seconds remains very slightly above target, whilst the measure for calls answered within 5 seconds remains a little below.</p> <p>Control Room crewing levels have an impact on performance against these measures. Recruitment has taken place to bring the Control Room up to establishment levels and as these recruits develop experience, it is expected that crewing shortfalls will occur less often and performance against these measures will improve. The Control Room management team are now fully in place and looking at the issues</p>									

*See appendix D for service provision measure definitions

Strategic Performance Report Q2 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		around Control Room crewing generally, including sickness absence. Control staff have been offered 'flu' jabs to try and reduce seasonal sickness absence during autumn and winter. Exceptional demand, either caused by spate conditions or single incidents generating high numbers of emergency calls can also impact on performance against these measures. The Control Management team are looking at ways to identify where these events have affected figures to enable more informative commentary to be provided in this area									
5	Within 60 seconds	60%	52.3%	50.1%			51.2%	60%	35.7%	35.7%	↑
6	Within 90 seconds	80%	76.7%	76.8%↑			76.7%	80%	66.5%	66.5%	↑
7	Within 120 seconds	95%	87.6%	86.2%			87.0%	95%	82.1%	82.1%	↑
	% of occasions where time to mobilise (above)	<i>(Source: Scorecard Corporate Measures Book Section Response Measures IRS 2.0 a,b and f)</i> These measures have also been put in place to focus attention on continual improvement within the TVFCS's operations. Control staff turnover has a small, temporary effect on these measures, as it takes newer staff slightly longer to process in the live Control room environment. Thames Valley Fire Control has a high number of new, inexperienced staff currently and it is anticipated that, as they gain experience, performance in this area should improve. It has been agreed at the Thames Valley Fire Control Joint Coordination Group, that the TVFCS Group Manager will review the way performance is reported to ensure a more informative commentary is provided. There are some incident types, for example Automatic Fire Alarm activations, where Service policy requires TVFCS staff to carry out additional activities as part of the call handling process for those incidents. More informative commentary should help to explain where performance improvements are possible. A number of prospective improvements have been identified by the Management team within TVFCS which should lead to an improvement in mobilising times. These include making changes to Gazetteer and wider adoption of 'Pre-alerting', whereby appliances are alerted at an earlier point during the call handling process when the nearest responding station can be readily identified.									

*See appendix D for service provision measure definitions

Strategic Performance Report Q2 2017/18

Quadrant One – Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
8	Whole Time under 90 seconds	100%	76.0%	77.0% ↑			76.5%	100%	64.7%	64.7%	↑
9	RDS under 300 seconds	100%	71.7%	72.4% ↑			72.1%	100%	64.9%	64.9%	↑
	% of occasions where crew turnout (above)	<p><i>Source: Scorecard IRS Book Section 6. Resources used at Incidents Measure IRS 6.07</i></p> <p>These two measures report on one of the critical factors making up the total response time for an incident therefore it is important to maintain an upward track in terms of performance. The turnout times for both retained and wholetime crews have improved marginally and are significantly up on last year's figures however they still remain well below target. The response performance functional leads for each hub area will be tasked to identify the causal factors behind failures and recommend remedial action.</p> <p>Crews will be accountable and report on failures to achieve turnout times so that recommendations can be made for improvement. In terms of RDS turnout performance the target of 300 seconds is no longer valid at some stations as the catchment area for recruiting has been increased to improve establishment levels and reflect the average time taken for the next nearest wholetime appliance to arrive.</p>									

*See appendix D for service provision measure definitions

Service Plans

To ensure effective delivery of our services in line with our strategic plans and priorities the various activities undertaken across functions are detailed and monitored through Service plans that are developed and maintained by Heads of Service. By monitoring for the delivery of outputs from these activities we can assure the Fire Authority and other external stakeholders that arrangements associated with the management of financial, governance and operational matters are appropriate.

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

- HR and L&D
- Corporate Services
- Health and Safety
- Facilities and Stores,
- Response, Prevention and Protection
- Finance & Procurement
- Business Information & Systems
- Risk & Performance.

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 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.

We are now working on development of 2018/19 Service Plans and these will be in place for 1st April 2018. As well as ensuring delivery against corporate targets, and priorities, they will drive necessary actions to deliver our IRMP commitments and corporate priorities. They will consider new challenges, such as requirements stemming from Grenfell Towers or expectations of HMICFRS. We will renew our focus on the key areas that will best enable the organisation to improve delivery. This will include actions in the areas of recruitment and staff development, revision of our policy approach and evolution of our operational assurance systems.

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



Quadrant Two: Corporate Health Performance

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Human Resources											
1	% of working time lost to sickness, across all staff groups	3%	4.59%	4.87%			4.87%	3%	2.99%	3.48%	
		(Source: Data calculated and supplied by HR) (Note: RDS figures should be viewed with caution as this figure is calculated based on the average shift length and these vary considerably and many sickness episodes may be recorded as unavailable)									
		In this quarter we have seen a slight increase to the percentage of working time lost to sickness, however we remain one of the highest performing services in terms of sickness absence. The increase of 0.28% from the previous quarter is attributable to long term absence. We continue to see a downward trend in short term absence levels suggesting interventions in this area are having a positive impact.									
		Both mental health and MSK health related issues continue to be the top two causes of sickness absence with Heart, Cardiac and Circulatory issues being the third highest. MSK and mental health absences are continually monitored to ensure individuals get the support they need to return to the workplace at the earliest opportunity with a wide range of interventions being delivered in accordance with the Health, Safety and Wellbeing Action Plan. A large number of individuals (20 of 26) who have been on long term absence during Q1 and Q2 have now returned to the workplace or left the service.									
		<u>Mental Health</u> There has been a significant increase of 235 days lost compared to the previous quarter. Mental health absences equate to 35% of the total days lost to sickness this quarter, compared to 16% last quarter. 203 days (9 episodes) were lost in Q1 and 438 (14 episodes) this quarter. The highest reason for mental health absence this quarter is reported as stress (non-work related) and was the lowest in Q1 (with stress – (work related) being the highest cause of sickness absence in Q1). Anxiety and depression were second highest in both Q1 and Q2.									

*See appendix E for corporate health measure definitions

Strategic Performance Report Q2 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		<p><u>Musculoskeletal (MSK) Sickness</u></p> <p>There has been a decrease of 87 days on the previous quarter. MSK absences equate to 29% of total days lost to sickness in Q2 in comparison to 36% in Q1. 444 days (46 episodes) were lost in Q1 and 357 (51 episodes) this quarter. While there has been an increase in the number of episodes there has been a shift from Long term absences to short term absences.</p> <p>Access to Benenden has enabled individuals who are members of the scheme to obtain a diagnosis and access treatment quicker than the NHS and where appropriate, bring their operations forward resulting in a quicker return to work. The scheme, which is actively promoted by the HR department, is already demonstrating benefits to employees and the Service by enabling earlier proactive intervention and access to treatment and avoiding more complex treatment at a later date which could result in future absences of longer duration. Through examination of short term MSK absences, patterns of absence are identified and recurrent MSK problems targeted and supported with referrals to the Health and Fitness Adviser who will ensure the Movement Specialist contacts the individuals concerned. MSK cases for non-uniformed staff have increased from two last quarter to four this quarter. The individuals have been contacted to promote the benefits of the Movement Specialist.</p> <p>There were only two accidents at work which resulted in absence accounting for six days lost. Both of these cases resulted in short term MSK absence.</p> <p><u>Supports and Health Promotion</u></p> <p>The Wellbeing Adviser (Mental Health) joined RBFRS in August. The purpose of this role is to progress the mental health aspect of the Health, Safety and Wellbeing Strategy. Focus will be on policy development, the provision of awareness training, health promotion and mental health initiatives including the Blue Light Programme.</p> <p>The Wellbeing Day is planned for 11 October.</p> <p>The HR Case Officer identified that some managers find it challenging to communicate effectively with people when out of the workplace, specifically in relation to mental health issues. Offsite face to face meetings with individuals and their line managers are facilitated and supported by the HR Case Officer who is providing advice and/or coaching managers. The Wellbeing Adviser (Mental Health) role is also being promoted in addition to other available support mechanisms.</p> <p>This quarter's focus has been around lifestyle support. The Fitness and Health Adviser has delivered a series of nutrition/lifestyle presentations to Thames Valley Fire Control Service (TVFCS) staff, one to one consultations and tailored advice to help improve health and wellbeing.</p>									

*See appendix E for corporate health measure definitions

Strategic Performance Report Q2 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		<p>The procurement of the Lifestyle Checkpoint machine, currently positioned in headquarters, has provided employees with the ability to monitor their health against a number of indicators including blood pressure, blood oxygen, muscle mass, weight and fat levels. This assessment can be undertaken regularly, enabling employees to monitor progress against personal fitness and wellbeing plans over a period of time.</p> <p>The Health, Safety and Wellbeing Member Champion regularly attends the Health, Safety and Wellbeing Committee (HSWC) and takes a keen interest in the progress of the Health, Safety and Wellbeing action plan.</p>									
2	% of eligible operational staff successfully completing fitness test	100%	99.8%	98.8%			98.8%	100%	96.7%	96.7%	
<p>(Source: Data calculated and supplied by HR)</p> <p>Fitness tests are carried out twice a year in April and October. Performance reported in this quarter relates to the April 2017 testing round. Outcomes of the October 2017 tests will be reported in Q3.</p> <p>The one outstanding test from April was completed unsuccessfully; this has reduced the pass rate from 99.8% as reported in Q1 to 98.8%.</p> <p>Seven staff who were not eligible in Q1 have returned to full duties and passed the fitness test. The total number of eligible operational staff to be tested at the end of Q2 was 414. From Q1 nine are still not eligible for testing due to being on long term sickness, light duties or maternity leave and one individual has left the Service.</p> <p>The two members of staff due three monthly retests satisfactorily passed these tests. The other two members of staff that had not achieved the standard in Q1 remain on light duties.</p>											
3	% of eligible staff with Personal Development Appraisals	100%	53%	85% ↑			85%	100%	98.94%	98.94%	
<p>(Source: Data calculated and supplied by HR)</p> <p>(Data as at 30 September 2017) 555 staff were eligible to have received a Personal Development Interview (PDI) meeting between April and June 2017.</p> <p>Dual contract employees only require one PDI and therefore have only been counted once.</p> <p>52 were exempt for the following reasons:</p> <ul style="list-style-type: none">42 new employees within their probation period											

*See appendix E for corporate health measure definitions

Strategic Performance Report Q2 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		<ul style="list-style-type: none">10 employees who have been away from the workplace for the duration of the period for various reasons including maternity and sickness. <p>473 staff are recorded as having had their PDI meeting which equates to 85%. This is an increase from 53% (293 individuals) at the end of Q1.</p> <p>The figures only account for those PDIs recorded on the system up to and including 30 September 2017. If PDI activity has been completed but not logged or was logged after this date it will be included as an update in Q3. Reminders to managers to undertake and record PDI meetings were issued by HR at the beginning of Q2.</p> <p>Of the meetings that have taken place, 337 have returned their paperwork to HR. Only 194 were returned last quarter.</p> <p>Whilst performance has improved on the previous quarter, compared to the same quarter last year fewer records of the PDI meetings have been returned to HR. This follows reprioritisation of workloads following the Grenfell Tower incident and associated workloads. PDI meetings were put on hold or postponed to a later date in the year so that the focus could be put on the High Rise project work.</p>									
4	% of eligible operational staff in qualification	100%	95%	98.84% ↑			98.84%	100%			
		<p>(Source: Data calculated and supplied by L&D)</p> <p>This is a new corporate measure and provides overall analysis of core operational training. Further detailed analysis and discussion is undertaken quarterly at the Organisational Development, People Learning Group (ODPLG) which ensures relevant stakeholders from across the Service consider performance outcomes and associated impacts. Locally in the Learning and Development department detailed analysis is undertaken and liaison with individual managers as necessary to address requirements, competence related matters and issues of attendance.</p> <p>Training and assessment activities in RBFRS are aligned with the Fire Professional Framework which outlines the operational core skills requirements of firefighters and officers. National Occupational Guidance provides the standards applicable to the nine core skill areas (Water, Working at Height, Road Traffic Collision (RTC), Hazardous Materials, Casualty Care, Breathing Apparatus (BA), Driving, Incident Command and Core Skills).</p> <p>Our performance has increased from 95% in quarter 1 to 98.84% in quarter 2.</p>									

*See appendix E for corporate health measure definitions

Strategic Performance Report Q2 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		<p><u>Areas of good performance include:</u></p> <ul style="list-style-type: none">Breathing apparatus 99% - one fire fighter did not achieve the required standard, development plan in place, re-assessment programmed in the third quarterIncident Command 99% - (performance has increased from 92% in quarter 1). One individual's qualification expired following return to duty after a period of sickness, an assessment has been scheduledEmergency Response Driving 99% - (increase from 98% in quarter 1). Two individual's qualifications expired due to workloads preventing attendance on course, re-assessment programmed in the third quarterWater Rescue 99%- Two individuals not yet competent in this area, qualifications expired as a result of being unable to attend a course within time. Additional measures are in place to assist those who are unable to swim or are not confident in water. Individuals and line managers are actively encouraged to identify issues so appropriate development and support can be put in place <p><u>Areas of improvement:</u></p> <ul style="list-style-type: none">Working at Height 98%- performance in this area has improved from 91% in quarter 1. Nine individuals have expired qualifications, due to not being able to attend course dates as a result of operational commitments or personal circumstances. Assessments are programmed in the third quarter. Learning and Development Managers have concentrated efforts on planning and delivery of training resulting in improved performance in this area <p>The ability to effectively train staff is reliant on the ability to release individuals from duty to central training. A combination of efforts to ensure there is flexibility to do so, and other performance such as sickness absence is reduced to facilitate attendance continue to be examined. The Learning and Development team continue to identify improvements to support effective training delivery and have implemented changes to address identified shortfalls in planning, recording and the development of individuals requiring further support to achieve competency, resulting in the improved performance in quarter 2.</p> <p>Staffing in the Learning and Development department is also kept under review to ensure as much as possible, there is the ability to plan for and cover turnover.</p> <p><u>RTC qualification:</u></p> <p>In April 2017 a new RTC 'qualification' was introduced. This qualification is being rolled out during this year and will be delivered to all eligible staff by the end of Q4. From 2018/19 it will be included in the overall percentage of operational eligible staff in qualification.</p> <p>Performance of eligible operational staff having achieved the qualification has increased from 28% at the end of quarter 1 to 53% at the end of quarter 2, indicating good progress. Due to capacity and the need to prioritise training delivery, there has been ongoing focus on</p>									

*See appendix E for corporate health measure definitions

Strategic Performance Report Q2 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		maintaining skills and competence in this area. Through attendance at incidents and brigade exercises and as part of the maintenance of competence programme RTC skills are refreshed every 3 – 6 months (depending on the module).									
Health and Safety											
5	All accident related injuries, including RIDDOR (RIDDOR & Total)	5/81	2*/9	2*/17			4*/26	3*/41	2/14	2/26	↕↔**
		(Source: Data calculated and supplied by H&S)									
		During quarter 2, there were 17 work related accidents, 2 of these being RIDDOR* reportable due to the injured individuals being unfit for work for more than 7 days (see explanation below for RIDDOR). Therefore quarter 2 has seen an increase of 8 accidents when compared with the previous quarter.									
		Of the 17 accidents in quarter 2, 4 were classified as medium severity, with 2 of those being a RIDDOR reportable incident. The remaining 13 were classed as minor. Compared to the previous quarter the number of minor accidents has seen an increase of 9 whereas the number of moderate accidents has decreased by 1. The RIDDOR reportable incidents occurred during a drill when pulling a ladder from the appliance felt a twinge in their shoulder which later got worse and, twisted knee when descending into a ditch to retrieve equipment following an RTC.									
		Examination of the trends and follow up action is taken in all cases as appropriate. Learning from accident investigations are highlighted accordingly and opportunities taken to inform and improve working practices. The only trend identified in this reporting period is related to exposure to heat. 4 of the 17 were in this category - all 4 being minor incidents. 1 occurred at an operational incident when working as part of the BA team and fire fighting in extreme temperatures suffered minor burn to ear. 2 were whilst training when over application of water made the gloves very wet causing steam and discomfort to the hands. The final one being a routine incident when cleaning the tiles in the kitchen put hand on a vent of the cooker.									
		*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.									

*See appendix E for corporate health measure definitions

Strategic Performance Report Q2 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q2 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Spend											
6	% of spend subject to competition	70%	88.35%	89.15% ↑			88.67%	70%			
7	Compliant spend as % of overall spend	100%	99.4%	100% ↑			99.7%	100%			
		<p>(Source: Calculated by Procurement)</p> <p>Spend Subject to Competition: This new corporate target demonstrates how much of the supplier spend has been subjected to competition. The target for this year of 70% has already been exceeded and 88.67% of the supplier spend is now subject to competition. The Authority is working in collaboration with the two other Thames Valley FRS's and have a joint procurement work plan which is now being broadened to include Thames Valley Police. Where possible all new areas of spend being subject to competition are being carried out and joint contracts are being put in place. This year over 80% of tendering activity will be through collaborative working with either our Thames Valley partners or via a national framework and the Fire Reform Procurement work stream.</p> <p>Compliant Spend: This new corporate target has been designed to check that all expenditure is compliant with the RBFA Contract Regulations. The Authority should be seeking to achieve 100% compliance through ensuring that no purchase order is approved for any supplier for expenditure over £10k unless it has been subjected to competition. An unplanned replacement of some operational equipment that could not be delayed resulted in the target not being achieved in the first quarter. In quarter 2 the target has been achieved. A low value repeat spend review is carried out monthly and any potential new categories of expenditure that could exceed the threshold for quotes are being subjected to competition over the coming months.</p>									
Freedom of Information											
8	% Freedom of Information (FOI) requests and Environmental Information Regulations (EIR) referred to the Information Commissioner	0%	0%	0%			0%	0%	0%	0%	↔
		<p>(Source: Manual Input from Information Governance)</p> <p>A request being referred to the ICO does not necessarily mean a failure of our process – that would be indicated by the ICO finding against us. We will continue to aim to ensure requests are answered on time and satisfactorily.⁴</p>									

*See appendix E for corporate health measure definitions

Financial Position as at end of September 2017-18 (Revenue)

A fundamental review is currently being completed to establish a definitive position for the revenue budget monitoring for quarter 2 of 2017/18.

Since the budget was initially set for this financial year the service delivery and risk and performance restructure was implemented in September 2017, meaning that the budget and coding structure had to be amended to reflect the changes made. There have also been a number of other emerging factors that have occurred during 2017/18, such as the response to the Grenfell Tower incident, which have required us to review the budgets initially agreed.

A full budget position with supporting comments and analysis will be provided for quarter 3 of 2017/18 reflecting the new structure and the impact of the emerging pressures within the financial year.

Financial Position as at September 2017-18 (Capital)

CAPITAL SCHEMES	Total Budget £'000	Total Spend to date £'000	Est. Spend to complete £'000	Total Est. Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. End Date	Notes
Fire Station Refurbishments - Hungerford Community Fire Station	809	809	0	809	0	0%	Qtr 1 2017/18	Station refurbishment completed on schedule in Qtr 1. Additional ground works & roof replacement were incorporated into the project as part of the build programme. Reduced running & annual maintenance costs will provide an ongoing revenue benefit.
Fire Station Build - Theale Fire Station	7,200	441	6,759	7,200	0	0%	Qtr 2 2019/20	Negotiations are nearly complete to purchase the site & this will be brought to Management Committee for approval on 17th April 2018. Subject to planning progressing as expected, work will commence in Qtr 1 2018/19 & will complete in late Summer 2019. The approval to appoint the main contractor will also come to Management Committee on the 17th April 2018.
Whitley Wood Fire Station Firehouse	350	2	348	350	0	0%	Qtr 3 2018/19	Main contractor procurement commences in November 2017. Construction is expected to commence in Spring 2018 and be completed in Autumn 2018.

Strategic Performance Report Q2 2017/18

Quadrant Two – Corporate Health

CAPITAL SCHEMES	Total Budget £'000	Total Spend to date £'000	Est. Spend to complete £'000	Total Est. Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. End Date	Notes
Fire Station Refurbishments minor works - Appliance bay door replacement programme	480	300	180	480	0	0%	Qtr 1 2018/19	As reported in the last quarter, there have been installation issues with the appliance door programme which were independently reviewed by the relevant professional body. Following this review, the contractor has been working to address a number of recommendations in relation to the installation of the new bay doors. Following this work, installation of the remaining new bay doors will recommence, with an estimated completion date of quarter 1 2018/19.
Fire Station Refurbishments - minor works	355	250	105	355	0	0%	Qtr 2 2018/19	Kitchen installation works at Bracknell, Maidenhead and Langley were completed in quarter one. Subsequent to quarter one, two further capital bids have been approved by Management Committee for minor works at Wokingham Road Fire Station (station wall) and Newbury Fire Station (rear bay drainage system). Further capital bids will be presented to Management Committee later in the year.
ICT - IBIS redevelopment or replacement	131	55	76	131	0	0%	Qtr 4 2017/18	System development is being progressed by a specialist c# programmer and is expected to complete in this financial year.
ICT - Helpdesk System	45	28	17	45	0	0%	Qtr 3 2017/18	Work is progressing with new functionality being rolled out across the Service. Completion is expected in Qtr 3 2017/18.

Strategic Performance Report Q2 2017/18

Quadrant Two – Corporate Health

CAPITAL SCHEMES	Total Budget £'000	Total Spend to date £'000	Est. Spend to complete £'000	Total Est. Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. End Date	Notes
ICT - Sage 1000 upgrade	65	17	48	65	0	0%	Qtr 3 2018/19	The upgrade to Sage 1000 was successfully implemented in Qtr 4 2016/17. Plans for phase 2 of the project are being developed and will be completed in Qtr 3 2017/18.
ICT - Learning Management System (LMS)	45	0	45	45	0	0%	Qtr 4 2017/18	The Project lead recruitment process is still ongoing which has led to a delay in the delivery of the project. Alternative options are being considered.
ICT - Firewatch Development	60	30	30	60	0	0%	Qtr 3 2017/18	Modules have been purchased for this work to begin and it is expected to complete on target.
ICT - Mobile Data Terminal (MDT) Devices	60	53	7	60	0	0%	Qtr 4 2017/18	Replacement of MDT's and supporting hardware on all operational appliances including training vehicles. Equipment is being purchased and rolled out across the Service.
ICT - Cyber Security	60	0	60	60	0	0%	Qtr 4 2018/19	The tender process for this work is being developed and is expected to start in Qtr 4. The project will completed in 2018/19.
ICT - Asset Replacement	236	0	236	236	0	0%	Qtr 4 2018/19	Annual asset replacement plan to be continued over the next two financial years as identified in the ICT strategy for asset management.

Strategic Performance Report Q2 2017/18

Quadrant Two – Corporate Health

CAPITAL SCHEMES	Total Budget £'000	Total Spend to date £'000	Est. Spend to complete £'000	Total Est. Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. End Date	Notes
Fleet & Equipment - Fire Appliances	2,925	830	1,617	2,447	-478	-16%	Qtr 4 2019/20	4 new fire appliances were delivered in Qtr 1 2017/18. This is a shared exercise with Thames Valley partners which will see RBFRS procure 7 further vehicles over the next 3 years (3 in 17/18, 2 in 18/19 and 2 in 19/20)
Fleet & Equipment - Special Appliances - Operational Support Unit	250	19	231	250	0	0%	Qtr 2 2018/19	A multi-functional approach is being developed with two Operational Support Unit (OSU) vehicles being purchased in this financial year, using approximately half of the available budget. The remaining budget will then be used to purchase a hook lift pod system, compatible with the new OSU vehicles.
Fleet & Equipment - Other Ancillary Vehicles	375	50	325	375	0	0%	Qtr 4 2020/21	The fleet strategy has identified a number of vehicles which are beyond serviceable use, and these are being reviewed and replaced as necessary.
Total (Under)/Over	13,446	2,884	10,084	12,968	-478			

Transition Bids Spend Summary

(as of 3 November 2017)

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q2 £k	Update
K10-601	Core Skills Training Programme Core skills development is a key plank of the OD programme and central to delivering new behaviours. This bid will support early delivery of key core skills and a long term core skills development and refresher programme, mapped to the Investors in People standard, leadership development and embedding into the L&D function	Becci Jefferies	01/09/15 26/04/16	150,000	72,490	Delivered to date: <ul style="list-style-type: none"> • Project management training - 92 people attended to date • Procurement framework skills – 12 people attended to date • Procurement overview – 20 people attended to date • Raising requisitions – 35 people attended to date • Finance for budget holders – 58 people attended to date • Appraisal training on new PDI process - 112 people attended to date • Appraisal (new PDI process) + corporate objectives + vision 2019 from Jan 16 – 43 people attended to date • Mindfulness course - 70 people attended to date • Resilience – 58 people attended to date • Managing Sickness course –58 people attended to date • Crucial Conversations course - 64 people attended to date • Working with Members course - 41 people attended to date • Time management course - 32 people attended to date • Coaching course - 8 people attended to date • Mentoring course - 16 people attended to date To be Delivered <ul style="list-style-type: none"> • The review of Core Skills requirements has identified the need for implementation of several new courses: Interview Skills, Disciplinary Training, Writing Effective Reports, Managing High Performance and Equality Diversity and Inclusion- Unconscious Bias Training. • It is anticipated roll out of these course will commence in quarter four.

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q2 £k	Update
K12-601	HR Advisor Support To ensure an HR resource with appropriate skills and knowledge is available until end March 2018 to support Managers to execute necessary staffing restructures and re-organisation to effect organisation change.	Becci Jefferies	02/02/2016	162,500	74,434	Delivered to date: <ul style="list-style-type: none"> • Role/support is working with Heads of Service and departmental managers to assist with restructure activity including planning, reports design and consultation • Reviewed the operational leave policy • Role assisted with TVFCS transition plan activities as per the agreed plan and as appropriate • Support and consultation provided for Risk and Performance and Service Delivery restructures including consultation meetings, formal consultations and selection processes • Support arrangements reviewed during Q1 and role advertised in Q1 • Completion of support and consultation for Risk and Performance and Service Delivery restructures To be delivered <ul style="list-style-type: none"> • To date activity to refill the vacancy has been unsuccessful. The recruitment process has been reviewed with further recruitment activity now underway.

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q2 £k	Update
K15-601	Benenden Healthcare To secure corporate membership with Benenden Healthcare for one year to provide discretionary private healthcare to RBFRS employees with the aim of reducing sickness absence. This will be subscription based.	Becci Jefferies	12/04/2016	37,000	36,791	Delivered to date: <ul style="list-style-type: none"> • Approved by the Management Committee in July. • Aligning introduction to the provision of new occupational health arrangements • New occupational provision available from 1st March 2017. Benenden arrangements aligned to ensure good integration. • Contract signed and arrangement commenced • First quarter performance review completed To be delivered <ul style="list-style-type: none"> • Ongoing work with Occupational Health to sign post provisions of Benenden at Occupational Health referrals • Analysis being undertaken on the effectiveness of the provision to inform the future budget process

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q2 £k	Update
K16-602	Systems Business Partner - resource Two year temporary post – systems business partner, a customer facing role to deliver and rollout Firewatch upgrades, IBIS improvements and support development of other service applications from an end user perspective	Nikki Richards	07/06/2016	76,720	42,554	Delivered to date: <ul style="list-style-type: none"> • Post filled and started on 29/08/16 • Activity to understand role requirements and current system • Working on Firewatch 7.6 testing prior to implementation particularly around wholetime payments processing • Providing FireWatch 7.5 support • Checking if mileage claims could also be done within FW • Retained payments in Firewatch 7.6 • Documentation of new FireWatch user manuals • Set up and testing new Fire Watch modules (Availability, mobilisation, self-service) • Provision of FireWatch 7.6 go live • Testing new Availability Service for Retained To be delivered <ul style="list-style-type: none"> • General FireWatch 7.6 ongoing support (and testing new fix releases from Infographics) • Training on new Availability Service for Retained • Setup and testing of new Mobilisation and Self Service modules

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q2 £k	Update
K17-602	Data & Performance Analysis Manager Resource for a 24 month period to rectify issues with data assurance emerging because of linkages and feeds between systems	Simon Jefferies	05/07/2016	92,000	40,096	Delivered to date: <ul style="list-style-type: none"> • Recruitment completed and resource started 24/10/2016 • Audit of data flows for Corporate measures and development of SQL reports completed • A MoU has been signed for a TV data sharing agreement, and a shared post with OFRS is being used to develop risk mapping. To be delivered <ul style="list-style-type: none"> • Oversee development of new Cadcorp web map layers reporting system. • The development of the team and the role has allowed some progress against the TV FRS solution. • The initial scoping of risk management tools has identified areas of focus for teams. The restructure will allow further development of SQL reporting as a preferred reporting process to Scorecard. • Pending a further interim restructure, the full scope of the role will need to be reviewed.
K19-601	Review of competency assessments Funding for a resource for 6 months to complete a full review of the current methodology used when assessing competence at operational ranks through understanding the “as is” situation, research on potential alternative models with and final recommendation for consideration provided	Becci Jefferies	05/07/2016	30,000	3,182	Delivered to date <ul style="list-style-type: none"> • Scope of work agreed and PID written and approved • Phase 1 work – research undertaken To be Delivered: <ul style="list-style-type: none"> • Resourcing and Development Manager reassessing current approach re assessment of competence and appropriate resource to complete the project

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q2 £k	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	02/08/2016	74,000	15,379	Delivered to date: <ul style="list-style-type: none"> • Resource recruited to start from April 2017 • Undertaking activities related to invoicing, accounts payable and receivable, cash management and credit control for the Fire Authority • Support to Trading company and dealing with invoices, carrying out credit control and cash management To be delivered: <ul style="list-style-type: none"> • Support implementation of efficient 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, knowledge and advice	Conor Byrne	02/08/2016	90,000	5,148	Delivered to date: <ul style="list-style-type: none"> • Contract register and work plan now being updated weekly • Contract repository review completed • Set up contract award process • Three tenders completed under supervision • Taken over from buyer role and checking all requisitions to ensure compliance • Worked on undress uniform project • Issued letters to critical suppliers to check business continuity plans To be delivered: <ul style="list-style-type: none"> • Set up quarterly report monitoring to capture any new categories • Produce quarterly reports for SPB • Support the delivery of the Procurement work plan and service plan • Support contract management framework roll out

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q2 £k	Update
K25-601	Temporary resource for a full time apprenticeships project manager to research, scope, plan and implement the RBFRS Apprenticeship Scheme	Becci Jefferies	01/02/2017	23,445	15,490	Delivered to date: <ul style="list-style-type: none"> • Recruitment undertaken to identify resource however no appointment made • Project initiation document signed off at the June Programme Board • Options and recommendations relating to apprenticeship schemes presented at the Senior Leadership Team meeting during September To be Delivered <ul style="list-style-type: none"> • Further research and options being evaluated in conjunction with evolving fire sector developments • Two apprentices are working within HR and L&D with further apprentices sought in other areas of the service • Collaboration opportunities with other Fire and Rescue Services being explored
K26-601	Temporary resource to manage the introduction of a Learning Management System. The system will provide the ability to develop and host flexible e-learning reducing the need, in some areas, for face to face training.	Becci Jefferies	16/09/2016	69,516	0	Delivered to date: <ul style="list-style-type: none"> • Resourcing and Development Manager started in mid May and objectives set regarding the provision of a Learning Management System • Engagement with other organisations to understand the developments in e-learning • Further review of requirements completed To be Delivered <ul style="list-style-type: none"> • Unsuccessful attempts to secure an individual to date with alternative recruitment options being evaluated

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q2 £k	Update
K27-601	Dedicated mental health support post A dedicated resource, based at the Bracknell Fire Station to provide Mental Health Support in line with the Health, Safety and Wellbeing Strategy	Becci Jefferies	16/05/2017	29,195	1,423	Delivered to date: <ul style="list-style-type: none"> • Mental Health and Wellbeing Adviser recruited in August To be Delivered <ul style="list-style-type: none"> • Work will support the Health and Wellbeing strategy and action plan with focus to be on policy, training and health promotion
Total ongoing (open) projects spend					306,987	
Closing total for projects completed during Q2					0	
Closing total for completed projects prior to Q2					747,619	
Total spend					1,054,606	
Total budget allocated				1,581,995		
Total budget available for allocation				418,005		

Procurement Plan

(as of 18 October 2017)

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

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 No.	Service	Contract Owner	Proc. Contact	Contract Detail	Spec. Owner	Supply Type	Contract Status	Proc. Process	Collaboration	Project Start Date	Project Target Comp. Date	Est. Total Contract Value	CAP or REV	Monthly Progress Update / Comments
2016/17	116	Facilities	Katie Mills	Lee Wilkey	Office Furniture	Matt Barber	Supply	No Contract	Framework	Y	01/04/2017	30/10/2017	£100,000	C&R	Visits to suppliers have taken place. Final evaluation in progress. Contract award due late October
April 2017/June 2017 Qtr 1	348	TVFC	Tony Vincent	Jane Lubbock	TVFCS - ESISEC Unicorn (Calcot/Kidlington)	Lee Arslett	Service	Renewal	Framework	Y	01/04/2017	31/11/2017	£100,000	R	Updated pricing from BT being evaluated. Award by end November
	342	Response	Jim Powell	Jane Lubbock	PPE	Rob Read	Service	Renewal	Framework	Y	01/06/2017	31/01/2018	£4,000,000	R	Details of new framework options being evaluated. Report due to Management Committee Dec 17 for contract award approval
	346	Facilities	Katie Mills	Emma Elliott	Buffet lunches	Matt Barber	Supply	Renewal	Tender	Y	01/06/2017	31/10/2017	£150,000	R	Evaluation of tenders complete. Framework award report being prepared so award complete by end of October 17

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Quadrant Two – Corporate Health

	Project No.	Service	Contract Owner	Proc. Contact	Contract Detail	Spec. Owner	Supply Type	Contract Status	Proc. Process	Collaboration	Project Start Date	Project Target Comp. Date	Est. Total Contract Value	CAP or REV	Monthly Progress Update / Comments
July 17/ Sept 17 Qtr 2	374	Response	Dave Myers	Moses Kuria	BA Compressor Maintenance	Rob Read	Service	New	Framework	Y	01/08/2017	31/12/2017	£25,000	R	Oxfordshire FRS have released a joint tender October 17 via a Framework. Award to be complete by December 17
	368	L&D	Becci Jefferies	Emma Elliott	Safeguarding Training	Liz Warren	Service	New	Quotation	N	17/08/2017	30/11/2017	£20,000	R	Evaluation completed of two tenders. Supplier to present course details before final award.
	341	Response	Jim Powell	Moses Kuria	Foam/Hoses and Operational Equipment/Fire Safety Equipment	Rob Read	Supply	New	Tender	Y	01/10/2017	30/12/2017	£100,000	R	Final specification being created with OFRS, Bucks FRS and TVP. Tender to be released to market via Framework mid Nov. Award by end of December 17
October 2017 to December 201 Qtr 3	384	Prevention	Mark Gaskarth	Emma Elliott	Fire Retardant Bedding & Nightclothes	Iain Harrison	Supply	New	Quotation	N	01/10/2017	30/11/2017	£30,000	R	Tender to be issued 24th October 17 and award due by mid-November. Award by 30th November
	390	L&D	Becci Jefferies	Emma Elliott	Heavy Vehicle Instructor Training	Dom Manton	Service	New	Tender	N	01/10/2017	30/11/2017	£50,000	R	Tender Issued 16th October, due back 30th October
	395	Fleet	Dave Myers	Moses Kuria	Fuel Management Maintenance	Tim Mansbridge	Supply	Renewal	Quotes	N	01/10/2017	31/12/2017	£10,000	R	Proprietary system in place and options being reviewed and whether this will be a waiver
	318	Facilities	Katie Mills	Jane Lubbock	Water Deregulation	Matt Barber	Service	No contract	Framework	Y	01/11/2017	31/03/2018	£350,000	R	Collaborative tender with TVP and TV FRS being planned
	398	Operational Support	Mark Gaskarth	Jane Lubbock	Confidential Business Resilience	Jim Powell	Service	New	Tender	N	01/10/2017	26/01/2018	£300,000	R	Document review in progress .Tender due to be issued 3rd week November, to be completed end January 2018
	402	Prevention	Mark Gaskarth	Jane Lubbock	Fire Safety and Inspection Consultancy	David Sharp	Service	New	Framework	N	01/10/2017	31/12/2018	£200,000	R	Framework documents being prepared, award due the end of November
	399	Corporate Services	Katie Mills	Jane Lubbock	Communication Services	Katie Mills	Service	New	Tender	N	01/12/2017	31/03/2018	£100,000	R	Review of options to market in progress , plus design of requirement

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Quadrant Two – Corporate Health

	Project No.	Service	Contract Owner	Proc. Contact	Contract Detail	Spec. Owner	Supply Type	Contract Status	Proc. Process	Collaboration	Project Start Date	Project Target Comp. Date	Est. Total Contract Value	CAP or REV	Monthly Progress Update / Comments
	323	Fleet	Dave Myers	Moses Kuria	Hardware Maintenance Contract (Transport)	Dean Parratt	Service	Renewal	Quotation	N	01/09/2017	31/12/2017	£8,000	R	Details of requirements to be scoped
	322	Operational Support	Jim Powell	Emma Elliott	Medical Supplies	Tracy Pandya	Service	Renewal	Tender	Y	01/11/2017	30/12/2017	£20,000	R	Framework access requested 16 Oct 2017. Tender in November 17
	392	Property	Simon Jefferies	Jane Lubbock	TVP Construction Framework Collaboration	Alex Brown	Supply	Framework	OJEU	Y	01/09/2017	30/11/2017	£12,000,000	C	Final stage of evaluation being completed by TVP
	327	BIS	Tony Vincent	Emma Elliott	HP Laptops and Accessories (FW RM1054)	Lee Arslett	Supply	Renewal	Tender	Y	01/11/2017	30/12/2017	£100,000	R	FW potentially will be extended
	328	BIS	Tony Vincent	Emma Elliott	Surface Pro's and Accessories (FW RM1054)	Lee Arslett	Supply	Renewal	Tender	Y	01/11/2017	30/12/2017	£90,000	R	FW potentially will be extended
	329	BIS	Tony Vincent	Emma Elliott	Ruggedized Laptops	Lee Arslett	Supply	No contract	Framework	Y	01/11/2017	30/12/2017	£60,000	R	FW potentially will be extended
	330	BIS	Tony Vincent	Emma Elliott	Microsoft Tablet - NFC53 Framework (RM1054)	Lee Arslett	Supply	Renewal	Tender	Y	01/11/2017	30/03/2018	£100,000	R	TVP reviewing options for future replacements
	314	FAC / L&D	Simon Jefferies	Jane Lubbock	Fire House New System	Dom Manton	Supply	New	Tender	N	01/10/2017	28/02/2018	£250,000	C	PIN issued and review of market complete. Tender docs being prepared to issue 10th November 17
	308/9	HR	Becci Jefferies	Jane Lubbock	Agency Staff	Jacky Manning	Service	Renewal	Framework	Y	01/12/2017	30/03/2018	£300,000	R	TVP will put in place a new framework to be available to the TV FRS's by March 18
	361	HR	Becci Jefferies	Moses Kuria	Fitness Equipment for new fire fighter standards	Helen Morbin	Supply	New	Tender	Y	01/10/2017	30/12/2017	TBC	TBC	Awaiting details of new standards
	366	Facilities	Katie Mills	Emma Elliott	5 year fixed Wire Test Whole Estate	Matt Barber	Service	New	Tender	N	01/10/2017	31/01/2018	£100,000	R	Requirements being scoped. Tender to be issued in November 17
	321	BIS	Tony Vincent	Moses Kuria	Network & Server Resilience	Lee Arslett	Service	Renewal	Tender	N	01/11/2017	30/11/2017	£80,000	R	Tender documents being prepared to be released to market mid-November.

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Quadrant Two – Corporate Health

	Project No.	Service	Contract Owner	Proc. Contact	Contract Detail	Spec. Owner	Supply Type	Contract Status	Proc. Process	Collaboration	Project Start Date	Project Target Comp. Date	Est. Total Contract Value	CAP or REV	Monthly Progress Update / Comments
	364	Facilities	Katie Mills	Moses Kuria	Yellow News Subscription	Angela Smith	Service	Renewal	Tender	Y	01/10/2017	30/12/2017	£20,000	R	To be issued in Q3, suppliers Gorkan, Precise Kanta/Meltwater/Cision
	403	Facilities	Katie Mills	Jane Lubbock	Display Energy Certification	Matt Barber	Service	New	Quotes	N	01/10/2017	30/12/2017	£20,000	R	To be issued Q3
	336	Operational Support	Jim Powell	Emma Elliott	Boarding Up Services	Paul Jacques	Service	Renewal	Quotes	Y	01/10/2017	30/01/2018	£3,000	R	Low value and will transfer to TVP contract in Dec 17
	401	Facilities	Katie Mills	Moses Kuria	Storage, racking, archiving or shelving	Matt Barber	Supply	New	Quotes	N	01/11/2017	31/12/2017	£80,000	R	To be issued Q3
	310	Fleet	Dave Myers	Jane Lubbock	Supply of Scrap Cars	Dom Manton	Supply	Renewal	Tender	Y	01/10/2017	31/01/2018	£100,000	R	Options appraisal being prepared, likely to be contract extension and variation to deliver savings
	339	BIS	Tony Vincent	Jane Lubbock	MDT Software	Lee Arslett	Service	Renewal	Tender	Y	01/10/2017	31/01/2018	£70,000	R	Tender in progress. Being led by Bucks FRS. Contract award due November 2017
	340	Facilities	Katie Mills	Lee Wilkey	Grounds Maintenance	Matt Barber	Supply	Renewal	Framework	N	01/01/2018	31/03/2018	£100,000		Review option to extend contract
	333	BIS	Tony Vincent	Moses Kuria	Mobile Telephony	Lee Arslett	Service	Renewal	Framework	Y	01/01/2018	30/03/2018	£50,000	R	To be issued in Q4
January 2018 to March 2017	344	Facilities	Katie Mills	Moses Kuria	Building Materials	Matt Barber	Supply	No contract	Procurement for Housing Framework	Y	01/01/2018	31/03/2018	£20,000	R	No contract in place and small spend by different individuals needs to be put into a compliant solution
	337	HR	Becci Jefferies	Jane Lubbock	Core Skills	Lorraine Sullivan	Service	Renewal	Tender	N	01/01/2018	30/03/2018	£50,000	R	Review future requirements as option to extend contracts
	381	HR	Becci Jefferies	Lee Wilkey	Simulation Software for Incident Command	Dom Manton	Service	Renewal	Tender	N	01/01/2018	30/03/2018	£15,000	R	To be issued in Q4
	334	BIS	Tony Vincent	Moses Kuria	VOIP Maintenance	Lee Arslett	Service	Renewal	Framework	Y	01/01/2018	30/03/2018	£24,000	R	To be issued in Q4
	319	BIS	Tony Vincent	Jane Lubbock	Asset Management System	Lee Wilkey	Supply/Service	No contract	Tender	Y	20/12/2017	01/05/2018	£50,000	C	To be issued in Q4

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Quadrant Two – Corporate Health

	Project No.	Service	Contract Owner	Proc. Contact	Contract Detail	Spec. Owner	Supply Type	Contract Status	Proc. Process	Collaboration	Project Start Date	Project Target Comp. Date	Est. Total Contract Value	CAP or REV	Monthly Progress Update / Comments
	331	Facilities Management	Katie Mills	Moses Kuria	Automatic Meter Readers - Electricity	Matt Barber	Supply	Renewal	Framework	N	01/03/2018	31/03/2018	£20,000	R	To be issued in Q4
	132	Facilities	Katie Mills	Lee Wilkey	Support and Maintenance of the Trend BMS (Building Management System)	Katie Mills	Service	Renewal	Quotes	N	01/04/2017	31/03/2021	£16,000	R	Awarded to Kendra Ltd
	383	HR	Becci Jefferies	Moses Kuria	Rowing Machines	Helen Morbin	Supply	New	Quotes	N	01/08/2017	31/9/17	£13,000	C	Awarded to Concept 2 Ltd
	379	L&D	Becci Jefferies	Jane Lubbock	Driver Training Fork Lift and HGV Trailer	Dom Manton	Service	Renewal	Tender	N	01/08/2017	30/09/2017	£40,000	R	Awarded to 2Start

Since 1 April 2017 a total of 36 tenders have been completed and contracts are now in place.

Human Resources Performance

(See appendix G for supporting charts)

(Source: All data calculated and supplied by HR)

Measure	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	2016/17 Performance	
						Q2 16/17	YTD 16/17
Wholetime	382	373			373	386	386
Retained	65	68			68	66	66
Control	38	43			43	36	36
Non Uniformed	129	136			136	133	133
Total Number of Staff in Post	614	620			620	621	386
STAFF IN POST	<p>NB.18 individuals hold more than one role (Dual Contract).</p> <p>This quarter (out of a total of 15 leavers) 14 individuals left the service and one individual left their RDS contract only. RBFRS employed 20 new starters this quarter. This extrapolates to a predicted turnover of around 8.8% which is below the public sector average of 9.4 % (As at 2013)</p> <p>One BME member of staff has been recruited this quarter which has increased the ethnicity figures this quarter therefore showing an increase of 0.10% from last quarter and 1.46% from Q2 last year. This means we have exceeded our 5% target for this year again.</p> <p>The numbers of female Firefighters have dropped this quarter by 0.17% as one WT female Fire fighter left the service and no female Firefighters have been recruited during this period. Work continues to identify how we can better attract a wide range of individuals for Retained Duty System On-Call Fire fighter positions and the recent process to identify those who wish to transfer into operational Fire fighter positions from other services is likely to result in an improved position which will be reported in Q3.</p> <p>Of the 20 new starters across the organisation during this quarter nine females were recruited including four to Fire fighter (Control) positions.</p> <p>Disabled staff figures have increased as one disabled employee has been employed this quarter. RBFRS continues to work with staff to address disability issues to ensure reasonable adjustment activity is undertaken to support staff and encourage retention.</p> <p>Invitations have been issued for staff to join an Equality, Diversity and Inclusion group to help the FRS develop and progress the equality agenda, looking at areas of recruitment and retention as well as the wider Equality, Diversity and Inclusion Strategy.</p>						

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Quadrant Two – Corporate Health

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	2016/17 Performance	
							Q2 16/17	YTD 16/17
AGE PROFILE	25 and Under	19	23			23	28	
	26-35	166	161			161	156	
	36-45	212	214			214	220	
	46-55	184	189			189	174	
	56-65	30	31			31	37	
	66 and Over	3	2			2	6	
	Total	614	620			620	621	
	<p>As previously identified and in common with other Services, RBFRS has an ageing workforce profile. This results in a potential organisational risk around the required fitness levels of operational staff as the organisation will have a larger number of operational individuals over 50. The Health, Safety and Wellbeing Strategy and Action Plan recognise the need to focus attention in this area. Actions include workforce planning, increased support of fitness and initiatives to encourage healthy lifestyles and general wellbeing. The Movement Specialist and Occupational Health Physiotherapy provisions together with the new Benenden health care arrangements further provide support to all staff. Initial usage statistics suggest the Benenden scheme is being well used, and may therefore be a useful tool to utilise in the future for health interventions. Through NFCC, Cheshire FRS in conjunction with Occupational Health Network has issued an ageing workforce toolkit. This will be reviewed by the HR and the Fitness and Health Adviser and utilised as appropriate.</p> <p>The funding application has now been submitted for research work with Bath University and Chris Rhodes (Clinical Nurse manager) from Duradiamond. We are awaiting the outcome which should be October 2017 to support the commencement of the research into interventions for the older workers in 2018. The Intervention will include a physical and psychological element.</p> <p>The apprenticeship project lead continues to implement the apprenticeship schemes and explore further opportunities across the service. This will impact on our age profile. Two apprentices have been employed in HR and L&D with additional apprentices being recruited in Business Support and Facilities during Q3.</p>							

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Quadrant Two – Corporate Health

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	Y.T.D. Target	Q2 2016/17 Performance
FEMALE STAFF	Wholetime	3.66%	3.48%			3.48%	4%	3.37%
	Retained	4.61%	4.41%			4.41%		6.06%
	Control	71.05%	72.09%			72.09%		66.67%
	Non Uniformed	54.26%	53.67%			53.67%		53.38%
	Total	18.56%	19.35%			19.35%		18.03%
	Our gender profile is broadly in line with other Fire and Rescue Services and although no new Firefighters have been recruited this quarter we continue to work towards encouraging female applicants into the operational roles through RDS recruitment projects and reviewing approach to positive action.							

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	Y.T.D. Target	2016/17 Performance	
								Q2 16/17	YTD 16/17
ETHNICITY FIGURES	Wholetime	4.71%	4.82%			4.82%	5%	4.66%	4.97%
	Retained	1.53%	1.47%			1.47%		0%	0%
	Control	2.63%	2.32%			2.32%		2.78%	2.63%
	Non Uniformed	13.17%	13.23%			13.23%		7.52%	9.92%
	Total	6.02%	6.13%			6.13%		4.67%	5.10%
	RBFRS has historically struggled to attract successful applicants from Black and Minority Ethnic (BME) communities and continues to look at ways to attract successful applicants. 'Have a Go' events continue to be run for RDS recruitment with a large emphasis placed on how we are undertaking RDS recruitment ensuring ED & I is high on consideration of approaches. One new member of staff equating to 5% of all new staff recruited this quarter (20 staff in total) reports in the Black and Minority Ethnic (BME) category. Ethnicity figures have increased by 0.10% from last quarter and 1.46% on the same quarter last year. Overall performance stands at 6.13%, exceeding the current target of 5%. These figures do not include agency staff where we see additional individuals from BME communities								

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Quadrant Two – Corporate Health

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	2016/17 Performance	
							Q2 16/17	YTD 16/17
STAFF TURNOVER	Wholetime	7	9			16	6	7
	Retained	2	2			4	2	3
	Control	0	1			1	2	5
	Non Uniformed	3	3			6	8	15
	Total Number of Leavers (Heads)	12	15			27	18	30
	Staff in Post (SIP)	614	620			617*	621	621
	Percentage of Leavers vs.SIP	1.95%	2.42%			4.38%	2.90%	4.8%
<p>During Q2 there were 15 Leavers equating to 2.42% of staff (one left their RDS contract only)</p> <p>Based on current performance the year to date equates to 4.38% which indicates our performance is lower than the target of 9.4%.</p> <p>(in line with the public sector average 2013). *Year to date figure based on average number of SIP</p>								

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Quadrant Two – Corporate Health

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	2016/17 Performance			
							Q2 16/17	YTD 16/17		
DAYS LOST TO SICKNESS	Short	412	385					7	433	797
	Long	792	846					1	510	971
	Total	1204	1231					2	943	1588
	(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). 412 days were lost to short term sickness last quarter (Q1). By comparison, 385 days were lost to short term sickness this quarter. This is a 7% reduction in short term sickness.									
	The number of short term days lost has reduced this quarter for both Control (20% / 7 days) and NU (32% / 31 days). However, WT short term sickness has increased by 4% / 11 days from last quarter, this increase for WT staff appears in MSK absences where we have seen a shift from long term absence to short term suggesting people are returning to work quicker and while we cannot specifically attribute this to our interventions due to confidentiality, this is one of the key aims of interventions such as Benenden. Full commentary regarding sickness can be found in the Corporate Measures “the percentage of working time lost to sickness across all staff groups”.									
	Long term sickness is where an individual is absent from the workplace for more than 28 calendar days.									
	During Q2 the top causes of sickness across the organisation were:									
	Cause	No. Of days lost				% of days lost				
	Mental Health	438				35%				
	Musculoskeletal	357				29%				
Other	354				29%					
Heart Cardiac & Circulatory	91				7%					



Quadrant Three - Priority Programmes

(Summary as of 7 November 2017)

Integrated Risk Management Plan (IRMP)

Programme Name	Integrated Risk Management Programme (IRMP)		Reporting Period	July to September 2017 (Q2)
Programme Status	Last Quarter	This Quarter	Comments on Progress and Recommended Action	
Time			The majority of projects are on track with no issues reported. ESMCP remains at Amber status this quarter due to the complexity of the external factors affecting timescales. The Whitley Wood project is also experiencing issues with time and cost and strategic work with partners is required to manage these issues	
Cost				
Delivery/outcome				

Project Summary

Project	Project Manager	Deliverables to Date	To be Delivered	RAG	Issues for Action
ESMCP	Lee Arslett	<ul style="list-style-type: none"> National procurement process continues for handheld devices Programme is working towards initial timescales provided by the Home Office. Still awaiting full plan to be provided. Control upgrade works continuing to progress. ESN update has stated that transition will not commence during 2018. 	<ul style="list-style-type: none"> Awaiting plan to be published but not expected until Quarter 3 Recording assumptions and planning as much as possible with “assumed” timescales 	A ↔	<ul style="list-style-type: none"> Lack of information from the programme is hindering progress around planning as having to make assumptions. Still awaiting agreed full plan to be provided from the programme

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Quadrant Three – Priority Programmes

Project	Project Manager	Deliverables to Date	To be Delivered	RAG	Issues for Action
New Fire Station at Theale	Alex Brown	<ul style="list-style-type: none"> Design freeze now in place with TVP space agreed and SCAS to have a standby facility Build programme is on schedule. Planning application outcome is expected in November 2017 Site purchase is subject to delayed report from appointed valuation agent, but agreed timelines indicate purchase could be by December 2017 Revised budget approved by Management Committee in July 	<ul style="list-style-type: none"> Outcome of planning application to enable progress on site purchase Detailed design and cost estimation work can be completed Contractor procurement process to be underway in October 	G ↔	<ul style="list-style-type: none"> On track, no issues raised
Whitley Wood Project	Alex Brown	<ul style="list-style-type: none"> Complex high level options developed A project workshop was held with Senior Leadership Team in September to examine the five emerging options in greater detail. It was felt that the options could do more to maximise the use of this large site to its full extent and needed further detailed considerations. Agreed that all training functions should be located within one central training base 	<ul style="list-style-type: none"> Presentation to Management Committee and FA for funding approval Development of technical and detailed design A further review of the accommodation schedule with a 'sense check' at a strategic level was agreed to be completed by early October Once further review completed, it will be introduced to Members at the Property Development Working Group and then taken to Management Committee on 4th December 	A ↔	<ul style="list-style-type: none"> Review of accommodation schedule may cause a further delay to timescales but this is essential in order to clarify the scope to further shape design process All options to be reviewed and cost estimates to be re-provided. It is likely that the options will fall outside of the original indicative funding envelope within the SAIF

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Quadrant Three – Priority Programmes

Project	Project Manager	Deliverables to Date	To be Delivered	RAG	Issues for Action
Review of RDS recruitment and retention	Jim Powell	<ul style="list-style-type: none"> Formation of project board to monitor progress, provide guidance to the work packages Agreement on scope of work, objectives and deliverables 	<ul style="list-style-type: none"> PID Approval at the October programme board Work underway to formalise individual work packages and deliverables 	G ↔	<ul style="list-style-type: none"> On track, no issues raised
Firehouse Facility	Dom Manton	<ul style="list-style-type: none"> Scope of project agreed with PID approved Procurement process underway with Public Information notice sent to OJEU 14th September 2017 Early supplier engagement underway with information sent to interested suppliers to gain sufficient information to ensure the output specification and proposed timescales are suitable and realistic. 6 supplier's meetings confirmed (Haagen, Draeger, KFT, Benrhos, Alpine and Process Combustion) between the 2nd and 12th October 	<ul style="list-style-type: none"> Bidder event- open session to explain the project to be held in November Evaluation and short listing to be undertaken Interview/ meeting stage with bidders to discuss final designs that they propose and building work to be carried out Bidders to complete final tender submissions 	G ↔	<ul style="list-style-type: none"> On track, no issues raised
Closed Projects					
Project 1 – Service re-design	Jim Powell	<ul style="list-style-type: none"> Report outcome presented to Fire Authority and 	<ul style="list-style-type: none"> Projects to be commissioned 	G ↔	<ul style="list-style-type: none"> On track, no issues raised Project closed, separate PIDs to be raised as necessary

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Quadrant Three – Priority Programmes

Project	Project Manager	Deliverables to Date	To be Delivered	RAG	Issues for Action
Officer Cover Review – Phase 1	Doug Buchanan	<ul style="list-style-type: none"> Report now completed. SLT and Rep body responses included within report for consideration when implementing phase two objectives. Phase 1 of the project now complete 	<ul style="list-style-type: none"> Phase two PID and project plan being developed. Phase two due to commence November following Programme Board commissioning the PID 	G ↔	<ul style="list-style-type: none"> On track, no issues raised Phase 1 part of the project closed
Hungerford refurbishment	Alex Brown	<ul style="list-style-type: none"> Build and replacement works now complete Station now moved back in TVP now working from the station 	<ul style="list-style-type: none"> Station re-opening ceremony on 3 July Station open day to be held on 8 July Final snagging to be carried out during July 	G ↔	<ul style="list-style-type: none"> Project now completed and closed

Key Programme Risks

Project	Risk	Mitigation Actions	Owner	RAG Score
	Risks to the programme are reviewed as part of the programme board against each project and if an escalation is likely to affect the programme as a whole, the risk would form part of the corporate risk register report	Project risks are managed via each separate project and reported through the Programme board	Project managers	
		Programme risks are managed through SLT and the corporate risk register (see quadrant 4 – corporate risk register)	SLT	

Organisational Development Programme

Programme Name	Organisational Development Programme (OD)		Reporting Period	July to September 2017 (Q2)
Programme Status	Last Quarter	This Quarter	Comments on Progress and Recommended Action	
Time			Projects continue on delivery timescales	
Cost				
Delivery/ outcome				

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Leadership Development Programme for Middle Managers	Nikki Richards	<ul style="list-style-type: none"> Proposal for the programme agreed by Senior Leadership Team Outline for a potential development programme created and agreed 	<ul style="list-style-type: none"> Leadership forum to launch programme with middle managers is scheduled for early October. Three cohorts are due to start in Q3 	G ↔	No project issues at this time
Investors in People Accreditation (IIP)	Katie Mills	<ul style="list-style-type: none"> Planning underway to understand the requirements needed for the accreditation process 	<ul style="list-style-type: none"> Understanding of the requirements and deliverable priorities 	G ↔	No project issues at this time
Apprenticeship Scheme	Becci Jefferies	<ul style="list-style-type: none"> HR Administrator Apprentice with Newbury College now in post A Business Support Apprenticeship vacancy will be live by Friday 6th October Facilities Apprenticeship approved. A meeting with an identified provider (HIIT Training), has been set up to progress this Meetings underway to discuss potential apprenticeship opportunities within other departments. 	<ul style="list-style-type: none"> Report to be drafted for SLT approval regarding consideration to making an application to become and Approved Training Provider Review of policies and procedures to be underway Recruitment of Facilities apprenticeship 	G ↔	No project issues at this time

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Quadrant Three – Priority Programmes

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
		<ul style="list-style-type: none"> Project manager attending the Community Fire Safety Trailblazer group which meets monthly The application window to become an Approved Training Provider opens on 26th September 2017 and closes on 27th October 2017. A national sector specific conference and training event is being organised up by Lynne Swift, Director of People and Organisation within BMKFRS 			
Business Process Improvement	Katie Mills	<ul style="list-style-type: none"> Payroll process review undertaken Identification of issues with the process and associated actions agreed as an improvement plan Detailed process maps produced and agreed 	<ul style="list-style-type: none"> Programme of business process improvements to be identified 	<div>G</div> <div>↔</div>	No project issues at this time

Quadrant 4 - Risk**Corporate Risks**

(as of 7 December 2017)

See separate attachment for risk register. This will be incorporated into this document for A&G.

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
233	Capital Investment Strategy	Trevor Ferguson	Strategic Risks	CFO	If we fail to effectively manage our property assets to ensure they are in the right locations and fit for purpose, which may become increasing likely given the level of skills and experience and capacity within our estates team and the increasing age of our fire stations, then we can expect our expenditure to increase, our services to be less effective and our stations to further decline which would be significant in respect to our objective to ensure value for money and ensure fire stations are at the heart of communities	Failure to manage organisational resources	16	23	Treatments	Owner	Progress	Date Updated	Assurance Level	14	1	Simon Jefferies	31/01/2018
									Ensure a Property Asset Management Plan is developed	Simon Jefferies	Being developed. In service plan as work package for completion by April 2018. Good progress being made.	01/12/2017	2				
									Ensure maximum use of memorandum of understanding and ensure compliance with Statutory duty to collaborate by positive engagement with blue light and other partners.	Simon Jefferies	good progress with TVP on 4 projects and with other partners. All collaborative opportunities explored at outset of each project and engagement documented.	01/12/2017	3				
									Ensure effective project management through procurement of professional services and management through the programme board.	Simon Jefferies	PIDS agreed for Theale, Whitley Wood and feasibility studies for Caversham Rd and Crowthorne. Highlight reports and project updates to Board.	01/12/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
364	Payroll	Becci Jefferies	HR	People and Organisational Development	If the provider of the payroll service (Dataplan) fails to provide payroll services in line with the contract standard and work is not accurate, or they determine they are no longer able to fulfil the contract which is becoming increasingly more likely given there appears to be insufficient resilience in their provision and a reliance on RBFRS checking the accuracy of their work then we can expect to see more issues arising with incorrect payments, impacting potentially on the accuracy of pension records, a failure to comply with legislative requirements, incorrect information to inform budget monitoring, the potential need to	Failure to comply with statutory or regulatory requirements	20	22	Additional personnel added when required for resilience. Flexible staffing model to scale up when required.	Simon Jefferies	Appointed to post in Jan to support Strategic Property. FA funding approval for additional resources when required. 2 x new support posts added 1/12/17	01/12/2017	2	17	2	Becci Jefferies	18/12/2017
									Annual update to Strategic Asset Investment Framework	Simon Jefferies	Version 2 approved by Fire authority. Amendments for annual budget cycle in Nov 2017	01/12/2017	2				
									Treatments	Owner	Progress	Date Updated	Assurance Level				
									Raise performance management concerns with WYPF who are contracted to provide the payroll service	Becci Jefferies	Previous letter and action plan reviewed at meeting with Dataplan 27/9 and WYPF 2/10 - action plan progressing well and a number of improvements have commenced - regular meetings	06/11/2017	2				
									WYPF/Dataplan to produce an action plan to identify how they plan to address the performance issues	Becci Jefferies	finalised following meeting on 18 July 2017, new commitments re staffing and process arrangements- updated last on 1 November	06/11/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
					source another payroll provider and an increased work demand on RBFRS HR and Finance staff which are significant in respect to our financial management, our reputation with internal staff and the effectiveness and efficiency of HR and Finance departments delivering their wider services.				Maintain a log of issues, raising these with Dataplan and WYPF as appropriate	Jacky Manning	ongoing review of log at contract meetings. Finance maintain separate log and HR have separate detail log. Issues raised direct with Dataplan and copied to WYPF as appropriate- Reviewed at meeting on 27 sept - Positive actions underway	06/11/2017	2			
									Regular contract meetings	Becci Jefferies	Regular 6 weekly contract meeting (either face to face or via conference call - alternated) Meeting 2/10 with WYPF to include review of Dataplan meeting specification requirements against contract e.g. Error in pay corrections owned by DP	06/11/2017	2			
									Redeploy temporarily member of the finance team to check all pension/pay matters to ensure accuracy of work undertaken by Dataplan in respect of key performance areas (pension, temp promotions)	Conor Byrne	historic check on pension deductions ongoing - identified as an area of concern although current situation appears to have resolved a number of the issues and only backdated rectifications remain outstanding. Ongoing monthly reassurance checks taking place	06/11/2017	2			

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
408	Emerging risks and implications of Grenfell Tower	Simon Jefferies	Strategic Risks	CFO	If we fail to effectively deal with emerging community risks and additional burdens which are likely in the aftermath of the Grenfell Fire tragedy, this may result in the inability to meet our statutory duties and strategic objectives which will cause significant reputational damage and impact our financial stability	Failure to comply with statutory or regulatory	21	24	Review internal systems to ensure that these support ways of working and reduce room for error	Jacky Manning	Key areas - temp promotion/acting up. Manual updated. BPI review undertaken. 19/09 - FB42 2nd review due, improvements to acting up arrangements. RDS FW improvements due 1 October for testing November pay delayed.	06/11/2017	2	17	3	Trevor Ferguson	31/01/2018
									Action Plan - key areas not identified previously 1) Automation, 2) Dataplan Staffing 3) Training on areas of issue	Jacky Manning	1) Automation - FW has been updated with Payroll number field. Template reports agreed for future use (Oct pay) 2) Dataplan have additional staff - impact to be reviewed 3) Training - sessions booked for 27 Sept - all complete	06/11/2017	3				
									Treatments	Owner	Progress	Date Updated	Assurance Level				
									Ensure effective political, community and partner engagement processes are in place to ensure integrated delivery of service	Mark Gaskarth	Ongoing work with local authority and NFCC to progress multi-agency approach	01/12/2017	3				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
									Ensure current policies are revised, updated and integrated across function to include the implications of the impacts and burdens	Mark Gaskarth	This will form part of the New Ways of Working project. Not moving forward as quickly as liked. Reenergise and add more resource to assist with capacity.	01/12/2017	2			
									Ensure adequate people and financial resources within the community safety functions including proactively managing succession to mitigate any emerging risk	Mark Gaskarth	This will form part of the Succession Planning, Developing New Skills and Creating Capacity project. Not moving forward as quickly as liked. Reenergise and add more resource to assist with capacity.	01/12/2017	1			
									Ensure development programmes are re-aligned to include the appropriate new skills and knowledge to meet any new demands for staff	Mark Gaskarth	This will form part of the Succession Planning, Developing New Skills and Creating Capacity project. Not moving forward as quickly as liked. Reenergise and add more resource to assist with capacity.	01/12/2017	2			
									Ensure staffing models are flexible and agile enough to deal with a rapidly changing landscape	Mark Gaskarth	This will form part of the Succession Planning, Developing New Skills and Creating Capacity project. Not moving forward as quickly as liked. Reenergise and add more resource to assist with capacity.	01/12/2017	2			

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
									Ensure new work is embedded in service plans and any new performance measures are developed and reported on	Mark Gaskarth	The new projects are in their early stage of development. Mapping across to service plans will be carried out when the project plans have been developed. Not moving forward as quickly as liked. Reenergise and add more resource to assist with capacity.	01/12/2017	2			
									4 phase plan developed incorporating multiagency working/	Mark Gaskarth	New Project Support Officer in place to work with the 6 unitary authorities to coordinate the multi-agency working.	01/12/2017	2			
									Additional resources to be put in place with additional funding provided	Mark Gaskarth	Additional resources being put in place. The Community Safety team is now forming and RBFRS is much better placed to deal with the emerging risks. First tranche of work (high rise residential) now completed moving to NHS and commercial premises.	01/12/2017	2			

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
410	Collaboration, partnership working & shared service	Simon Jefferies	Strategic Risks	CFO	If collaboration, partnership working and shared service opportunities are not considered, developed and embedded which may become increasingly likely with the complexity and volatility in the current political and financial landscape. Then we can expect impacts on the effectiveness of our service provision and on our financial position which would then affect the delivery of our legal duties and the Authority's strategic objectives	Failure to manage organisational resources	20	22	Treatments	Owner	Progress	Date Updated	Assurance Level	18	2	Simon Jefferies	20/12/2017
Actively drive and engage with the Thames Valley strategic collaboration board									Simon Jefferies	Governance arrangements now in place to lead and oversee collaborative projects	01/12/2017	1					
Ensure adequate resources to ensure delivery of the collaboration programme									Simon Jefferies	Three leads to ensure PID's and project plans have considered adequate funding and resources to deliver. Steering group meeting on 15th Dec	01/12/2017	1					
Ensure effective political engagement and active communications with Fire Authority and elsewhere									Simon Jefferies	Engage with FA Lead member for Collaboration and at JCC	01/12/2017	2					
Develop and maintain relationships with partner agencies and other emergency services									Simon Jefferies	Ensure regular planned meetings and through OPE	01/12/2017	2					

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
									Ensure horizon scanning workshops to identify opportunities for collaboration	Simon Jefferies	Included and embedded in strategic planning processes	01/12/2017	3				
									Utilise staff engagement forums to embed collaborative culture	Simon Jefferies	Consider utilising middle managers leadership programme	01/12/2017	2				
									Ensure internal processes meet the legal test for considering and evaluating collaboration opportunities	Simon Jefferies	Business cases and committee papers include sections on alignment with duty to collaborate	01/12/2017	2				
									Meet with TV partners when developing changes	Mark Gaskarth	meetings have taken place and are planned as work continues	01/12/2017	2				
									Need to ensure PIDs show resourcing requirements to deliver project deliverables	Simon Jefferies	Difficulty in creating capacity across the 3 organisations	01/12/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
413	Pension Liabilities	Becci Jefferies	Strategic Risks	CFO	If we do not comply with the various pension regulations and the calculations of pension contributions, entitlements and payments made are incorrect, which is becoming increasingly likely given changes to these regulations which are complex in nature, changes to pension and payroll administrators, the ability to accurately interrogate historic records (which do not sit with RBFRS) and limited pensions expertise and capacity within the HR department, then we can expect to be in breach of the regulations, be subject to scrutiny from The Pensions Regulator, subject to enforcement and penalty notices and impact employees and pensioners which are significant in respect to our financial security, employer duties and our reputation	Failure to comply with statutory or regulatory requirements	18	21	Treatments	Owner	Progress	Date Updated	Assurance Level	15	2	Trevor Ferguson	18/01/2018
									Regular contract meetings with Pension Administrator - Conor and Becci	Becci Jefferies	BAU with regular meetings scheduled	04/10/2017	1				
									Pension Board to provide scrutiny on behalf of the Scheme Administrator (Fire Authority)	Becci Jefferies	Pension Board have received training, meetings now examining arising matters and risk assessment maintained by Pension Board. Further training and information input available via LGA in October 2017	04/10/2017	1				
									Participate in regional pension meetings to share understanding, seek guidance including from the LGA Advisor	Jacky Manning	Attendance at regional meetings	04/10/2017	1				
									Build resilience by sharing understanding and learning within the HR department	Jacky Manning	Action taken to build knowledge in department and with other FRSS - regional meetings attended by more than one HR rep and individual on PB also building knowledge is an HR rep	04/10/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments	Treated Score	Overall Assurance	Risk Owner	Review Date
									<div>Maintain records on actions taken for reference and clarity</div> <div>Audit pension related pay matters to ensure adequate pension pay records are maintained and relevant actions taken e.g. transition to 2015 scheme</div> <div>Attend fire sector pension related events to ensure kept abreast of changes and can make relevant enquiries of the pensions administrator</div> <div>Seek legal advice on emerging issues as appropriate to ensure actions taken are within parameters and are escalated to Fire Authority as appropriate</div>	<div>2</div> <div>1</div> <div>2</div> <div>1</div>			

Strategic Performance Report Q2 2017/18

Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
415	Information Systems, Data and Analysis	Steve Foye	Strategic Risks	CFO	If we fail to maintain reliable systems and accurate data that supports effective and timely analysis and continuing improvement of knowledge about our activities and their impacts, then we will not be able to make informed decisions, manage and improve performance of services, report effectively on this performance to the Fire Authority and the public and respond to audit needs - such as the Fire Service Inspectorate. This would substantially undermine our financial and resource efficiency, operational effectiveness and our political and public reputation.	Failure to comply with statutory or regulatory requirements	18	21	<div>Treatments</div> <div>Commission work to scope longer term data resolution and development</div> <div>Ensure close liaison and effective working relationships with HBIS to ensure data assurance and reporting methodology</div> <div>Ensure capacity within the risk and performance department in the restructure for dealing with all organizational intelligence workloads</div>	<div>Owner</div> <div>Katie Mills</div> <div>Katie Mills</div> <div>Katie Mills</div>	<div>Progress</div> <div>a shared Cadcorp post has been commissioned between OFRS and RBFRS, this will see shared working and increased resilience and capacity for RBFRS. MOU signed Nov 2017</div> <div>Continuous work, currently exploring data reporting formats for CRR</div> <div>Vacant role now filled for next 12 months. There are also new staff who have a range of skills to develop before the team is able to function effectively</div>	<div>Date Updated</div> <div>24/11/2017</div> <div>17/10/2017</div> <div>24/11/2017</div>	<div>Assurance Level</div> <div>2</div> <div>2</div> <div>2</div>	15	2	Nikki Richards	29/12/2017

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments	Treated Score	Overall Assurance	Risk Owner	Review Date
									<div> <p>Address the short and medium term skills and capabilities needs within the team.</p> <p>Katie Mills</p> <p>An exercise in the skills across the team has been completed and a prioritised list of necessary courses for each member of the team have been identified and approaches made through L&D to identify appropriate funding and timeframes</p> <p>17/10/2017</p> <p>2</p> </div>				
									<div> <p>Completing delivery of an effective performance management system</p> <p>Katie Mills</p> <p>Work started by Project Officer is still valid- a consultation exercise with user requirements. This needs to be progressed or an alternative agreed. A report to SLT will follow</p> <p>17/10/2017</p> <p>2</p> </div>				
									<div> <p>Developing performance department to actively support other teams in using performance management tools, data and information and knowledge to define delivery plans.</p> <p>Katie Mills</p> <p>This is being developed with Hubs and other teams, as well as through Project board, for example the RDS data. There needs to be a consistent and managed process on how data is being developed and by whom to ensure integrity and accuracy.</p> <p>17/10/2017</p> <p>2</p> </div>				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
									Vacancy at AM R&P role will leave the risk and performance department vulnerable for all the risks identified above.	Steve Foye	Structure reviewed and the function has moved under the Head of Corp Svcs Role. Other roles within team have also been filled to improve overall capability	24/11/2017	2				
									Service level project board to oversee RBFRS delivery across national programme work streams and SC partners.	Steve Foye	SC Programme Boards are being held every 4-6 weeks. DCFO Foye is chairing the board and feeding back into RBFRS. Strong connections through work streams across the South Central FRS's. Collaboration discussions being developed with Police Programme.	04/09/2017	2				
417	Firefighter Safety	Steve Foye	Strategic Risks	CFO	If we do not maintain the safety, health and wellbeing of our operational staff through effective training; operational policy and guidance; safe systems of work and; means to capture and respond to operational learning, we risk a significant firefighter injury or fatality, a failure to comply with our legal duty and an undermining of the operational effectiveness and competence of our staff. This could significantly impact	Failure to comply with statutory or regulatory requirements	22	25	Treatments	Owner	Progress	Date Updated	Assurance Level	19	2	Steve Foye	19/01/2018
									Training Strategy and maintenance of competence and standards for all operational staff.	Becci Jefferies	In qualification status reviewed via ODPLG and SPB, MOC programme under review, collaboration with TV FRS further work required within L&D to be addressed alongside staffing issues within the department	04/10/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
					the effectiveness of our operational response, have a long term impact on staff welfare and damage our public reputation and trust levels.				Review policies, procedures and processes. Align to national operational guidance (NOG). In the interim address any urgent issues.	Mark Gaskarth	new structure in place and team conducting the review.	03/10/2017	2				
									Safety Critical Training is delivered from Training centre based on The fire professional Framework core skills and assessed on appropriate frequencies	Becci Jefferies	business as usual activity. Performance monitored via ODPLG and SPB and discussion with SD regarding requirements undertaken as appropriate relating to need.	04/10/2017	2				
									Deliver training aligned to National standards and monitor and address shortfalls in maintenance of competence	Becci Jefferies	qualification framework agreed and developing core skills and training programme for 2017/18. Core operational qualifications agreed. Work on TRI for MOC ongoing with TV partners	04/10/2017	2				
									RDS Project Board established overseeing all RDS improvement and reporting to Programme Board	Jim Powell	Recruitment review report delivered with planned actions, some already underway. Barrier period trial to commence Dec 17. Temp RDS-WDS contracts due to commence Jan/Feb 18. Crew with 3 delayed.	17/10/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments	Treated Score	Overall Assurance	Risk Owner	Review Date
									<div>Review and streamlining of operational competency framework to simplify and focus on critical areas for firefighter safety</div> <div>Becci Jefferies</div> <div>Project underway to review operational competencies required aligned to FPF. TRI tool discussions held and development of toll nearly ready for launch. Discussions at ODPLG due 13/12/17</div> <div>07/12/2017</div> <div>2</div>				
									<div>Development of operational learning and assurance systems that encourage and improve development of staff</div> <div>Mark Gaskarth</div> <div>OPAS to develop. Part of operational assurance review</div> <div>20/10/2017</div> <div>2</div>				
									<div>Development and implementation of post incident operational debriefing process.</div> <div>Mark Gaskarth</div> <div>OPAS to develop. Part of operational assurance review.</div> <div>20/10/2017</div> <div>2</div>				
									<div>Additional external resources commissioned to review operational assurance model and develop gap analysis and action plan.</div> <div>Mark Gaskarth</div> <div>Work underway with external contractor from 14.11.17. Updates to be provided to Directors leading to initial report and gap analysis. From this development of any appropriate changes to BAU along with necessary PID's or Business cases for new work.</div> <div>20/10/2017</div> <div>2</div>				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
418	ESMCP	Steve Foye	Strategic Risks	CFO	If we do not make sufficient provision of resources to support the development, transformation to and implementation of ESMCP products and capabilities at a Service level, then we will not be a part of the proposed Emergency Services Network and we will be out of step with national and regional partners across the three emergency services. This could significantly impact on the effectiveness of our operational mobilization and response and limit access and use of operational technology to support incident command and joint emergency services interoperability. Consequently this could impact negatively on our collaborative and partnership working and our public and political reputation.	Failure to manage organisational resources	14	18	Treatments	Owner	Progress	Date Updated	Assurance Level	10	2	Steve Foye	31/01/2018
Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified.									Steve Foye	Collaboration event being held late Jan 2018 with Constabulary and regional fire services to explore collaboration opportunities.	07/12/2017	2					
Preparation of systems (e.g. TVFCS ICCS) being completed with national programme funding already secured									Mark Gaskarth	Work continues within TVFCS and in conjunction with BIS. No concerns over progress at last project board	07/12/2017	2					
Regular reporting to Audit and Governance Committee to ensure transparency in service and national programme progress									Steve Foye	Letter sent by NFCC reflecting all Fire Authority's concerns. Follow up letter from RBFRA being presented as part of A&G ESMCP update on 19.12.17 to then go to Home Office Permanent Secretary	07/12/2017	2					
Detail resource requirements to ensure all work streams are successfully delivered									Steve Foye	We continue to await a revised transition and implementation Plan from the National Programme. Work streams continue to progress where they	07/12/2017	2					

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
										can making business assumptions.							
									Service level project board to oversee RBFRS delivery across national programme work streams and SC partners.	Steve Foye	Project Board continues to run but with a low degree of activity at this time. This reflects the position that the National Programme continue to work on a revised transition and implementation Plan	07/12/2017	2				
									representation on SC Programme Board with funded programme support and appointed staff within each regional work stream group.	Steve Foye	Current commitments are sufficient. Delay in transition and implementation is a concern and this has been raised by both NFCC and by the SC Region through the FCG	07/12/2017	2				
									representation on national Fire Customer Group by DCFO for SC Region	Steve Foye	Representation and proactive participation being maintained with FCG	07/12/2017	2				
									Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified.	Steve Foye	Collaboration event planned for late January 2018. Being organised by Regional Police programme with support of regional fire group for ESMCP.	07/12/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
									Preparation of systems (e.g. TVFCS ICCS) being completed with national programme funding already secured	Mark Gaskarth	Work continues within TVFCS and in conjunction with BIS. No concerns over progress at last project board	07/12/2017	2			
									Regular reporting to Audit and Governance Committee to ensure transparency in service and national programme progress	Steve Foye	Update report provided for A&G Committee of 19th December 2017	07/12/2017	2			
									Detail resource requirements to ensure all work streams are successfully delivered	Steve Foye	This will have to await the revised implementation and delivery plan from the Central Programme. Not expecting this now until Spring 2018	07/12/2017	2			
									Service level project board to oversee RBFRS delivery across national programme work streams and SC partners.	Steve Foye	SC Programme Boards are being held every 4-6 weeks. DCFO Foye is chairing the board and feeding back into RBFRS. Strong connections with work streams across the South Central FRS's. Collaboration event with Police Programme planned for Jan 2018.	07/12/2017	2			

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
419	Operational Availability, Crewing and Capabilities	Steve Foye	Strategic Risks	CFO	If we fail to maintain appropriate numbers of personnel and associated skills and knowledge requirements, in line with our planned establishment and current or future demands, then we can expect this to affect our ability to provide an efficient and effective level of service delivery that matches our commitments and stakeholder	Failure to manage organisational resources	16	21	representation on SC Programme Board with funded programme support and appointed staff within each regional work stream group.	Steve Foye	Current commitments remain sufficient. As programme develops we will monitor commitment to the work streams to ensure successful delivery. This will be subject to revised transition plan from National Programme expected in 2018	07/12/2017	2	12	2	Steve Foye	05/01/2018
									representation on national Fire Customer Group by DCFO for SC Region	Steve Foye	We continue to attend FCG (next meeting 13.12.17). Matters concerning region and the service raised through the group. FCG advised of intent to write to National Programme. With other regions this led to NFCC letter voicing concerns	07/12/2017	2				
									Treatments	Owner	Progress	Date Updated	Assurance Level				
									Proactive targeted recruitment and retention campaigns	Jim Powell	Links to RDS project board. Focus on Lambourn pilot and Wargrave saw increase. R&D recruitment actions underway with planned actions outlined in report	30/10/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
					expectations. This could significantly impact community safety and organizational reputation.				Improved RDS management support through new Hub arrangements.	Jim Powell	RDS 'functional leads' nominated in each hub, evaluation of improvements through Q3 by hub managers	30/10/2017	2				
									Improvement in WDS management accountability at station and Hub level.	Jim Powell	'Response' functional leads nominated in each hub, contribution to driving performance to be evaluated as part of Q3 reporting	30/10/2017	2				
									RDS Project to create sustained recruitment and retention and deliver increased availability across all RDS stations.	Steve Foye	Barrier periods and RDS temp contracts planned for trial late 2017. Recruitment activity underway and further actions planned, outlined in R&D report.	30/10/2017	2				
									Review of current WDS establishment and forecast requirements at all levels.	Becci Jefferies	Update of forecast completed by Jacky Manning - to be reviewed at next establishment board 28.11.17. Transfer process complete and new starters begin January 2018. Further recruits to be trained early 2018. Sm Process underway	24/11/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments	Treated Score	Overall Assurance	Risk Owner	Review Date
									<div>Development in flexibility FDO roles to better meet the managerial and operational needs of the Service.</div> <div>Steve Foye</div> <div>Revised rota developed for consideration by service and to consult with rep bodies. Provisional date for completion and implementation mid-March 2018.</div> <div>24/11/2017</div> <div>2</div>				
									<div>Undertake necessary promotion and recruitment campaigns to meet establishment needs in short and medium term.</div> <div>Becci Jefferies</div> <div>SM Process underway. Transfer process complete. Further recruits planned early 2018. Collaborative recruit process for 2018 underway</div> <div>24/11/2017</div> <div>2</div>				
									<div>Creating long term resilience in future capability needs in response to developing and new demands and expectation of the Service (protection, prevention and response).</div> <div>Steve Foye</div> <div>Protection recruitment underway for new inspectors. SM Process underway including external applicants from CM level up. Relationships established with OFRS to support prevention skills.</div> <div>24/11/2017</div> <div>2</div>				
									<div>Create a pan organisational establishment board to provide oversight and governance to enable identification of key strategic needs and issues relating to operational crewing/succession</div> <div>Steve Foye</div> <div>Inaugural meeting held 29/08/17. Next meeting taking place 28.11.17</div> <div>24/11/2017</div> <div>2</div>				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
420	Volatility of Funding	Simon Jefferies	Strategic Risks	CFO	If RBFRS fails to achieve a balanced budget, which is becoming more likely given the national deficit, Central Government fiscal policy, increasing volatility in local funding and increasing budget pressures, we can expect to face further reductions in service delivery, potential negative oversight opinions and loss of public trust, which will severely impact on our ability to deliver our statutory duties and strategic objectives.	Failure to manage organisational resources	22	24	Treatments	Owner	Progress	Date Updated	Assurance Level	20	3	Trevor Ferguson	
Collaborative development of Medium Term Financial Plan with Members and Senior Leadership Team									Simon Jefferies	New planning scenarios developed and being progressed to budget setting processes in February	01/12/2017	2					
Robust internal budget monitoring and management processes									Conor Byrne	New budget forecasting tools and reports are being rolled out during December	07/12/2017	2					
Agility in internal planning processes to ensure delivery plans are matched to Medium Term Financial Plan									Steve Foye	Revised service plans being developed by Heads of Service for Feb 2018. Senior Team restructure and associated roles completed to better align functions. New Local and station delivery plans approach being developed in SD Hubs.	07/12/2017	2					
Political engagement with Central Government to ensure new burdens are matched with new funding									Katie Mills	Response to Central Government on Local Finance Technical Consultation submitted. Engagement with Berkshire MPs on new and emerging challenges for Berkshire.	01/12/2017	3					

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
									Political engagement with Government to remove precept cap and referendum requirements which will allow additional flexibility in local funding	Katie Mills	Response to Central Government on Local Finance Technical Consultation submitted. Engagement with Berkshire MPs on new and emerging challenges for Berkshire.	01/12/2017	3				
									Engagement with Central Government, through Political lobbying, Fire Finance Network and NFCC, on new Fire Funding proposals	Katie Mills	Response to Central Government on Local Finance Technical Consultation submitted. Engagement with Berkshire MPs on new and emerging challenges for Berkshire.	01/12/2017	3				
									Effective and flexible Treasury and Reserves management	Conor Byrne	Treasury policy will be reviewed based on current level of reserves and a revised policy will be approved by FA in Feb 2018	07/12/2017	2				
									Service level project board to oversee RBFRS delivery across national programme work streams and SC partners.	Steve Foye	SC Programme Boards are being held every 4-6 weeks. DCFO Foye is chairing the board and feeding back into RBFRS. Strong connections through work streams across the South Central FRS's and with Police programme.	07/12/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
									representation on SC Programme Board with funded programme support and appointed staff within each regional work stream group.	Steve Foye	Current commitments sufficient. Review will be required once a revised transition and implementation plan is established by the National Programme.	07/12/2017	2				
									representation on national Fire Customer Group by DCFO for SC Region	Steve Foye	Concerns raised through FCG on impact of delayed transition and implementation plan. NFCC have written on behalf of all authorities. RNFRA writing separately to reinforce concerns on impacts on operational capability and financial impacts.	07/12/2017	2				
									Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified.	Steve Foye	On-going connection with Police , regional FRS's and SCAS through range of forums (ESMCP, SEORRG, TV Collaboration and Partnership etc.)	07/12/2017	2				
									Preparation of systems (e.g. TVFCS ICCS) being completed with national programme funding already secured	Mark Gaskarth	Work continues within TVFCS and in conjunction with BIS. No concerns over progress at last project board	04/09/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
421	Response Home Office Reform Programme	Steve Foye	Strategic Risks	CFO	If RBFRS fails to meet the expectations of the Home Office Fire Reform Programme and the requirements of the new HMIC inspection programme, which may become increasingly likely given the ever changing expectations of the public, Government and staff following Grenfell, the NJC pay proposals, the absence of clarity on the inspection programme, then we can expect to receive a lower than desired inspection assessment, reputational damage and loss of public confidence which will be significant in our ability to meet our strategic objectives.	Failure to maintain organisation's positive reputation	21	21	Regular reporting to Audit and Governance Committee to ensure transparency in service and national programme progress	Steve Foye	Update provided to A&G for 19.12.17 including proposed letter from the Fire Authority to the Home Office Permanent Secretary re concerns over the ESMCP National Programme.	07/12/2017	2	20	3	Nikki Richards	15/12/2017
									Detail resource requirements to ensure all work streams are successfully delivered	Steve Foye	This will have to await the revised implementation and delivery plan from the Central Programme	07/12/2017	2				
									Treatments	Owner	Progress	Date Updated	Assurance Level				
									Ensure planning and delivery processes are aligned to emerging requirements of HMIC inspection programme and Fire Reform Programme	Nikki Richards	We are reviewing current processes against draft HMICFRS methodology and awaiting further information in Dec 17.	07/12/2017	3				
									Engagement with HMIC through NFCC and regional consultations to ensure expectations are clear and aligned to public interest	Nikki Richards	Attended a recent event arranged by NFCC in Durham and Darlington to gain a better understanding of potential requirements.	07/12/2017	3				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
									Maintain focus of delivery of IRMP programmes to continue change journey of RBFRS	Steve Foye	Programme board continue to meet regularly	07/12/2017	3				
									Maintain focus of delivery of OD programmes to continue change journey of RBFRS	Nikki Richards	OD Programme to be replaced by new people strategy	07/12/2017	3				
									Ensure delivery of collaboration programmes with Blue Light and other key partners	Simon Jefferies	All collaborative governance structures and meeting schedules in place and lead member task and finish group established in RBFRS	20/10/2017	2				
									Deliver action plan from 2017 peer review.	Katie Mills	Actions from Peer review have been circulated to all owners and agreed dates to be returned for completion	17/10/2017	2				
422	Capacity, Capability and resilience	Nikki Richards	Strategic Risks	CFO	If RBFRS fail to increase the capability, capacity and resilience of our workforce which may become increasing likely as we lose knowledge through retirement of experienced staff, and require new skills and additional capacity to help us responds to the changing demands of the workforce reform	Failure to manage organisational resources	21	21	Treatments	Owner	Progress	Date Updated	Assurance Level	13	2	Nikki Richards	20/12/2017
									Revise the RBFRS people strategy, taking in feedback from the recent peer review and National CFA people strategy	Becci Jefferies	Review of NFCC people strategy undertaken, discussion with SLT regarding areas of focus to facilitate prioritisation, draft to go to SLT in December 2017	27/11/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
					programme and vision 2019, then we can expect to fail to deliver against our statutory requirements and broader organisational development objectives				strengthen workforce planning information to cover all staff and regularly review as part of performance monitoring	Becci Jefferies	Workforce planning data prepared. Establishment Board to review regularly against other work projects affecting staffing, EDI data obtained to support EDI forum and objectives of group	27/11/2017	1			
									Implement middle managers development programme in collaboration with TV partners	Nikki Richards	New middle manager development programme launched in October with Leadership Forum.	27/11/2017	2			
									Develop options and implement a process for two tier entry for operational staff	Becci Jefferies	SLT committed to exploring two tier. Updates from other FRSs sought. Prioritisation of activities to be considered in line with People Strategy	27/11/2017	2			
									Increase flexibility of recruitment policies to enable RBFRS to attract and retain the best staff	Becci Jefferies	Recruitment PID drafted to be considered in line with People Strategy and at Programme Board in December subject to timing	27/11/2017	2			

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments				Treated Score	Overall Assurance	Risk Owner	Review Date
									Establish a review programme of training needs and methods of training delivery to ensure RBFRS develop the skills needed	Becci Jefferies	Training requirements reviewed with Service Delivery colleagues and informed through TCR and other project developments. ODPLG reviewing performance in relation to Qualification. MOC project underway	27/11/2017	2			
									Review reward and recognition arrangements for all staff	Becci Jefferies	To be considered in line with development of People Strategy and recruitment project	27/11/2017	2			
									Review and revise where appropriate the Organisation Development plan to ensure all work streams reflect the current needs and regularly horizon scan to determine and changes	Nikki Richards	OD Programme to be replaced by new people strategy	07/12/2017	3			

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
423	Management of Corporate Data, Information and Knowledge	Nikki Richards	Strategic Risks	CFO	If RBFRS fails to effectively enable and control the sharing and management of corporate, data, information and knowledge, which is increasingly likely given additional requirements of the General Data Protection Regulation (GDPR) and connection to the Emergency Services Network (ESN), then we can expect the mishandling of sensitive or personal information which could lead to significant financial and reputational penalties and legal challenge which are significant in respect to achieving all of our strategic objectives	Failure to manage organisational resources	18	18	Treatments	Owner	Progress	Date Updated	Assurance Level	15	2	Nikki Richards	31/01/2018
									Review, revise and implement a process to manage corporate information coming into and being shared within RBFRS	Tony Vincent	Minimal progress due to pressure of workload	09/11/2017	2				
									Implement the recommendation from the GDPR readiness pre assessment	Tony Vincent	GDPR information mapping session underway and most data custodians identified.	09/11/2017	1				
									All staff to complete the online information awareness programme	Tony Vincent	87% successful completion as of end of October. Reminders being sent out regularly to complete	09/11/2017	2				
									Ensure RBFRS complete the 10 steps to cyber security	Tony Vincent	Cyber essentials based Audit will highlight any deficiencies in achieving the 10 steps, Audit action plan will close any gaps.	09/11/2017	1				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
									Establish a programme of in-house IT penetration test using the Nessus software and implement and remedial actions	Tony Vincent	Baseline testing completed, ad hoc testing being carried out based on project needs (i.e. on changes associated with boundary infrastructure). Used specifically in association with recent ICT audit for both preparation and during fieldwork.	09/11/2017	1				
425	Failure in delivery of ESMCP National Programme	Steve Foye	Strategic Risks	CFO	If the ESMCP National Programme fails to deliver a new Emergency Services Network (ESN) or key component parts of ESN that properly enable FRS mobile communications, then the service risks not having robust mobilisation and communications systems to support operational crews and officers or insufficient time to implement its own replacement systems. This would directly impact delivery of services and consequentially public confidence and reputation.	Failure to manage technology	18	22	Treatments	Owner	Progress	Date Updated	Assurance Level	10	2	Steve Foye	08/01/2018
									Programme Management structures for SC Region	Steve Foye	As the Chair of the South Central Region ESMCP Programme Board DCFO Steve Foye maintains on-going oversight of national progress. This is an on-going treatment	30/10/2017	2				
									Communication of service and regional concerns through Fire Customer Group and NFCC lead.	Steve Foye	Regular direct communication held with FCG lead (ACO Taylor) and NFCC lead CFO Keen through FCG	30/10/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
427	Management of Assets	Steve Foye	Strategic Risks	CFO	If we fail to effectively manage our ICT, facilities and operational assets, from acquisition to disposal, which may become increasingly likely as we upgrade our equipment and facilities, we will be unable to effectively track assets for maintenance and financial management purposes.	Failure to manage organisational resources	18	21	Letter to be sent from RBFRA Chairman (and A&G Chairman) to register concerns over project delays and lack of clarity with the potential impacts this could have on long term Service finances and delivery.	Steve Foye	Agreement to send letter reached at A&G in Sept 2017 and FA in Oct 2017. Letter not yet sent. Liaising with other services and FCG for correct routing of letter. Considering waiting for revised plan from National Programme	30/10/2017	2	15	2	Steve Foye	08/12/2017
									Treatments	Owner	Progress	Date Updated	Assurance Level				
									Introduce and maintain asset management system within Facilities.	Steve Foye	Asset list compiled by M&E contractor for management and maintenance of assets. Asset management of furniture currently being progressed as part of the office acc project. Will require review and progression when new Head of Service takes up role.	07/12/2017	2				
									Finance to review policy and methodology for the disposal of assets.	Conor Byrne	review will be carried out during Dec	07/12/2017	2				

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Quadrant Four - Risk

Risk ID	Risk Short Name	Risk Assessor	Function Programme	Directorate	Risk Description	Risk Criteria	Current Score	Inherent Score	Treatments					Treated Score	Overall Assurance	Risk Owner	Review Date
									ICT to review and capture current asset management process ensuring any disposal arrangements align with organisational policy	Tony Vincent	Initial discussions have identified multiple asset management vehicles for ICT, and initial discussions with Facilities and Fleet will inform which of these will become the primary asset management system going forward	07/12/2017	2				
									Introduction of the use of Tranman to provide a fully automated process for the management of operational assets.	Steve Foye	Work is underway in conjunction with HFRS Fleet partnership. This will progressed by new Head of Facilities and Assets in early 2018	07/12/2017	2				

Accident Investigations

Measure	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 Y.T.D.
Accidents Requiring Investigation	11	11			22
*Accident Reports Completed	6	4			10
**Recommendations not acknowledged / accepted	0	0			0

3 of the 11 investigations reported in Q1 did not require a full investigation as the situation was rectified or an independent surveyor was carrying out an assessment. 6 of the 11 reports were received, a further 3 were not required, so only 2 outstanding.

In Q2 - 4 of the 11 investigations were received, as well as the four received, two interim reports have also been received to cover 2 of the near misses.

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

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

***The recording of Accident Investigations has changed since last year; we now record the date when the investigation is received for future records.

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

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

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

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

Audit Recommendations

The audits shown have been undertaken and recommendations agreed. The information provides a progress on those open recommendations as of 3 November 2017.

Audit title	Audit Action	Date	Revised completion Date	Priority	Progress	RAG	Open / Closed	Date of Audit Report	Allocated to
Key Financial Controls	Management will look into creating a report for the receipt dates of opened and closed purchase orders. All goods receipted on SAGE 1000 will have an invoice attached on the system, to confirm amount receipted and the invoice that is to be paid.	Apr-17	Nov-17	Low	Report with receipt dates has now been created. Work on linking receipt date to invoice is ongoing. UPDATE OCTOBER 17 - Progress has been made and will be completed in November 2017		Open	17-Mar-17	Exchequer and systems manager

Audit Recommendations Closed during Q2

Audit title	Audit Action	Date by	Revised completion Date	Priority	Progress	Date of Audit Report	Allocated to
Standard test	Change the standard test policy to reflect a new way of working	Jun-17		High	<p>This will be done in two parts as some actions are relevant to stations that needs to be in place before the new standard test record year in January 2017. This relates to incorporating identified best practice into our current system. There is no further work that can be done until the equipment management system is determined and implemented.</p> <p>UPDATE NOV 17: Now part of BAU and in service plan</p>	06-Mar-16	Rob Read
Standard test	Update the record keeping system	Dec-16	Apr-17	High	<p>This has two strands</p> <p>a) review what we already have and</p> <p>b) potentially implement a change to a computer based system, however this is unlikely to happen soon as FireWatch may not support this type of work yet or be financially viable and there are no practical options for implementing anything else at a reasonable cost. This is tied to the outcome of the asset management project which will report in March / April 2017. UPDATE Q1 - The asset management system is dependent on the parameters established by the Hampshire/ RBFPS partnership which has not yet been formalised. as part of this partnership it will be necessary to move all equipment management records for partnership items onto Hampshire's Tranman system which will be used to record the equipment history. this will then set the parameters for moving the system forward.</p> <p>UPDATE NOV 17: Now part of BAU and in service plan</p>	06-Mar-16	Rob Read

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Quadrant Four - Risk

Audit title	Audit Action	Date by	Revised completion Date	Priority	Progress	Date of Audit Report	Allocated to
Governance & Risk Management	As planned the service will ensure that individual self-assessment and development plans are completed annually and retained for all existing members	Sep-17		Low	A new Member Development Strategy was approved at Management Committee on 3 April. The strategy will cover all aspects of Member development including an annual development programme. UPDATE: Since that time a member task and finish group has been set up to develop an action plan for the delivery of the strategy.	27-Feb-17	Head of Corporate Services
Governance & Risk Management	RBFA will ensure that risks are assigned an owner in line with the risk management policy accountability and ownership of hierarchy.	Sep-17		Low	Will be reviewed during Q1 & 2 2017 following the managerial restructure. UPDATE Q1: Risks reviewed at director level in Q1. Now a standing item at SLT. On track to be closed in Q2. UPDATE NOV 17 - review of risks shows this has been actioned, followed by audit in October 2017	27-Feb-17	AM Risk and Performance
Governance & Risk Management	Management will continue to deliver the Training plan, to educate employees on the completion of the risk register (both timely completion and capturing assurances) and the Planning and Performance officer will continue providing risk owners with hands on support on to use the system.	Sep-17		Low	Training has been provided to managers on a 1-2-1 basis by the planning and performance officer. Support is provided to users when required, to be supported with refresher in Q2. UPDATE NOV 17: training delivered to new users and refreshed when required by user.	27-Feb-17	AM Risk and Performance

Strategic Performance Report Q2 2017/18

Quadrant Four - Risk

Audit title	Audit Action	Date by	Revised completion Date	Priority	Progress	Date of Audit Report	Allocated to
Governance & Risk Management	The service will review its process for escalating and presenting operational risks to the relevant director (strategic risk register) and ensure there is clarity in information being presented.	Sep-17		Low	Review will commence in Q1 following the Planning and Performance Officers attendance at Effective Risk register training with the Institute of Risk Management. UPDATE Q1: Review postponed to Q2. P&P Officer attended effective risk management training, outcomes to be incorporated into review. On track for completion in late September. UPDATE NOV 17: now part of business as usual.	27-Feb-17	AM Risk and Performance
Key Financial Controls	The minimum capitalisation value for assets will be recorded in the Financial Regulations	Sep-17	Oct-17	Low	This has been incorporated into the updated Financial Regulations which are being presented to the Audit and Governance Committee in July 17. Final sign off will be at Fire Authority in October 2017. UPDATE OCTOBER 17 - These were approved in October 2017 by A&G committee and have been published on our website.	17-Mar-17	Head of Finance

Appendices

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

Tony Vincent, Head of Business and Information Systems

This ICT strategy is intended to design and embed a reliable, resilient ICT support service which will technically enable the implementation and ongoing delivery of the Strategic Commitments and Vision 2019. This is a high level update for items agreed as part of year 2 of the action plan and reflects the period July to September 2017. Detailed action planning is managed through the Business Information and Systems Service plan which is monitored through the Strategic Performance Board.

Task	Progress	RAG
ICT information governance framework established and approved by IRMP	Framework published and governance arrangements will be finalised following arrival of new HBIS. Protecting Information e-learning package rolled out across the organisation – 87% compliance to date. IRMP/programme board no longer overseeing as twin aims of ESN accreditation and GDPR compliance driving activity.	G
Guiding principles implemented and PSN accreditation achieved	ESN Code of Connection requires both network security and wider IA conditions. National Cyber Security Centre standards chosen as accreditation for IA. Rolled into year 2 due to changing timelines for ESMCP. Plan to achieve Cyber Essentials certification as part of this. Cyber Essentials focus to 2017 ICT audit will assist in identifying further action.	G
ICT infrastructure is fit for purpose and supports a reliable, robust IT environment	Opportunities for increase in resilience for TVFCS Vision infrastructure identified and remediation process in progress. Ongoing capacity and resilience augmentation continues. Reintroduction of business continuity and disaster recovery testing will be carried out in Q4. New Mobile Data Management (MDM) solution selected via tender process will allow greater control, more flexibility, lower cost to manage and enhanced security of our mobile device fleet. Blackberry devices will be phased out in Q3 as a result. Two factor authentication for remote connection to RBFRS ICT services has been successfully deployed, enhancing overall security of RBFRS ICT assets and information.	G
Software and Hardware Asset management plans established	New helpdesk system is implemented within HQ environment and station rollout plan is on schedule. This will help plan asset replacement programme. Collaboration with partners continues to help align assets replacement programme. Increased focus on consolidating licensing procurement through preferred framework partners is bringing increased visibility and control of both licensing compliance and costs.	G

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Appendices

Task	Progress	RAG
Cross training and up skilling of the ICT team	July saw two new starters within the ICT team and August the recruitment of the New Head of Business and Information Systems. A minor organisational change to provide additional cross-training opportunities was completed in September. Several members of ICT have attended training courses to augment their core skills in other technical areas; however workload continues to be an impediment to rapid progress.	A
ICT Service SLA and Service catalogue created	ICT Service SLA & catalogue is in place on vFire and is in use by all Newsham Court staff. Dee Road fire station is still being used for station based customer use & feedback prior to roll out of vFire across the remaining stations (Due early 2018). The SLA & Catalogue are still being adjusted to improve the services supplied by ICT. Out of hours (duty comms) SLA is still to be reviewed & an up to date agreed SLA implemented.	G
ICT work plan of BAU activities and prioritised development implemented	Annual work plan agreed and currently on schedule.	G
Applications portfolio (a list of all our systems) will be realigned to remove unnecessary applications	Applications are listed in the newly implemented asset management system, and have also been included in our new Service Desk software (vFire), so this will aid identification of licenses and software in use and allow software not in use to be removed, leading to license recycling and optimisation. These measures will improve risk and cost profiles to the service.	G
Flexible working framework is developed to support new ways of working as part of the OD programme	This will be picked up later in 17/18.	
ITIL best practice standards in place embedded across whole of ICT	The introduction of vFire for incident management and standard weekly communication cell meeting structures to facilitate problem management are beginning to bear fruit in terms of ITIL standards adoption. Additionally, increased rigour in change and configuration management is being introduced in the next quarter.	G
Timelines for re-tendering, aligned to joint and shared tender opportunities	Enhanced working practices in conjunction with procurement, has led to several migrations of contracts to framework suppliers and increase focus on lifecycle contract management has been brought to bear by the new HBIS.	G
A corporate content management solution is in place	Intranet based content management system in place Yr 1 Q4. Some further work required to ensure document control works effectively for information with high risk implications. Continuing to work with service providers to remediate document control issues, however progress is slow.	A

Appendix B: Update on Progress of the Fleet Strategy

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

Task	Progress	RAG
Fleet and Engineering Management structure designed to meet future needs Fleet Strategy and principles agreed and Partnership with HFRS implemented	The department has gone through some changes, with the removal of some posts. These have been held vacant to facilitate the transition to a new structure with the Partnership with Hampshire. This has created some capacity issues, which have been addressed with temporary staff in some roles. The Partnership is in the final stages with an interim Fleet Manager in post.	G
Agree 4 year Main Pumping Appliance renewal plan - Commence Procurement exercise with TVFRS's	The next phase of 3 appliances for 2018 is on track, Chassis' have been ordered and delivery is projected for May/June 2018	G
Review Equipment notes and technical information and create appropriate reference database	Equipment notes have been reviewed and redacted where possible to reduce the number of unnecessary documents. A separate access folder has been created in Siren. Further work is reducing and scanning documents to the electronic folders.	G
Fleet Investment plan is created to align to medium term financial plan - Fleet and Equipment Asset Management plans established	A revised equipment investment plan has allowed capital provision to be made in the strategic assets investment framework. This has been facilitated by the development of a 4 and 5-year replacement schedule for all large equipment items. This will allow better programming of replacement and budget management in the future. Asset management tracking through Firewatch and Tranman is being developed. Our Asset register has been brought up to date, identifying each vehicle, location, age, annual mileage and book value.	G
Agree replacement programme for Special Appliances	The replacement of the ALP and refurbishment of the ICU are both commenced, with a project reviewing the feasibility of a multi-use approach.	G
Determine multi-use vehicles requirements, available to provide off road access, flexible and effective back-up vehicles	The redeployment of vehicles and removal of under-used vehicles at stations and team bases has seen a reduction in the White fleet. Since the start of this exercise there has been disposal of 21 white fleet vehicles to auction. Redeployment of some vehicles has ensured more efficient and effective use at station and team level. The Pool fleet has been enhanced by these redeployments and the purchase of 4 new pool fleet cars.	A

Appendix C: Information Governance Report (July 2017 to September 2017)

Information Governance Report (July 2017 to September 2017)

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

Information Requests...	July 2017	August 2017	Sept 2017	TOTAL
New Information Requests Received	15	9	12	36
Total Information Requests Actioned	25	21	18	
IGT - Hours Spent on Information Requests	54¼	41¼	28	123½
Others - Hours Spent on Information Requests	35½	17	27	79½
Timeframes not met (figures relate to request due date)	2	2	1	5
Internal Reviews (figures relate to request due date)	0	0	0	0
Complaints made to the Information Commissioner's Office (ICO)	0	0	0	0

We continue to receive a number of Information Requests related to the Grenfell Tower incident, on subjects such as Fire Safety staff, audits/ inspections/ enforcement, the Aerial Ladder Platform (ALP), sprinkler systems, fridge/freezer fires and high rise buildings. Of the 36 requests received this quarter, 11 related to these topics.

Many of these requests are complex. All of the requests that have not met their timeframes are related to these topics.

Incident Reports

Incident Reports...	July 2017	August 2017	Sept 2017	TOTAL
New IRS/FI requests received this month	18	15	20	47
IRS/FI requests confirmed (includes not charged for)	2	1	9	14
Total IRS/FI requests actioned (incl. still in progress)	21	15	21	
Income from requests	£96.00	£0.00	£99.00	£105.00
Figure in brackets - total ££ so far this year	(£1,374)	(£1,374)	(£1,473)	(£1,473.00)

Incident Recording System (IRS) Reports are charged at £96.00 for those initiated in 2016/17, and at £99.00 for those initiated in 2017/18.

Fire Investigation (FI) Reports (where produced) are charged at £334.00+VAT for those initiated in 2016/17, and at £344.00 for those initiated in 2017/18.

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

Appendix D: Service Provision Measure Definitions

ID	Service Provision Measure	Definition
Dwelling Fire Deaths and Safeguarding		
1	Number of fire deaths in accidental dwelling fires	The total number of deaths that occur as a result of an accidental dwelling fire. This includes a person whose death is attributed to an accidental dwelling fire, even when the death occurs weeks or months later.
2	Number of fire casualties in accidental dwelling fires	The total number of casualties which occur as a result of a dwelling fire. This includes a person or persons whose injuries may be slight or serious and require hospital treatment and which are attributed to an accidental dwelling fire.
3	% of safeguarding referrals made to local authorities within 24 hours	To ensure that safeguarding referrals are made in a timely manner for the protection of individuals. This is the time taken from the Duty Officer being made aware of a safeguarding case, to the referral being made to the local authority.
Prevention		
4	Number of Home Fire Safety Checks (HFSC's) delivered to those who are at heightened risk of dying in the event of an accidental dwelling fire.	Research has shown that certain vulnerable groups are at heightened risk of dying in an accidental dwelling fire. HFSC's will be targeted towards these vulnerable groups.
5	Number of HFSC's delivered to those who are at heightened risk of having an accidental dwelling fire and being injured as a result	Research has shown that certain groups are at heightened risk of having an accidental dwelling fire and being injured as a result. HFSC's will be targeted towards these groups.
6	% of dwelling fires attended where no working smoke alarm is installed, against the total number of dwelling fires	The percentage of dwelling fires RBFRS attends where there was either no working smoke alarm installed, or a smoke alarm did not operate despite being present. This is measured against the total number of dwelling fires.
7	% of category 1 HFSC referrals, where there has been a threat or incidence of arson, completed within 3 days	When RBFRS are made aware of the threat or incidence of arson against an individual (s), an HFSC should be conducted within 3 days.

ID	Service Provision Measure	Definition
Protection		
8	Total Number of Full Fire Safety Audits carried out	This is the total number of full fire safety audits carried out in commercial premises in Berkshire. This is calculated once the service has been closed by RBFRS and only includes the initial full fire safety audit. A Fire Safety Audit is carried out to enforce the Regulatory Reform Order (RRO) 2006, which applies to virtually all non-domestic premises and covers nearly every type of building, structure and open space.
9	Total number of audits and follow-up visits carried out	This reflects the amount of activity and follow up visits which may be required around premises, including and following the initial full fire safety audit.
10	% of audits where the results were satisfactory	This is the percentage of closed fire safety of audits carried out in commercial premises, where the result was satisfactory and no further action was required.
11	% of audits requiring informal activity	This is the percentage of closed fire safety audits carried out which resulted in informal activity. This includes a Deficiency Notice, with or without follow-up or informal education.
12	% of audits requiring formal activity	This is the percentage of closed fire safety audits carried out which result in formal activity. This includes premises requiring an Enforcement Notice, Prohibition Notice, Alterations Notice, or Prosecution Notice.
13	% success rate when cases go to court for non-compliance with the Regulatory Reform Order 2006	This is the percentage of successful prosecutions following fire safety audits on premises not complying with the Regulatory Reform Order 2006.
Response		
14	% of occasions where the first fire engine arrives at an emergency incident within 10 minutes, from time the emergency call was answered	This measure looks at the time taken from when the Fire Control Room Operator answers the phone until the time the first fire engine (appliance) arrives at the scene of the emergency incident, and on how many occasions RBFRS does this in under 10 minutes.
15	% of full shifts where there is adequate crewing on all 'wholetime' frontline fire engines	This is the percentage of shifts (day or night) where there is sufficient minimum qualified fire fighters on all wholetime pumping appliances (fire engines). A wholetime frontline pumping appliance is available 24/7, 365 days a year.
16	% of hours where there is adequate crewing on 'retained' frontline fire engines (based on 24/7 crewing)	This is the percentage of hours where there is sufficient minimum qualified fire fighters on retained pumping appliances (fire engines). Retained frontline pumping appliances are crewed mainly by on-call fire fighters who are based at stations in more rural locations, and

ID	Service Provision Measure	Definition
		are ready to leave their place of work or home and attend emergencies from the local retained station, when they receive the call. Crewing is also provided by the Retained Support Unit.
Customer Feedback		
17	% of domestic respondents satisfied with the overall service	Results are from a customer feedback questionnaire which is sent to those who have experienced a dwelling fire, and asks about their satisfaction and experience with the service they received from RBFRS.
18	% of commercial respondents satisfied with the overall service	Results are from a customer feedback questionnaire which is sent to business owners/managers who have experienced a fire in their commercial premises, and asks about their satisfaction and experience with the service they received from RBFRS.
19	% of commercial respondents satisfied with the services with regards to Fire Safety Audits	Results are from a customer feedback questionnaire which is sent to business owners/managers who have had a full fire safety audit, and asks about their satisfaction and experience with the service they received from RBFRS.

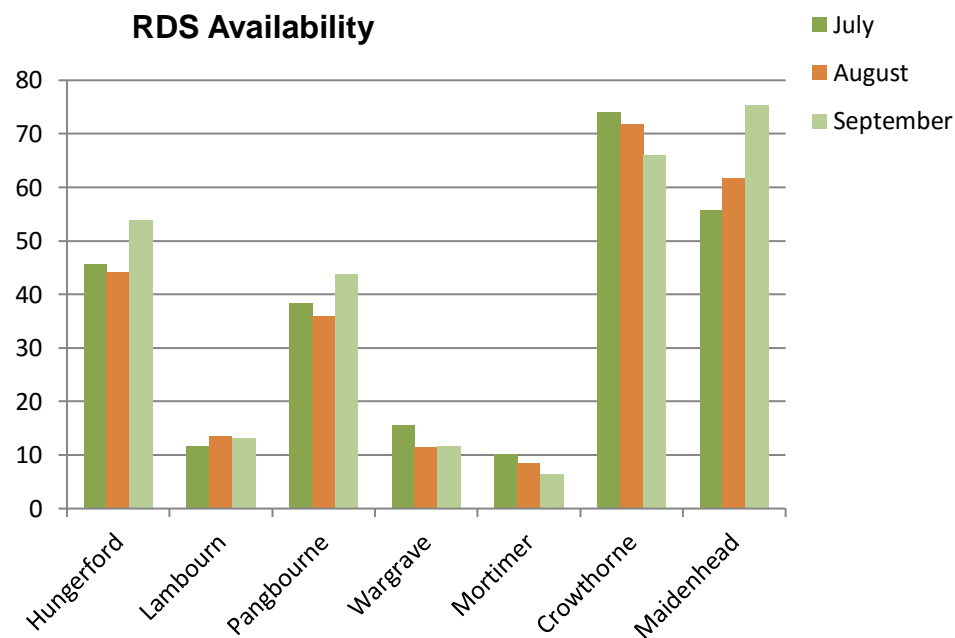
Appendix E: Corporate Health Measure Definitions

ID	Corporate Health Measure	Definition
Human Resources and Learning & Development		
1	% of working time lost to sickness across all staff groups	This measure looks at sickness across the whole organisation and the percentage of time lost, based on the number of working hours available to the organisation.
2	% of Eligible operational staff successfully completing fitness test	The measure reflects the percentage of eligible operational personnel who have successfully completed their fitness test. Individuals who are not eligible include those on long term sick or light duties.
3	% of eligible staff with Personal Development Appraisals	This measure reflects the percentage of eligible employees who have had a Personal Development Appraisal. Eligible staff are those who have completed their initial probation period before the end of the PDA period and who have not been absent for over 50% of the reporting period. Employees moving within the organisation to new roles on trial or probation periods will still be eligible for a PDA.
4	% of eligible operational staff in qualification	This is a measure of the areas of qualification within the fire professional framework
Health and Safety		
5	All injury accidents including RIDDOR (RIDDOR & Total)	The total number of accidents including RIDDOR (<i>Reporting of Injuries Diseases and Dangerous Occurrences Regulations</i>) which are more serious injury accidents.
Finance and Procurement		
6	% of spend subject to competition	This measure is looking at all expenditure over £10k as RBFA must obtain quotes or tenders for all these purchases. This excludes statutory payments such as local authority charges or HMRC.
7	Compliant spend as a % of overall spend	This measure calculates the supplier spend that is in a compliant contract as a % of the total spend to external bodies and suppliers. (as per RBFA contract regulations)
Freedom of Information		
8	% FOI and EIR requests referred to the Information Commissioner	The percentage of Freedom of Information requests and Environmental Information Regulations which are referred to the Information Commissioner.

Appendix F: RDS Establishment and Availability

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

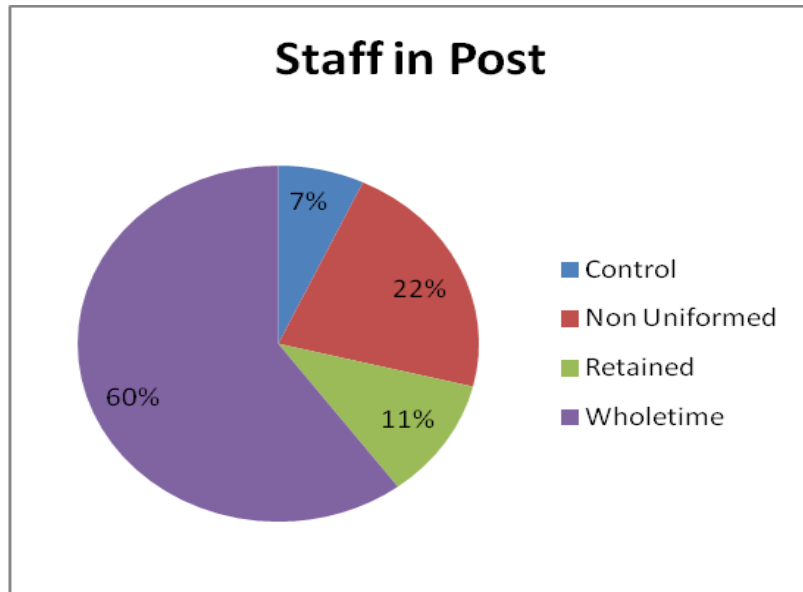
	Staff in Post	FTE	Establishment	SIP v Est	FTE v Est
05 Hungerford	8	4.00	13	61.54%	30.74%
06 Lambourn	8	3.89	13	61.54%	29.93%
07 Pangbourne	10	5.36	13	76.92%	41.26%
09 Wargrave	7	2.94	13	53.85%	22.63%
11 Mortimer	6	3.50	13	46.15%	26.95%
15 Crowthorne	14	7.75	13	107.69%	59.64%
19 Maidenhead	15	5.99	13	115.38%	46.05%
Total	68	33.44	91	74.73%	36.74%



Appendix G: HR Supporting Charts

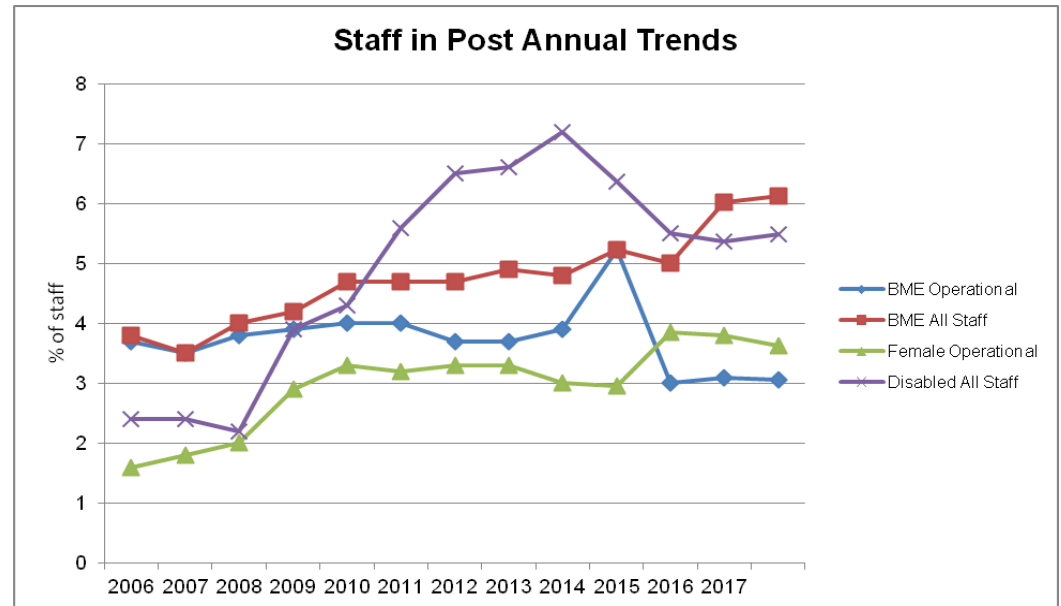
(Source: Data calculated and supplied by HR)

Staff in Post



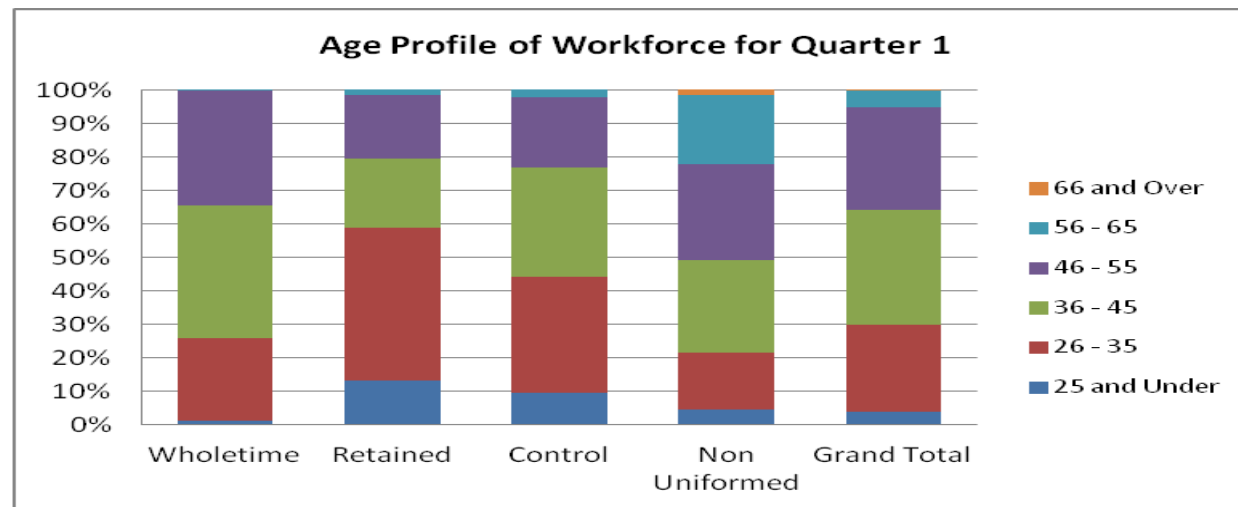
Quarter 2 – 2017/18

Percentage of BME operational	3.06%
Percentage of BME all Staff	6.13%
Percentage of female Firefighters	3.63%



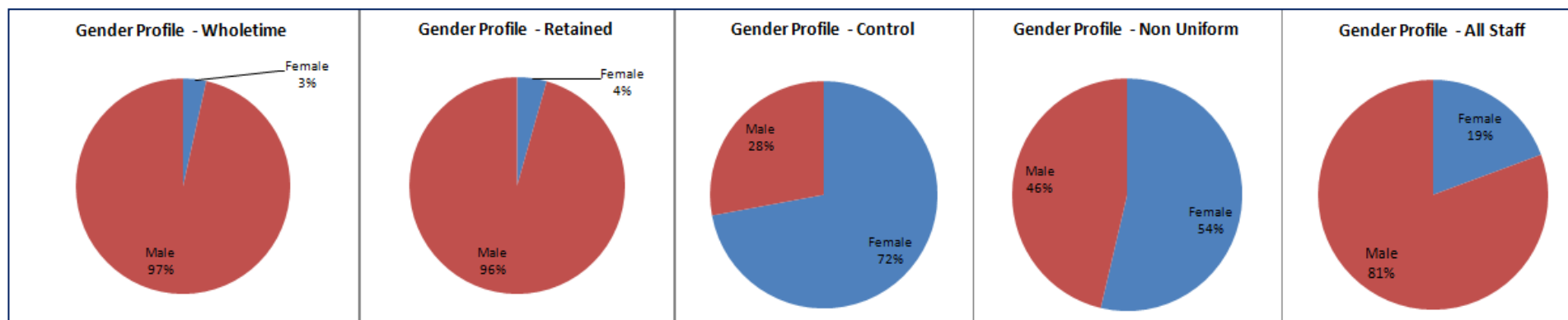
Staff Age Profile

Age Group	Wholetime	Retained	Control	Non Uniformed	Grand Total
25 and Under	4	9	4	6	23
26 - 35	92	31	15	23	161
36 - 45	148	14	14	38	214
46 - 55	128	13	9	39	189
56 - 65	1	1	1	28	31
66 and Over	0	0	0	2	2
Grand Total	373	68	43	136	620

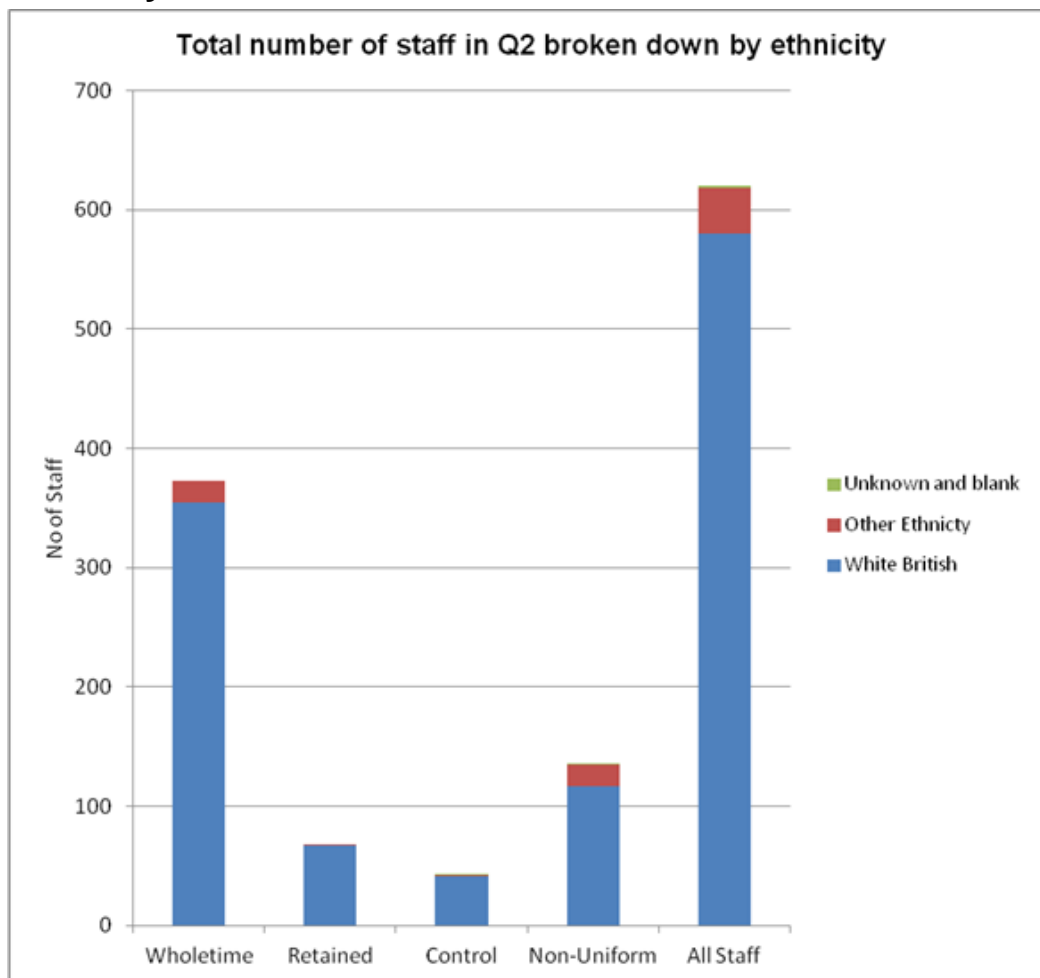


Gender of Staff

Gender	Wholetime	Retained	Control	Non Uniform	All Staff
Female	31	73	3	13	120
Male	12	63	65	360	500
Total	43	136	68	373	620



Ethnicity of Staff

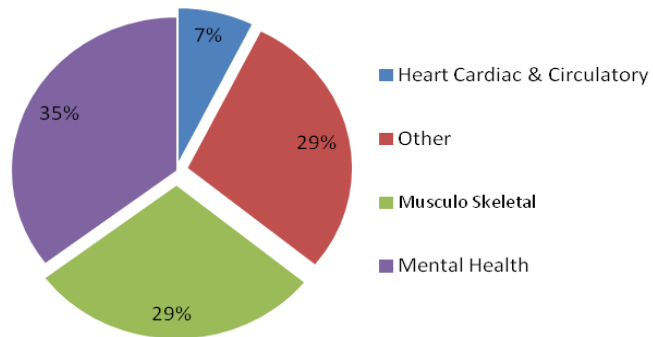


Ethnicity	Number	%
Asian or British Asian: Indian	3	
Asian or British Asian: Other	2	
Black or Black British African	4	
Black or Black British Caribbean	4	
Black or Black British other	1	
Chinese	2	
Mixed White and Asian	3	
Mixed White and Black Caribbean	2	
Other	1	
Other Mixed	2	
Unknown	2	
White British	580	
White Irish	4	
White Other	8	
Asian or British Asian: Pakistani	1	
Mixed White and Black African	1	
Total	620	

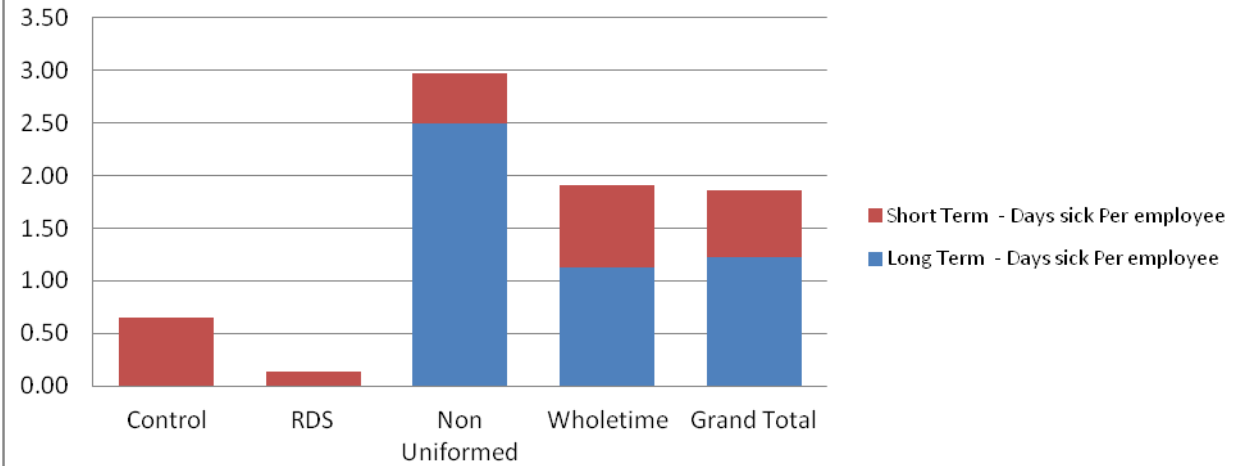
Ethnicity	Wholetime	Retained	Control	Non-Uniform	All Staff
White British	355	67	41	117	580
Other Ethnicity	18	1	1	18	38
Unknown and blank	0	0	1	1	2
Total	373	68	43	136	620

Days Lost to Sickness

Percentage of days lost to key causes for Q2



Days Lost to sickness 1 July to 30 September 2017



Staff Group	% Working time lost to sickness Q2	% Working time lost to sickness YTD
Control	7.29%	5.96%
Non-Uniform	5.72%	4.84%
WT	5.06%	5.53%
RDS	3.03%	2.15%

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

performance@rbfrs.co.uk