

# Strategic Performance Report



## Quarter 2 2018/19



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 2018/19

## Quadrant One: Service Provision

### Contents

Introduction .....	3
Key Highlights.....	5
Supporting Performance Information .....	9
Quadrant One: Service Provision ** ( <i>Data accurate as of 08/10/2018*</i> ) .....	9
Service Provision - Service Measures.....	21
Service Plans.....	25
Quadrant Two: Corporate Health Performance * .....	26
Budget Update.....	34
RBFRS Revenue Expenditure Quarter 2 2018/19 .....	35
Financial Position as at September 2018 (Capital) .....	37
Transition Bids Spend Summary .....	40
Procurement.....	50
Human Resources Performance .....	52
Disciplinary Cases, Grievances and Complaints.....	54
Quadrant Three - Priority Programmes .....	55
Quadrant Four - Risk.....	62
Corporate Risks (As of 29/11/2018) .....	62
Accident Investigations .....	78
Audit Recommendations.....	80
Appendices.....	88
Appendix A: Update on Progress of the ICT Strategy Year Two .....	88
Appendix B: Update on Progress of the Fleet Strategy .....	91
Appendix C: Update on Progress of the Peer Review Action Plan .....	93
Appendix D: Information Governance Report (July 2018 to September 2018) .....	95
Appendix E: Service Provision Measure Definitions .....	96
Appendix F: Corporate Health Measure Definitions.....	99
Appendix G: RDS Establishment and Availability.....	101
Appendix H: HR Supporting Charts .....	102

This version of the report was last updated on 14/12/2018

\* Data for previous quarters may show a revised figure due to data entry lag.

\*\* See appendix E for service provision corporate measure definitions. \*\*\*Previously known as Home Fire Safety Checks

# Strategic Performance Report Q2 2018/19

## Quadrant One: Service Provision

### Introduction

This Strategic Performance Board Quarterly Report retrospectively presents information from the Performance Management Framework and Corporate Measures and Targets for 2018-19, 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 to capture how performance contributes cumulatively to the year-end performance outcomes, offer explanation, analysis and mitigation for target outcomes, and to suggest positive means of carrying effective performance into the future.

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









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# Strategic Performance Report Q2 2018/19




## Quadrant One: Service Provision

### Key to Icons and Colours for Performance Measures




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

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

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

	No risk movement
	Risk decreasing
	Risk increasing

### Key to Audit Action Movement

	Audit action continuing to progress
	Audit action progress decreasing
	Audit action progress improving

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# Strategic Performance Report Q2 2018/19

## Quadrant One: Service Provision

### Key Highlights

#### Context

#### Key Data – July – September 2018

	Quarter 1 2018/19	Quarter 2 2018/19	Year to date 2018/19	Quarter 2 2017/18	Year to date 2017/18
<b>Emergency incidents responded to</b>	2,028	2,429 ↑	4,457	1,980	3,984
<b>Primary Fires</b>	274	282 ↑	556	261	513
<b>Secondary Fires</b>	307	555 ↑	862	241	612
<b>Special Services (RTC)</b>	120	118 ↓	238	116	221
<b>Special Services (other)</b>	347	377 ↑	724	346	667

Arrows represent change from previous quarter.

#### IRMP Progress

- Prevention Commitment 1:** To reduce the number of vulnerable people dying due to accidental fires in the home by conducting 35,000 Safe and Well\*\*\* visits over the next 5 years and 14,000 within the first two years.
- Since April 2017, we have completed 9,752 Safe and Well\*\*\* checks to individuals at heightened risk of dying in an accidental dwelling fire. IN order to achieve the target set by April 2019 a further 4250 visits will need to be conducted. In order to achieve this we are further developing referral pathways, weekly reporting and sharing resources of Safe and Well Technicians across each of the Hubs.**
- Prevention Commitment 2:** To reduce the volume of fires occurring in homes and injuries that result from them by conducting 12,500 Safe and Well\*\*\* visits over the next 5 years.
- Since April 2017, we have conducted 4,627 Safe and Well\*\*\* checks to individuals at increased risk of having a fire in their home and being injured as a result. We are currently exceeding this target and will undertake some further analysis of fires in homes to ensure we keep accurately targeting those most at risk of having a fire.**
- Protection Commitment 1:** Carry out 1,400 full fire safety audits per year in places where people are most at risk and where necessary standards are not being met.
- Since April 2017, we have concluded 1,370 audits. A further 114 full fire safety audits were conducted in Q2 and are awaiting further actions to be completed. We have actively targeted more premises within the Risk Based Inspection Programme, which are often more complex and time consuming. Results from these audits should be seen in the coming months.**

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# Strategic Performance Report Q2 2018/19

## Quadrant One: Service Provision

### 1. Successes

- 1.1 Safe and Well visits to those at risk of having a fire and being injured as result have continued to exceed the target this quarter by 214 visits.
- 1.2 The Community Safety Project Team (Tower Team) has delivered on its requirements to inspect 70 high-rise residential buildings, identified as being at risk following the Grenfell Tower fire. The team have produced a report and presentation for learning across the organisation.
- 1.3 During Q2, RBFRS successfully prosecuted Crestcourt Properties Ltd. for serious fire safety deficiencies at an HMO in Reading. The company was fined £177k. A further four legal action files have been brought forward to progress.
- 1.4 There is a 1.2 percentage point increase in the number of completed fire safety audits that required formal activity, compared to the same period last year.
- 1.5 There was a 20% increase in the number of incidents during the summer heatwave in Q2 (2429), compared to the number of incidents in Q1 (2028). This is also 473 more incidents than the same period last year. During this period, the Service opened the Operations Support Room and some tactical movement of resources was undertaken to deal with the operational demands.
- 1.6 Thames Valley Fire Control (TVFCS) handled 9,356 emergency calls during July and August, compared to 6,660 during the same period in 2017. The increase did have a slight impact on the time taken to answer calls and mobilise appliances. In addition, many of these calls were to outdoor locations, which are often more difficult to confirm exact locations of where to send a fire engine.
- 1.7 Wholtime crew turn out times have improved by 13.1 percentage points over the past 12 months and narrowly missed the target of 90% by 0.4%.
- 1.8 There has been a reduction in the number of deliberate primary fires in Q2 and there were 14 less than the same period last year, with 34 in Q2 2018/19 and 48 in Q2 2017/18.
- 1.9 99.3% of those undertaking their fitness test have met the fitness standard.
- 1.10 The percentage of eligible staff (553) where a PDI meeting has been recorded as having taken place is 90.8%, compared to 85.0% this time last year.
- 1.11 The number of employees from a BME background stands at 7%, exceeding the current target of 5% and have increased by 0.07% from last quarter due to total number of staff in post figures reducing. Compared to this quarter last year, we are 0.84% higher.
- 1.12 The number of female firefighters employed in the service (20) remains unchanged from last quarter, as no recruitment has taken place. The percentage of female firefighters has increased from last quarter by 0.1% to 4.2% because of Wholtime staff in post figures reducing. We continue to exceed our target of 4%
- 1.13 RBFRS now has 208 contracts in place, of which 54 are with Thames Valley partners. By working collaboratively, RBFRS have saved £28,835 so far this financial year, using Home Office methodology.
- 1.14 All actions on the Peer Review Action Plan are now complete or closed, as they are part of business as usual.
- 1.15 Nine audit actions were closed during this quarter.

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# Strategic Performance Report Q2 2018/19

## Quadrant One: Service Provision

- 1.16 The procurement team has a pipeline of contract renewals and re-tenders for the next five years which will reduce the risk of future non-compliant spend and enable the service to understand the market before seeking requirements through competition, therefore we can avoid expensive unnecessary spend and better manage our supply contracts.
- 1.17 The Community Safety Project Team, set up in response to the Grenfell Tower fire, have returned to working within the Hubs. During their 18 months the team have inspected 156 properties, set up MOU's with local authorities for joint inspections and found 10 high rise buildings with Aluminium Composite Material (ACM) cladding which are being managed in accordance with the interim measures as defined by Ministry of Housing, Communities and Local Government (MHCLG)

## 2. **Concerns and plans for improvement**

- 2.1 The number of deliberate secondary fires increased during Q2, from 76 in Q1 to 96 in Q2. A high proportion of these were 'fires in the open' (82 incidents = 85.4%). However this is still a reduction of 34 fires in the year to date figure (172), compared to the same period last year (208). Crews will be focusing on the impacts and dangers of deliberate fire setting as part of their schools education programme.
- 2.2 The number of casualties was above target for the third consecutive quarter and we are approaching the annual target maximum set (29), with 27 casualties so far this year. Safe and Well visits are focusing on cooking safety, which is the main cause of fires involving casualties. Further analysis is being undertaken and findings will be available in Q3.
- 2.3 There was a reduction in the number of Safe and Well visits to those at heightened risk of dying during this quarter (218 less visits than Q1). The hot weather during the quarter increased response demand, reducing crews' availability to undertake these visits. Action plans are now in place within each Hub to increase focus on these visits.
- 2.4 5 of the 11 referrals from Thames Valley Police (TVP) for individuals threatened with arson were not completed within the 48-hour target. This was primarily due to referrals not following the agreed process into RBFRS. Once these referrals were re-directed, visits were conducted within 48-hours. Managers are working with TVP to improve awareness of the new referral route
- 2.5 During Q2, there was one full shift where a wholtime fire appliance was unavailable due to crewing. Managers were unable to source any cover, either through stand-by moves or overtime, so the fire appliance was unavailable for the 9-hour day shift.
- 2.6 The overall availability of Retained Duty System (RDS) appliances fell by 4.7 percentage points in Q2, compared to Q1. Availability at individual stations varies considerably (73.5 percentage points) and work is underway to identify and develop individuals who are interested in becoming Watch Managers, as some stations only have one competent person in this role, which impacts availability.
- 2.7 In this quarter, we have seen an increase in the percentage of working time lost to sickness per employee. This is an increase of 0.6 percentage points on the previous quarter, but a 0.9 percentage point reduction compared to the same time last year, and is due to both short and long-term absence increasing this quarter.
- 2.8 The total days lost to sickness this quarter has increased by 12%, compared to Q1. However, it is 16% lower than Q2 last year.
- 2.9 The number of long-term sickness days (more than 28-days) lost has increased by 7.5% and short-term by 17.5%. Mental health sickness has increased this quarter by 174 days.

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## Quadrant One: Service Provision

2.10 The percentage of eligible operational staff in qualification has shown a slight decrease of 0.4 percentage points compared to last quarter.

2.11 The number of disabled staff employed by RBFRS has decreased from last quarter by 11

### 3. **Emerging issues, risks, and focus for next quarter**

3.1 One risk has been reduced, and the current risk score has come down,

3.2 Two new risks have been added this quarter. One around Subject Access Requests and the other in relation to Employer Pension Contributions.

3.3 All other risk scores have remained the same as previous quarter.

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**Supporting Performance Information****Quadrant One: Service Provision \*\* (Data accurate as of 08/10/2018\*)**

ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Dwelling Fire Deaths and Safeguarding											
1	Number of Fire Deaths in Accidental Dwelling fires	0	0	0↔			0	0	0	2	↑
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >) We continue to deliver Safe and Well visits to those at risk of dying, as outlined in measure six, to proactively contribute to the prevention of fire deaths in accidental dwelling fires. At the beginning of Q3 a fire death occurred. Further comment will be made in the Q3 report, as the investigation progresses.									
2	Number of Fire Casualties in Accidental Dwelling Fires	29 MAX	*16	11 ↑			27	15 MAX	1	*8	↓
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >) Although a reduction on the Q1 figure, the number of casualties has been in double figures for the last three consecutive quarters. Looking at historic performance, casualty numbers have been in single figures for the last three years so this now represents a sustained trend. The majority of the injuries are due to minor smoke inhalation with some burns and these are primarily sustained through cooking fires. It also appears that the injuries are predominantly sustained by people who live alone. As detailed in Q1, fire casualties are persons who have been affected by the fire, such as through smoke inhalation, but who do not suffer longer term health impacts. To put this into context of the 11 casualties in this quarter, 9 were recorded as slight (meaning attending hospital as an outpatient) and 3 as serious (meaning attending at least an overnight stay in hospital as an in-patient).  This quarter all the casualties came from different incidents. Hub Managers have intensified the focus of Safe and Well visits on cooking related risks and providing appropriate advice to those people who live alone. A new initiative has begun working with different areas of the community, such as hard to reach groups like the Nepalese community in east Reading.  Further analysis is being undertaken to look at these figures against MOSAIC data and the high-risk occupancy groups outlined in the IRMP prevention evidence base to identify patterns and target community safety activity in the right areas. An outline report will be presented to managers in Q3.									

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# Strategic Performance Report Q2 2018/19

## Quadrant One: Service Provision

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									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
3	% of safeguarding referrals made to Local Authorities within 24 hours	100%	100%	100% ↔			100%	100%	100%	100%	↔
		(Source: Manual calculation by Safeguarding Coordinator) There were 46 safeguarding referrals made during Q1 and 49 in Q2 Within Q2, we have signposted 49 safeguarding referrals through to the Local Authorities. More than 50% of all staff have received the Safeguarding Children training.									
4	The number of deliberate primary fires	Monitor	*39	34 ↑			73	Monitor	48	81	↑
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 > ) Data as 31/07/18) There has been an overall reduction in deliberate primary fires in Q2 and significantly less than 2017/18. Hub managers continue to build analysis of these figures in order to inform community safety activity. Use of incident mapping systems will help to triangulate existing data to focus on specific areas across the county. A large proportion of these incidents are vehicle fires and fortunately, the number of fires in homes remains relatively low.									
5	The number of deliberate secondary fires	Monitor	76	96 ↓			172	Monitor	76	206	↑
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 > ) Data as of 31/07/18)									

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# Strategic Performance Report Q2 2018/19

## Quadrant One: Service Provision

ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		Overall, all emergency incident numbers increased in Q2 and there were 248 more secondary fires in Q2, compared to Q1 (accidental and deliberate). We saw a rise in the number of deliberate secondary fires (an increase of 20 compared to Q1), of which most were ‘fires in the open’. There were more accidental secondary ‘fires in the open’ over the school holidays and period of fine weather, the combination of which may exacerbate any deliberate intent. Crews focus on the impacts and dangers of deliberate fire setting as part of fire safety education in schools throughout the academic year. We will consider any areas of particular focus where we have experienced these incidents, working locally with partners to address these.							Central Hub	23 incidents	
									West Hub	55 incidents	
Prevention											
6	Risk of Death	8,200	*1,980	1,762 ↓			3,742	4,100	*1,019	*2,469	↑
7	Risk of Injury	2,500	*742	839 ↑			1,581	1,250	*813	*1,593	↓
	TOTAL	10,700	2,722	2,601 ↓			5,323	5,350	*1,832	*4,062	↑
	Number of Safe and Well visits delivered to those who are at heightened risk of dying/being injured in the event of an accidental dwelling fire	<p>(Source: Reports &gt; Stats &gt; CorporateMeasuresAndReportableServiceMeasures_18-19 &gt; )</p> <p>Data as of 05/11/2018</p> <p>We continue to make good progress against the overall target for the year, which was adjusted upwards to account for the shortfall in visits in 2017/18, to ensure we meet the overall two-year target that we set out to achieve. We had previously identified that we were unlikely to achieve the target for 2017/18 as our planned work was significantly impacted by our activity in response to the Grenfell Tower incident during that year. This said, at the time our teams visited over 4,700 homes of those living in high-rise buildings to provide fire safety advice and reassurance.</p> <p>We continue to see a positive level of delivery in Q2 of 2018/19, building on the good work of Q1. The overall number of visits has fallen just short of the year to date target. This is positive given the in-year increase in target (previously 7,000) to ensure we deliver against the two-year plan.</p> <p>Q2 activity has been directly impacted by two influencing factors:</p> <ul style="list-style-type: none"><li>Higher leave period of the summer creating some reduction in specialists such as Community Safety Advisors.</li><li>Hot weather through a significant period of Q2, which in turn created an increase in demand towards response activities, impacting the time crews could commit to undertaking visits.</li></ul>									

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									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD	
		It is recognised that the figures are below the target for reaching those at risk of death, whilst progress against those at risk of injury are ahead of target. We continue to build the focus of hub efforts towards Corporate Measure (CM) 6 (visits to those most at risk of death due to fire) to ensure we are visiting those most at risk. To drive this progress we are closely managing activity including: <ul style="list-style-type: none"><li>• Maintaining up-to-date records to support teams in targeting risk groups.</li><li>• Completing visits as soon as practicable and in line with policy.</li><li>• Weekly reporting of Safe &amp; Well status to monitor progress and address issues impacting that progress.</li><li>• Sharing of resources across hubs to match risk and meet demand.</li><li>• Continued development of collaborative working with the Unitary Authorities and other agencies to evolve referral pathways.</li></ul> These measures will assist us to ensure that are figures are on target for Q3										
8	% of priority home safety referrals, where there has been a threat or incidence of arson, completed within 48 hours	100%	100%	54.5% ↓			75%	100%	*57.1%	50%	↑	
		(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >)										
		There were 9 Referrals in Q1 and 11 in Q2										
		There were 11 Threat of Arson (ToA) referrals in Q2, 5 of these were technically completed outside of the 48-hour target. Detailed review of these events has identified an issue with the way Thames Valley Police (TVP) are routing the referrals. The agreed process requires that all ToA referrals come via TVFCS to the Duty Officer so that we can provide a 24/7/365 immediate response. However all of these referrals were received via the HFSC email inbox either approaching close of play on a Friday or on a Saturday. The HFSC inbox is monitored during normal office hours and subsequently these referrals were not picked up until the following Monday morning. Once formally received all referrals, except one, were actioned within 48 hours. The exception was due to the referee being in hospital. This latter example highlights that there are scenarios where despite following process there can be a delay in meeting the target.										
		In addition, there was a sixth referral that initially showed as outside the target. This referral did come in via TVFCS and an initial intervention was conducted within 24 hours by fire crews and followed up by a Safe and Well Technician fitting an anti-arson letterbox after the weekend. However, the relevant paperwork was only received for the second visit. This has highlighted some internal inconsistencies in closing the loop following an intervention and action has been taken to address these issues. This referral is considered as satisfying the 48-hour target. Managers are working with colleagues in TVP to address understanding across their team about the routing of referrals. We will also consider how we can further adapt our own processes to mitigate any delay as a consequence of misrouting.										

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## Quadrant One: Service Provision

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									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
9	% of priority category 1 home safety referrals, where there is a significant heightened risk of an individual having a fire in their property, completed within 48 hours	Monitor	n/a	n/a			n/a	Monitor			
		(Source: ) Awaiting full Policy Definition. A draft definition has been proposed by prevention policy and the next stage will examine the impact of this on workloads. This is due to be published in November 2018. Procedures and systems can then be set up to allow for implementation and recording of this data.									
Protection											
10	Full Audits	1400	*242	235 ↓			477	700	*206	*460	↑
	Total Number of Full Fire Safety Audits carried out	(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >) In Q2, we completed and closed 235 Fire Safety Audits (FSAs) as set out in the measure. In line with our IRMP commitments and two-year targets, we continue to focus resources on our Risk Based Inspection Programme (RBIP) as a key element of our FSA activity. Of the 235 FSAs, 111 (47%) were undertaken as part of planned RBIP. The remaining 124 (53%) were undertaken as reactive activity driven by Post Fire or other incident actions, complaints or requests for advice. It is important to recognise that we actually closed a total of 600 protection activities over the quarter. The remaining 365 activities (which are also reactive work) were formed from our statutory obligations to consult as part of the Building Regulations process and other Licensing Act Applications. As such it can be seen that for Q2 the 235 FSAs accounted for 39% of activities closed, with the 365 Statutory Consultations accounting for 61% of protection activities closed. We continue to develop our capability to ensure we balance the delivery of our planned RBIP and the range of other activity we must undertake to meet our statutory duty. RBFRS has already identified the need to build our regulatory workforce and capability and, with the support of the Fire Authority, has taken proactive steps to address this with the recruitment of 10 new Fire Safety Inspecting Officers (FSIOs). We are also supporting key members of staff in completing fire-engineering degrees. Our new FSIO's are being supported and coached by experienced inspectors and we recognise									

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# Strategic Performance Report Q2 2018/19

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									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		<p>that this has short-term impacts on resource deployment and consequently protection outcomes. As our FSIO's develop the next phase will see them transition to work as peer pairings throughout Q4. This will facilitate a greater number of FSA's to be completed. It is projected that by the end of Q4 that the total number of FSA's will be 1200. This falls short of the year's target, it is however expected to meet the 2018/19 target within 6 weeks of Q1 2019/20'. It is anticipated that a majority of the new inspectors will be deemed competent in role within 12 to 18 months (Summer 2019).</p> <p>It is reminded that, in response to the Grenfell Tower tragedy the Community Safety Project Team (CSPT), also known as the Tower Team, were tasked with providing a phased approach to address issues and concerns in High Risk Residential Buildings (HRRB's). The four phases focused on:</p> <ul style="list-style-type: none"><li>• Initial response</li><li>• Consolidation of initial work through a multi-agency approach</li><li>• Responding to information released as part of the public inquiry</li><li>• Moving to a new normality</li></ul> <p>As part of the initial response RBFRS responded by inspecting the common parts of all residential high rise buildings in Berkshire(156). During this phase our station and community safety teams provided support and re-assurance to 4700 residents in high rise buildings. Additionally the tower team widened the scope, considering high rise hotels, residential schools and Care Quality Commission (CQC) registered premises.</p> <p>Following agreement with each of the unitary Authorities, Memorandums of Understanding (MOU) were established to facilitate a joint inspection protocol. This joint working highlighted a number of high rise buildings, of which a target of 70 of the most at risk were inspected by this joint taskforce.</p> <p>A total of 76 joint inspections were conducted, also enabling RBFRS Fire crews to update Site Specific Risk Information (SSRI) data. Of these joint inspections 95% resulted in a 'Notification of Deficiencies' with 60% requiring a follow up inspection. This approach has ensured good and ongoing engagement with local authority partners and effective understanding of relative roles, responsibilities and ownership of actions that best support management of risk and the deployment of resources.</p> <p>Within this work the teams identified 10 HRRB's with Aluminium Composite Material (ACM) cladding:</p>									

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# Strategic Performance Report Q2 2018/19

## Quadrant One: Service Provision

ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		<ul style="list-style-type: none"><li>Six high rise residential buildings</li><li>Three Hotels</li><li>One Hospital</li></ul> <p>These 10 premises are being managed in accordance with the interim measures as defined by Ministry of Housing, Communities and Local Government (MHCLG)</p> <p>RBFRS has actively engaged with both the Review into Building Regulations and Fire Safety and the Public Inquiry, providing information and evidence when requested. We are active participants in the Industry Response Group (IRG) and working with the National Fire Chiefs Council (NFCC) as part of Work Group 5 (Competency Framework).</p> <p>The CSPT, in preparation for handover of activity back to Service Delivery Hubs, have invited Fire Safety Inspecting Officers (FSIO's) from the 3 Hubs to accompany them on multi-agency inspections. A training event for FSIOs and Hub managers has been provided, detailing learning gained. The CSPT are now in the process of delivering one-to-one handovers to Hub FSIOs of every HRRB that has ongoing fire safety issues.</p>									
11	Satisfactory	50% max	*56.2%	66.8% ↓			61.4%	50% max	*58.3%	*64.6%	↑
12	Informal Activity	45% min	*26.5%	23.8% ↓			25.2%	45% min	*28.2%	*27.2%	↓
13	Formal Activity	5% min	*0.8%	1.7% ↑			1.3%	5% min	*0.5%	*0.4%	↑
14	Success Rate	4:1		1:1			1:1	4:1			
	Outcomes of Full Fire Safety Audits (above)	<p>(Source: Reports &gt; Stats &gt; CorporateMeasuresAndReportableServiceMeasures_18-19&gt;)</p> <p>Success Rate: Manual input from Area Manager Service Delivery (Prevention and Protection)</p> <p>The narrative in CM10 provides a context as to why we are not yet meeting the expected outcomes of the corporate measures in CM11 – CM13. RBFRS will continue to proactively support businesses, however, those Responsible Persons who fail to provide adequate fire safety provisions should expect and will fall within the scope of formal activity. It is positive to see that the formal activity in CM13 is significantly increased on Q1 with key activities taken within this quarter being:</p> <ul style="list-style-type: none"><li><b>Informal Action</b> Educate &amp; Inform / Deficiency Notice - 56</li><li><b>Formal Action</b> Action Plan/Alterations/Enforcement/Prohibition/ Prosecution – 4</li></ul>									

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									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		<ul style="list-style-type: none"><li><b>Legal Action</b> Successfully secured a £177K fine levied against Crestcourt Properties Ltd in relation to serious fire safety deficiencies found at an HMO in Waylen Street, Reading. A further 4 Legal Action Files were brought forward to be progressed.</li></ul> <p>Additionally, we have secured the Legal services of West Berkshire Council</p>									
Response											
15	% of occasions where the first fire engine arrives at an emergency incident within 10 minutes, from time the emergency call was answered	75%	73.4%	69.3% ↓ (73.5% excluding all outdoor fires)			71.1% (73.8% excluding all outdoor fires)	75%	*73.0%	*72.0%	↓
		<p>(Source: Reports &gt; Stats &gt; CorporateMeasuresAndReportableServiceMeasures_18-19&gt;)</p> <p>The summer heatwave significantly impacted on our response function with a 20% increase in calls between Q1 and Q2. The table on page 4 illustrates there were 449 more incidents responded to compared to Q2 2017/18, and of these 314 were secondary fires which includes grass or field fires. Operational demand within TVFCS was exceptionally high during Q2, with large numbers of calls being received. This created pressures around call handling and mobilisation times which in turn contributed to the longer response time figures. The Service was often dealing with several simultaneous open-air fires during the summer period, which meant that significant resources were committed over extended periods. If we remove all 'outdoor fires' from the response time calculation we see a response of <b>73.5%</b> within the 10 min target, which is more in keeping with previous figures for Q1 2018/19 (73.4%) and Q2 2017/18 (73%). Similarly, the year to date figure for 2018/19 would be 73.8%.</p> <p>The nature of deploying our resources in response to these events contributed to increased response times as the number of available fire engines were reduced at times and those responses may have incurred longer travel distances as resources were dynamically deployed and backed up across the county. Given the widespread nature of the heatwave, our neighbouring FRSs found themselves in a similar position making mutual assistance more complex and on a number of occasions RBFRS resources were utilised at protracted incidents in neighbouring counties, also contributing to the effect on our response time.</p> <p>The Service was put on 'condition amber' for adverse weather between 11 July and 30 August resulting in a heightened level of planning via the Operations Support Room, which resulted in some tactical movement of resources such as the water bowser from Pangbourne to Crowthorne.</p>									

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									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		As identified in Q1, meeting this target requires on-going work to improve performance across all the elements that make up the response time. These being the call handling time, crew turnout time and travel time. Service Delivery managers continue to examine the factors within each of these three areas that can be influenced to provide a positive improvement to the overall response standard.									
16	Whole Time(shifts)	100%	100%	98.4% ↓			99.2%	100%	99.9%	99.9%	↓
17	RDS (hours)	60%	32.4%	27.7% ↓			30%	60%	Awaiting revised figure	Awaiting revised figure	
	% of shifts/ hours where there is adequate crewing on frontline fire engines (above)	WT Source: Stats > Corporate and Service Measures > SC_Appliance Availability (from Vision) and a manual check of FireWatch.									
		The Service aims to maintain 14 wholetime crewed appliances (pumps) and a number of specialist vehicles to be available 24/7, 365 days a year. A range of IRMP decisions underpinned this operating model. As a result of these decisions the Service now operates 14 Wholetime appliances with 328 - as opposed to 13 Wholetime appliances with 354. In a period of significant financial constraint the Authority has created a very efficient and lean wholetime crewing model.									
		Out of the 184 shifts during Quarter 2, fire engines were not available due to crewing on 3 occasions, resulting in 98.4% availability. The primary reason for this was short notice sickness absence taking the global crewing figure below the minimum of 56 personnel. This measure defines a crewing deficiency when a fire engine is not available for more than two hours. This two-hour window provides time for managers to arrange late notice Pre-Arranged Overtime (PAOT) where off duty personnel are contacted and asked to provide cover. On most occasions personnel on the off going watch will stay on duty until the cover arrives, however this is not always possible due to personal commitments. On two of the occasions in Q2, PAOT cover was sourced and the fire engines were made available shortly after the two hour cut off (2hr 8mins and 2hr 11mins respectively). On the third occasion, managers were unable to source any PAOT cover and the fire engine was unavailable for the whole day shift of 9 hours.									
		The crewing model operates with a tolerance for sickness and/or training events, however this tolerance can be exceeded and as previously stated, the model operates on a lean and efficient basis. PAOT supports this model effectively and the measure has been achieved in the last two quarters. Managers will continue to monitor and manage sickness absence in line with RBFRS policy and further scrutinise other factors including leave and how training events are planned and delivered, particularly where this is outside of centrally planned L&D training events.									
		Positive factors affecting availability:									
		<ul style="list-style-type: none"><li>14 new whole time recruits commenced postings to stations towards the end of the quarter (mid-September).</li></ul>									

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									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
			<ul style="list-style-type: none"><li>2 RDS firefighters commenced six-month temporary wholetime contracts.</li><li>Review and refresh of leave policy is planned for Q3 in preparation for 2019 leave pick.</li><li>Response Support Group to assess the impact and management of training events across the service.</li></ul>								
			<p>(RDS Source: Download direct from Firewatch)</p> <p>Q2 has seen a drop in overall RDS availability when compared with Q1. The summer leave period impacted most stations and particularly those with dual contract personnel who have to take leave in line with their wholetime contracts.</p> <p>To demonstrate consistency with the IRMP decisions taken in April 2017, which included the closure of Pangbourne and Wargrave stations, the overall RDS availability figure would be higher at 34.9% if these stations are removed from the calculation.</p> <p>The figures show a clear difference between those stations that are maintaining a good level of availability over or approaching the target and those that are routinely lower. Recruitment has and continues to provide new personnel across the RDS stations and as these personnel become qualified in Breathing Apparatus (BA) they will actively contribute to availability.</p> <p>However, where stations do not have enough personnel with key qualifications, such as incident command or emergency driving, the fire engine cannot provide fire cover. In several cases, there is only one watch officer at a station and these individuals are dual contract. This has a disproportionate impact on availability as can be seen with Mortimer and Lambourn. Service delivery managers are focusing attention at these locations to identify and develop personnel who are interested in becoming watch officers. This process takes time in order to ensure these individuals not only receive the appropriate training but are also nurtured and mentored to enable them to be confident and competent in the role.</p>								

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		<p>The factors described above are part of a number of variables that impact on accurate forecasting of availability that also include:</p> <ul style="list-style-type: none"><li>- Unplanned leavers; this occurs for a variety of reasons. Examples include moving out of the catchment area and changes to primary employment</li><li>- Sickness absence; this has a disproportionate effect on RDS as gaps in cover can't be filled as it would with Wholetime personnel</li><li>- Leave; this is managed at local level but there are complexities with dual contract staff. Again this has a similar effect to sickness as gaps aren't backfilled in the same way.</li><li>- Attendance at courses; we offer numerous opportunities throughout the year, RDS personnel attend when they can around primary employment and personal commitments, this can delay the time to achieve qualifications</li><li>- Qualification achievement; RDS personnel are supported through training in a number of ways however there is no guarantee that they are successful at each stage and further assessment may be necessary, delaying time to achieve qualification.</li></ul> <p>Based on best case scenarios the following table forecasts predicted availability moving forward:</p> <table><tr><th>Station</th><th>Current establishment</th><th>Applications in progress</th><th>Comments</th></tr><tr><td>Hungerford</td><td>10</td><td>7</td><td>3 new personnel are scheduled for their final BA course in June 2019, which if successful forecast availability will reach approx. 63% in July 2019. Availability is predicted at between 40-50% up to that date.</td></tr><tr><td>Lambourn</td><td>8</td><td>4</td><td>With the planned addition of an extra watch officer in Feb 2019 and 1 person scheduled for the BA course in June forecast availability should reach approx. 30-35% in July 2019.</td></tr><tr><td>Pangbourne</td><td>6</td><td>0</td><td>Pangbourne fire station is planned to close when the New fire station at Theale opens. This has caused difficulties in ongoing recruitment from the local community and officers are looking at how Pangbourne can be sustained through this period. Availability is predicted to be broadly similar in Q3.</td></tr><tr><td>Wargrave</td><td>15</td><td>2</td><td>Based on a number of factors including personnel successfully completing competency training and returning from restricted duties availability is predicted to reach 60% by the end of December 2018</td></tr></table>										Station	Current establishment	Applications in progress	Comments	Hungerford	10	7	3 new personnel are scheduled for their final BA course in June 2019, which if successful forecast availability will reach approx. 63% in July 2019. Availability is predicted at between 40-50% up to that date.	Lambourn	8	4	With the planned addition of an extra watch officer in Feb 2019 and 1 person scheduled for the BA course in June forecast availability should reach approx. 30-35% in July 2019.	Pangbourne	6	0	Pangbourne fire station is planned to close when the New fire station at Theale opens. This has caused difficulties in ongoing recruitment from the local community and officers are looking at how Pangbourne can be sustained through this period. Availability is predicted to be broadly similar in Q3.	Wargrave	15	2	Based on a number of factors including personnel successfully completing competency training and returning from restricted duties availability is predicted to reach 60% by the end of December 2018
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									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		Mortimer	7	3	A number of courses are planned in for an extra watch officer, additional fire driver and BA. Based on this forecast availability should reach approx.47% in March 2019 and 60% by July 2019.						
		Crowthorne	13	0	Crowthorne consistently achieves the corporate target and this is set to continue into Q3/Q4						
		Maidenhead	15	6	With a number of personnel attending a BA course in mid-March and an additional dual contract member expected around the same time forecast availability should reach 60% by April 2019						
		9 personnel are expected to attend an initial course in Jan 2019. Over the following 12 months they will begin to contribute to appliance availability as they pass various operational modules. Principally this depends on achieving competency as a breathing apparatus wearer and team leader. Throughout the year more accurate reporting will follow as course dates are populated and personnel complete the training									
Customer Service											
18	Domestic Respondents	100%	100%	100% ↔			100%	100%	98.7%	98.7%	↑
19	Commercial Respondents	95%	100%	100% ↔			100%	95%	100%	100%	↔
20	Fire Safety Audit Respondents	90%	100%	98.3% ↓			98.7%	90%	100%	100%	↓
	% of Questionnaire respondents satisfied with the overall service (above)*	(Source: Owned by Data & Performance - manual calculation from results of postal surveys returned) During Q2: 113 surveys were sent out following domestic fires. 41 responses were returned and 100% were satisfied. 26 surveys were sent out following fires in commercial premises. 10 responses were returned and 100% were satisfied. 142 surveys were sent out following fire safety audits. 60 responses were returned and 98.3% were satisfied.									

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### Service Provision - Service Measures

(Data accurate as of 08/10/2018)

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Response Service Measures											
1	Dwelling Fire	Monitor	*60.7%	50% ↓			55.6%		*53.23%	*53.5%	↑
2	Road Traffic Collision	Monitor	*54.2%	44.3% ↓			49.4%		*52.7%	*54.4%	↓
	% of occasions a second fire appliance attending arrives within 2 minutes of the first appliance to arrive	<i>(Source: Reports &gt; Stats &gt; CorporateMeasuresAndReportableServiceMeasures_18-19&gt;)</i> These service measures are intrinsically linked to performance in measure 15. Due to the drop in overall response times in Q2, we would expect this measure to also drop and for broadly the same reasons. As fire cover was stretched due to the increase in incidents involving multiple fire engines and use of over the border resources, this impacted on the ability for the second fire engine to arrive within two minutes of the first. Key to improving performance is to maintain a pre-planned minimum level of fire cover at key locations within RBFRS during times of peak demand. The ongoing actions to manage overall response times will have an effect on this measure and this will be monitored into Q3.									
3	5 seconds	92%	89.9%	89.7% ↓			89.7%	92%	*89.6%	*89.2%	↑
4	10 seconds	97%	97.8%	96.4% ↓			96.9%	97%	*97.7%	*97.5%	↓
	% of occasions where time to answer emergency calls is within (above)	<i>(Source: Reports &gt; Stats &gt; CorporateMeasuresAndReportableServiceMeasures_18-19&gt;)</i> <i>Issue with Call Logger, did not record all calls during May/June.</i> The hot dry weather experienced during June continued through July and into August. To provide some context, TVFCS handled 9356 emergency calls during July and August 2018, compared with 6660 during the same period in 2017, which is an increase of 40%. The abnormal weather conditions caused increased levels of operational activity in not only the three FRS of the Thames Valley but the whole South East region. Throughout July and early August, TVFCS experienced repeated periods where there were large increases in incoming call volumes, with large numbers of calls being received in very short time									

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									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		periods. This put capacity within TVFCS under pressure and is responsible for the drop seen against the performance measures for answering emergency calls. This issue was further exacerbated by the high levels of operational commitment, which means that travel times to incidents become more stretched as more incidents occur. This led to higher volumes of emergency calls for each incident being received for longer periods until the first fire appliance arrives on scene. During September, call volumes reduced to a level more consistent with seasonal norms, with performance for September taken in isolation exceeding target values.									
5	Within 90 seconds	80%	73.8%	71.3% ↓			72.5%	80%	76.8%	76.7%	↓
6	Within 120 seconds	95%	85.2%	83.5% ↓			84.3%	95%	86.2%	87.0%	↓
	% of occasions where time to mobilise (above)	<i>(Source: Reports &gt; Stats &gt; CorporateMeasuresAndReportableServiceMeasures_18-19&gt;)</i>  The weather conditions and levels of demand referred to above also had an impact on the time taken to handle calls and mobilise appliances. Calls to fires in outdoor locations take longer to handle than those to premises, due to the need to confirm exact locations from callers who may not be familiar with the areas they are calling from and in matching the information given to an appropriate gazetteer point to enable mobilisation. Supervisory managers are less able to give support to call handlers dealing with these calls due to the volume of calls being received, leading to slower mobilisation. It is notable that, in line with performance relating to call answering, performance against these measures recovered to values that are more normal in September when demand reduced.  Although September's performance improved, TVFCS performance against these measures remains some way short of target. It is anticipated that the work on revised performance measures for TVFCS being led by CFO Furlong will provide TVFCS Management with information that allows causal factors to be more clearly identified and for outcomes to be improved.									

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									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
7	Whole Time under 90 seconds	90%	*89.6%	89.6% ↔			89.6%	90%	77.0%	76.5%	↑
8	RDS within agreed timeframe	100%	TBC	See below			TBC	100%			
	% of occasions where crews turnout within the agreed timeframes	(Source: Reports > Stats > CorporateMeasuresAndReportableServic5Measures_18-19 > ) This measure has continued to improve every quarter since Q2 2017/18 and is only marginally short of the target. This reflects the focus of Hub managers in managing performance in this area. Turn out times are a key component of achieving the Response time (measure 15) and so it is important that we maintain this trajectory.									
There are a number of reasons why the turn out time can be missed. RDS personnel attend the station from a home or work location and in some cases will use a vehicle for this journey. This means that at least four people are travelling from different places within the locality of the station area and are subject to the same driving regulations as any other member of the public. Should one of those individuals be delayed this means that the fire engine cannot proceed to the incident until all personnel are present. For example, this is what happened with the failures at Pangbourne and Mortimer, one was a vehicle failure and the other due to traffic conditions. In most cases, we are also looking at small numbers, which disproportionally affects the overall percentage. Pangbourne, Mortimer and Wargrave only had one failure each and Crowthorne had the highest rate with three. Crowthorne had the highest availability for Q2 and attended the most incidents; this will increase the probability of failures occurring. Hub managers to look for trends and to determine the validity of each case monitor these failures.											
				Number of times mobilised		% within agreed timeframe		Agreed timeframe			
05 Hungerford				34		100%		360			
06 Lambourn				2		100%		480			
07 Pangbourne				3		66.7%		360			
09 Wargrave				10		90.0%		420			
11 Mortimer				3		66.7%		420			
15 Crowthorne				51		94.1%		360			
19 Maidenhead				14		85.7%		360			

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									Q1 17/18	YTD 17/18	17/18 Vs 18/19 YTD
9	Volume of activity undertaken by Fire Safety Inspecting Officers	Definition agreed with business in July 2018 and SQL still to be built.									

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### Service Plans

To ensure effective delivery of our services, in line with our strategic plans and priorities, the various activities undertaken across functions are detailed and monitored through Service plans that are developed and maintained by Heads of Service. Service Plans are overseen by Heads of Service and reviewed by the appropriate Director. By exception, matters may be reported at Strategic Performance Board by the relevant Heads of Service.

By monitoring for the delivery of outputs from these activities we can assure the Fire Authority and other external stakeholders that arrangements associated with the management of financial, governance and operational matters are appropriate.

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

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

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

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

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



## Quadrant Two: Corporate Health Performance \*

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Human Resources											
1	% of working time lost to sickness, across all staff groups	3%	3.4%	4.0% ↓			3.7%	3%	4.9%	4.9%	↑
		<p>(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)</p> <p>In this quarter, we have seen an increase to the percentage of working time lost to sickness per employee. This increase of 0.6% on the previous quarter, but a 0.9% reduction compared to the same time last year, is due to both short and long-term absence increasing this quarter.</p> <p>The total days lost to sickness this quarter has increased by 12% (915 in Q1, compared to 1039 in Q2) when compared to the same period last year the total days lost to sickness is notably lower (1231 days lost in Q2 2017/18).</p> <p>Long-term sickness increased from 532 days in the previous quarter to 575 days in Q2. Short term increased from 383 in the previous quarter to 464 days in Q2.</p> <p>Respiratory absence has been a high absence reason in recent reports. Absence due to this type has decreased this quarter by 74% compared to the previous quarter and is 45% lower than the same quarter last year (Q2 2017/18 = 45 days, Q1 2018/19 = 95 days and Q2 2018/19 =25 days).</p> <p>Gastro-Intestinal absence remains a high level of absence this quarter, however it has reduced compared to Q1 (128 days to 109). Analysis of this data has taken place and does not reveal any particular trends other than it being over the Summer period.</p> <p>There are still a small number of sickness absences being recorded as 'unknown' and work is underway to identify the reason so support mechanisms can be put in place as appropriate.</p> <p>Case management support and guidance is provided to managers. Employee welfare meetings and the promotion of all available support continues. The assistance of Occupational Health and the Health and Fitness Team are sought to prevent absence and support an early return to work.</p> <p><b>Mental Health</b></p> <p>There has been an increase of 174 days (52%) on the previous quarter. Mental health absences equated to 28% of the total days lost to sickness this quarter, compared to 16% last quarter. 158 days (11 episodes) were lost in Q1 and 332 days (18 episodes) in Q2. Three</p>									

\*See appendix F for corporate health measure definitions

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# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		<b><u>Support and Health Promotion</u></b> <b>Benenden</b> At the end of Q2 we had 424 members and 21 cases had been supported. Further clarification on scheme benefits have been publicised. RDS personnel received a specific communication to highlight how the scheme could work for them. A series of watch visits took place to explain how the scheme could work for both existing and potential members. <b>EAP Promotion</b> The August issue of Shout included an article on Health Assured, which covered their full range of services, and ways staff can engage with the information available. There were 5 calls to this service; the reasons for calling were mental health and work-related stress. Additionally there were 121 hits on the on-line portal. <b>Health Promotion</b> The following promotions took place this quarter: Skin Cancer Awareness and Sun Safety, Blood in Pee, World Suicide Prevention Day, and Cycle to Work Day.									
2	% of eligible operational staff successfully completing fitness test	100%	99.3%	99.3% ↔			99.3%	100%	98.8%	98.8%	↑
		(Source: Data calculated and supplied by HR) 99.8% of eligible staff have been tested – one flexi-duty officer test is outstanding, this has been scheduled as a priority for October 2018. Of those tested 99.3% passed the test. Since Q1, several operational personnel have returned to full duties having passed a fitness test.									
3	% of eligible staff with Personal Development Appraisals	100%	54.5%	90.8% ↑			90.8%	100%	85%	85%	↑
		(Source: Data calculated and supplied by HR) 553 staff were eligible to have received a Personal Development Interview (PDI) meeting between April and June 2018. Dual contract employees only require one PDI and therefore have only been counted once.									

\*See appendix F for corporate health measure definitions

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance			
									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD	
		Of this 66 employees were exempt for the following reasons: <ul style="list-style-type: none"><li>• 51 new employees</li><li>• 15 employees who have been away from the workplace for the duration of the period for various reasons including maternity and long-term sickness.</li></ul> The figures only account for those PDI meetings recorded on the system up to and including 30th September 2018. 502 staff are recorded as having had their PDI meeting (303 in Q1), which equates to 90.80%. 51 remain not recorded on FireWatch (253 in Q1). Of the meetings that have taken place 289 PDI forms have been returned to HR (108 returned in Q1) 213 still to be returned.										
4	% of eligible operational staff in qualification	100%	99.5%	99.4% ↓			99.4%	100%	98.8%	98.8%	↑	
		<i>(Source: Data calculated and supplied by L&amp;D)</i>  This is the corporate measure for Q2 of the 2018/19 year. It provides overall analysis of core operational training. Further detailed analysis and discussion will be undertaken at the Workforce Planning Group, which ensures relevant stakeholders from across the Service consider workforce matters and associated impacts. Locally in the Learning and Development department, detailed analysis is undertaken and liaison with individual managers as necessary to address requirements, competence related matters and issues of attendance.  Training and assessment activities in RBFRS are aligned with the Fire Professional Framework, which outlines the operational core skills requirements of Firefighters and Officers. National Occupational Guidance further informs the core skill areas (Water, Working at Height, Road Traffic Collision (RTC), Hazardous Materials, Casualty Care, Breathing Apparatus (BA), Driving, Incident Command and Core Skills).  Our performance for Q2 is 99.4% a slight decrease in performance of 0.1% on Q1.  Note: Immediate Emergency Care (IEC) is being reported separately as this is a new qualification with initial training being conducted over a two-year period (commenced January 2018). The RTC qualification was included in these figures from Q1 2018/19.  Areas of good performance include: <ul style="list-style-type: none"><li>• Breathing apparatus 99.1%</li><li>• Incident Command- 100%</li><li>• Emergency Response Driving- 100%</li></ul>										

\*See appendix F for corporate health measure definitions



# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance								
									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD						
		<p>Areas for improvement:</p> <ul style="list-style-type: none"><li>IEC (Casualty Care) - 50%. Although we are on target to achieve the 75% target for this year, our external suppliers have not been able to provide the number of courses required in the last quarter due to staff shortages. Discussions are being held to address this issue.</li><li>RTC- 97% 13 individuals outstanding from 2017/18 training year, due to attend training in Q3.</li></ul> <p>Corrective actions highlighted over the year have been implemented to support the delivery of training. These have addressed shortfalls in planning, recording and the development of individuals requiring further support to achieve competency. Individuals who are out of qualification or fail to achieve a qualification do not perform that activity at operational incidents until they have re-qualified.</p> <p>The ability to effectively train staff is reliant on the ability to release individuals from duty to central training and provide sufficient Instructors to train and assess these skills. A combination of efforts to ensure there is flexibility to do so, and other performance such as sickness absence is reduced to facilitate attendance continue to be examined. Staffing in the Learning and Development department is kept under review to ensure as much as possible, there is the ability to plan for and cover turnover.</p>															
Health and Safety																	
5	All injury accidents including RIDDOR (RIDDOR & Total)	10% reduction (= 4**/72)	1**	18	2** ↓	16 ↑				3**	34	10% reduction (= 2**/36)	2**	17	4**	26	↓↑
		<p>(Source: Data calculated and supplied by H&amp;S)</p> <p>During Q2, there were two RIDDOR reportable injuries. One of these was a specified injury, a broken bone in the foot and the other was due to being unfit for normal duties for more than 7 days.</p> <p>Of the 16 injuries that occurred in Q2, 9 were classified as minor and 7 were classified as moderate (which includes the two RIDDOR's described above).</p> <p>7 injuries were due to striking against something fixed, or being struck by something moving. There was no observable trend among the 'strike/struck' events. There was one report of an individual suffering from the effects of heat whilst wearing BA.</p> <p>As a positive, there were no manual handling injuries in this period.</p> <p>Examination of trends is carried out and follow-up action is taken in all cases and reported through the Health Safety and Well-being Committee, which includes the Member champion and Representative Bodies.</p>															

\*See appendix F for corporate health measure definitions

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		**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.									
Spend											
6	% of spend subject to competition	85%	93.1%	89.3% ↓			91.8%	85%	89.2%	88.7%	↑
7	Compliant spend as % of overall spend	100%	100%	100% ↔			100%	100%	100%	99.7%	↑
		<p>(Source: SQL report from SAGE)</p> <p><b>Spend subject to competition-</b> RBFRS now has 208 contracts in place, of which 54 contracts are with our Thames Valley partners. 36 of the joint contracts have been delivered by the RBFRS Procurement team. The work of the team is underpinned by the new RBFA 3Cs Procurement Strategy based on Compliance, Collaboration and Commerciality. This now sets out the focus for the team. The team currently have a team member who works part of the week with Thames Valley Police. This has led to an increase in collaboration and five new tenders are in progress and being jointly delivered with the police. This broader collaboration work will enable the Thames Valley FRS' to benefit from standardisation of equipment, such as body worn video cameras, enabling the service to obtain better pricing and support through the leverage the police are able to obtain due to scale.</p> <p>The team has a pipeline of contract renewals and re-tenders for the next five years reducing the risk of any future non-compliant spend and enabling the service to fully understand the market before seeking requirements through competition. With better knowledge and expertise of the requirements and what the market can offer we can avoid expensive unnecessary spend and better manage our supply contracts.</p> <p>To support this the service now also has in place a Contract Management Framework. This guide explains the importance of understanding of understanding the risk and criticality of different types of contracts and provides guidance on how best to manage the contract and develop the supplier relationship. In addition a new online procurement and contract management training programme is being rolled out across the service. This was developed in house. Other large emergency services (including the Met police) are considering purchasing the new tool which will result in RBFRS receiving a percentage of the sales.</p> <p>The team are now able to plan and deliver their work in a structured way with the team being given opportunities to develop broader skills through collaborative working.</p> <p>By working collaboratively RBFRS have saved £28,835 so far this financial year (using Home Office methodology).</p>									

\*See appendix F for corporate health measure definitions

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		New collaborative tenders in progress or about to start include BA kits, appliances, travel and accommodation, cleaning services, scrap cars, health and safety training, grounds maintenance, body worn cameras, demographic and GIS data management.									
		<b>Compliant spend</b> - The buyer gateway process enables the procurement team to monitor potential requisitions, temporarily halt any non-compliant spend and subject it to competition. Currently all requisitions are subject to review by Procurement. It is intended that the new Purchase to Pay(P2P) solution, which is about to be tendered, will enable the service to link supplier contracts to requisitions so that only expenditure not subject to competition will need to be subject to this gateway. The new P2P process should enable the whole transactional end of purchasing to be streamlined making it easier for users and significantly reducing the administration related to this process									
Freedom of Information											
8	Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act and Environmental Information Regulations).	0	0	0			0	0			New for 2018/19
		(Source: Manual Input from Information Governance)									

\*See appendix F for corporate health measure definitions

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	*Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q2 17/18	YTD 17/18	17/18 Vs 18/19 YTD
	Number of Information Commissioner assessments finding that the Service has breached Data Protection Legislation (Data Protection Act and forthcoming legislation)	0	0	0			0	0			New for 2018/19
	(Source: Manual Input from Information Governance)										

\*See appendix F for corporate health measure definitions

### Budget Update

#### 2019/20 Budget Setting

Revenue budget bids and savings requests have been submitted by budget holders and will be reviewed by SLT.

Work has commenced with the Lead Member for Finance to review the underpinning budget assumptions. These will be presented to Audit & Governance Committee in December for review prior to the budget being agreed at Fire Authority in February 2019.

#### Q2 Revenue Budget Monitoring 2018/19

The budget monitoring procedure with devolved budgets is becoming embedded as standard, in keeping with two of the key elements of Vision 2019, namely, improving capacity, capability and resilience and creating a “one team” culture.

Regular meetings and interaction with station managers, budget holders and managers is ongoing and yielding greater understanding of the financial process and awareness of the role of forecasting and budgeting in the operation of the Fire & Rescue Service. This is resulting in greater efficiency.

The overall forecasted variance to budget at 30<sup>th</sup> September 2018 is £144,000, which represents less than 0.5 % of the original budget.

2018/19 is a year of consolidation following the unprecedented change in the organisation in 2017/18. A great deal of the work necessary to achieve the £2.4 million of savings outlined in the MTFP has been undertaken, with £1.5m of efficiency savings achieved and a further £614,000 to be delivered within the next year.

The variance for Retained Staff is currently estimated to be under-budget for the year by £229,000. This is lower than last year's variance (which was £295,000) as recruitment of retained staff has improved.

14 new recruits have recently finished their training and are now allocated to wholetime stations. The overtime forecast for the year is higher than budgeted as overtime has been used to cover crewing vacancies earlier in the year.

It is noted that the pay award for uniformed staff has been agreed at 2% from 1 July 2018. Estimates of the effects of this has been built into the forecast at 30<sup>th</sup> September 2018.

The forecast variance to budget for non-uniformed staff is £159,000. The recent Service Delivery and Risk and Performance restructure created a number of vacancies, which are currently being recruited for.

The training line variance of £24,000 includes £15,000 for additional costs for organisational development.

Outside of employee costs, the forecast for Community Fire Safety costs (for smoke detectors) has a variance of £77,000 over budget. However, there is £62,000 left in earmarked reserves specifically for detectors that could be utilised to meet this variance.

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

### RBFRS Revenue Expenditure Quarter 2 2018/19

	Annual Budget	Apr - Sept 18 Outturn	Forecast to YE	Fcast- Budget Variance
	£'000	£'000	£'000	£'000
<b>EMPLOYEES</b>				
UNIFORMED	18,742	9,250	18,541	(201)
NON-UNIFORMED	6,202	3,000	6,043	(159)
TRAINING	632	338	656	24
OTHER	199	140	240	41
	<b>25,775</b>	<b>12,728</b>	<b>25,480</b>	<b>(295)</b>
<b>PREMISES</b>				
REPAIRS & MAINTENANCE	731	227	747	16
RATES	842	498	841	(1)
CLEANING	223	96	235	12
UTILITIES	378	107	360	(18)
	<b>2,174</b>	<b>928</b>	<b>2,183</b>	<b>9</b>
<b>SUPPLIES</b>				
INSURANCE	310	164	309	(1)
EQUIPMENT	418	176	417	(1)
IS EQUIPMENT & LICENCES	589	416	609	20
CLOTHING/PPE	343	185	338	(5)
COMMUNICATIONS	718	239	735	17
OCCUPATIONAL HEALTH	152	109	175	23
PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTIONS	140	82	131	(9)
HYDRANT REPAIRS	25	6	40	15
COMMUNITY FIRE SAFETY SUPPLIES	117	90	194	77
SUPPLIES OTHER	151	71	172	21
	<b>2,963</b>	<b>1,538</b>	<b>3,120</b>	<b>157</b>
<b>CONTRACTS</b>				
CONTRIBUTION TO TVFCS & COLLABORATION	800	389	784	(16)
LEGAL	50	26	50	0
CONTRACTS OTHER	499	103	523	24
	<b>1,349</b>	<b>518</b>	<b>1,357</b>	<b>8</b>
<b>TRANSPORT</b>				
VEHICLE RUNNING COSTS	690	248	706	16
TRAVEL	251	126	243	(8)
	<b>941</b>	<b>374</b>	<b>949</b>	<b>8</b>
<b>PENSIONS</b>				
PENSIONS	419	173	423	4
	<b>419</b>	<b>173</b>	<b>423</b>	<b>4</b>
<b>INCOME</b>				
FEES & CHARGES	(60)	(10)	(60)	0
INCOME OTHER	(908)	(610)	(925)	(17)
	<b>(968)</b>	<b>(620)</b>	<b>(985)</b>	<b>(17)</b>
<b>NET COST OF SERVICES</b>	<b>32,653</b>	<b>15,639</b>	<b>32,527</b>	<b>(126)</b>

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

DEBT CHARGES INTEREST	390	177	390	0
INVESTMENT INTEREST	(75)	(28)	(93)	(18)
<b>NET OPERATING EXPENDITURE</b>	<b>32,968</b>	<b>15,788</b>	<b>32,824</b>	<b>(144)</b>
REVENUE FUNDING OF CAPITAL	500	0	500	0
APPROPRIATION TO/(FROM) RESERVES	(307)	0	(307)	0
MINIMUM REVENUE PROVISION	318	0	318	0
	<b>318</b>	<b>0</b>	<b>318</b>	<b>0</b>
<b>NET EXPENDITURE</b>	<b>33,479</b>	<b>15,788</b>	<b>33,335</b>	<b>(144)</b>



### Financial Position as at September 2018 (Capital)

CAPITAL SCHEMES	Total Project Budget £'000	Actual Spend in Prior Years £'000	Actual Spend to Q2 2018/19 £'000	Est. Project Spend to completion £'000	Total Est. Project Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. Project Completion Date	Notes
Fire Station Build - Theale Fire Station	6,200	684	17	5,499	6,200	0	0%	Qtr 3 2020/21	Planning permission was received in September 2018 and implementation and completion timelines are currently being revised and confirmed. A Prior Indication Notice was issued to the market in October for the remediation work that will be required. This notice has enabled contractors to provide alternative solutions and details of what technical information they require in order to put in a competitive tender based on better information (reducing the cost and risk) at a future date. The tender is then likely to be issued to the market in Qtr 4 18/19.
Whitley Wood Fire Station Firehouse	350	15	128	198	341	-9	-3%	Qtr 2 2018/19	Both off site and on site works were completed according to the programme in September 2018. Projects delivered £9k below budget.
Fire Station Re-build - Crowthorne	1,500	21	121	1,358	1,500	0	0%	Qtr 2 2020/21	With the receipt of a positive outcome from the Local Planning Authority, the project is progressing well to deliver a future focused station that provides RBFA's second Tri Service Community Fire Station. The work to re-build the station will commence in April 2019, with a tender being released to the market in October 2018 for the demolition and construction.
Fire Station Refurbishments - minor works	650	260	0	390	650	0	0%	Qtr 4 2020/21	Planned projects in 18/19 include a contaminants wash-down at Bracknell which was completed in October and a refurbishment at Ascot. A PID for this will be completed in Qtr 3 with work to commence in Qtr 4.
Fleet & Equipment - Fire Appliances	2,599	1,221	99	1,279	2,599	0	0%	Qtr 4 2019/20	Shared exercise with Thames Valley partners which will see RBFRS procure a total of 11 new vehicles over a 3 year period. 7 have been delivered with plans now being developed for the delivery of the final 4 in 2019/20.
Fleet & Equipment - Special Appliances - Operational Support Unit	384	19	40	325	384	0	0%	Qtr 4 2019/20	Work is underway to identify operational support unit vehicles requirements and how these will integrate with other compatible systems.

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

CAPITAL SCHEMES	Total Project Budget £'000	Actual Spend in Prior Years £'000	Actual Spend to Q2 2018/19 £'000	Est. Project Spend to completion £'000	Total Est. Project Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. Project Completion Date	Notes
Fleet & Equipment - Special Appliances - Aerial Ladder Platform	850	0	0	850	850	0	0%	Qtr 3 2019/20	The collaborative Aerial Ladder Platform project is progressing with the contract awarded to the supplier and additional design work being completed.
Fleet & Equipment - Other Ancillary Vehicles & Equipment	800	112	99	589	800	0	0%	Qtr 4 2020/21	The fleet replacement strategy is currently being reviewed but a number of vehicles are expected to be beyond serviceable use over the next 3 years and will be replaced as necessary.
ICT - IBIS redevelopment	131	55	19	24	98	-33	-25%	Qtr 4 2018/19	Project has now been extended to incorporate a couple of additional items and therefore the estimated completion date has been amended to Qtr 4 18/19 (previously Qtr 3). Forecast expenditure is less than budget due to a reduced requirement for additional licences as a result of better software management.
ICT - Helpdesk System	45	29	0	16	45	0	0%	Qtr 4 2018/19	System is being upgraded and developed with new functionality being rolled out across the authority on a phase by phase basis. New phase to be implemented in Qtr 4 18/19.
ICT - Sage 1000 upgrade	65	17	0	48	65	0	0%	Qtr 4 2018/19	Phase 1 of 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 commence in Q1 19/20.
ICT - Learning Management System (LMS)	45	0	0	45	45	0	0%	Qtr 4 2018/19	Project has been paused whilst the operational competence review is completed to ensure that the new system is aligned to any change in the competency framework. Options will be fully assessed in Qtr 3 / Qtr 4 2018/19 and the project will resume following this, with early indications from a review of the market confirming that the requirements for the system can be met.
ICT - Firewatch Development	60	30	10	10	50	-10	-17%	Qtr 4 2018/19	Implementation is still on target for completion in Qtr 4 2018/19 (although the scheduling has been amended to reflect other project priorities). Additional testing and training needs have been identified to ensure compatibility with Control. The forecast saving is due to reduced scope of the upgrade following strategic decisions.

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

CAPITAL SCHEMES	Total Project Budget £'000	Actual Spend in Prior Years £'000	Actual Spend to Q2 2018/19 £'000	Est. Project Spend to completion £'000	Total Est. Project Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. Project Completion Date	Notes
ICT - Cyber Security	60	0	0	60	60	0	0%	Qtr 4 2018/19	A tender to appoint a new supplier to ensure the Authority achieves the new Cyber Security accreditation and additional network and system improvements will be undertaken soon so that the next security audit can be carried out later this year.
ICT - Asset Replacement / Licences	236	113	22	101	236	0	0%	Qtr 4 2018/19	Annual asset replacement which forms part of the 3 year plan. PC's, ICT hardware and laptops which were provided at the beginning of this rolling plan are now due for replacement in 2018/19.
<b>Total (Under)/Over</b>	<b>13,975</b>	<b>2,576</b>	<b>555</b>	<b>10,792</b>	<b>13,923</b>	<b>-52</b>			

### Transition Bids Spend Summary

(As of 06/11/2018)

<b>TOTAL BUDGET AVAILABLE</b>	<b>2,000,000</b>
<b>TOTAL BUDGET ALLOCATED</b>	<b>1,617,485</b>
<b>TOTAL BUDGET AVAILABLE FOR ALLOCATION</b>	<b>382,515</b>

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K29-601	<b>Comms and Engagement Resource</b> Effective staff engagement is critical to the delivery of the Organisational Development Programme. The capacity to deliver the level and breadth of intervention required does not currently exist within the organisation. This resource will lead on developing/deploying a range of communication and engagement interventions to increase the likelihood of successful delivery of the key projects in the programme and the desired cultural, structural and process changes.	Katie Mills	28/04/2015	32,993	16,847	01/04/2018	28/02/2019	Successful candidate selected and started post from March 18  Delivered to date: <ul style="list-style-type: none"> <li>• Communication strategy written and approved to support the organisational development programme - completed 2016</li> <li>• Improvements made in the frequency and quality of communications</li> <li>• Cascade started in March 17</li> <li>• The Shout re-designed 18 by an external company in March and is in distribution.</li> <li>• Ongoing support provided to the OD and IRMP programme boards to ensure key messages are communicated</li> <li>• The website and intranet has been improved to ensure relevant and up to date content is available and found quickly</li> <li>• Corporate branding was refreshed and continues to evolve</li> <li>• Successful candidate started post from March 18 focussing on engagement of workforce and the community via internal and external communications</li> <li>• Social media content calendar in place</li> <li>• Additional resource has allowed for key projects to have a more focused comms plan, covering internal and external stakeholders</li> <li>• The EDI forum has a dedicated communications resource</li> </ul> To be delivered: <ul style="list-style-type: none"> <li>• EDI objectives to be evolved and filtered into the brand of the organisation</li> <li>• Processes to be implemented for effective ways of working across the team to ensure consistency of communications and engagement</li> </ul>

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K10-601	<b>Core Skills Training Programme</b> Core skills development is a key plank of the OD programme and central to delivering new behaviours. This bid will support early delivery of key core skills and a long term core skills development and refresher programme, mapped to the Investors in People standard, leadership development and embedding into the L&D function	Becci Jefferies	01/09/15 26/04/16	104,000	96,734	01/09/2015	30/06/2019	Additional monies identified to support the delivery of new core skills training to support behavioural and cultural change. <b>Delivered to date:</b> <ul style="list-style-type: none"> <li>• Appraisal (new PDI process) – 67 people attended to date</li> <li>• Coaching course - 48 people attended to date (+10)</li> <li>• Crucial Conversations course – 88 people attended to date (+7)</li> <li>• Managing High Performance – 26 people attended to date (+5)</li> <li>• Managing Sickness course – 74 people attended to date (+6)</li> <li>• Mentoring course – 43 people attended to date</li> <li>• Mindfulness course – 116 (+11)</li> <li>• Procurement framework skills – 12 people attended to date</li> <li>• Procurement overview – 20 people attended to date</li> <li>• Resilience – 75 people attended to date</li> <li>• Time management course - 50 people attended to date</li> <li>• Working with Members course - 69 people attended to date (+20)</li> </ul> Introduced in Q1: <ul style="list-style-type: none"> <li>• Equality, Diversity and Inclusion training - e learning package for managers and one for all staff</li> </ul> Managers course - 173/239 completed All staff course – 535/637 completed <ul style="list-style-type: none"> <li>• Managing Disciplinary Investigations - 16 people attended to date (+8)</li> <li>• Recruitment and Selection: Interview Skills - 15 people attended to date (+8)</li> <li>• Writing effective Reports - 29 people attended to date (+20)</li> </ul> <b>To be delivered:</b> <ul style="list-style-type: none"> <li>• Mental Health Training - throughout Q3</li> <li>• Media Training - throughout Q3</li> <li>• Procurement eLearning - throughout Q3</li> </ul>

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

K12-601	<b>HR Advisor Support</b> To ensure an HR resource with appropriate skills and knowledge is available to support Managers to execute necessary staffing restructures and re-organisation to effect organisation change.	Becci Jefferies	02/02/2016	162,500	123,558	02/02/2016	31/03/2019	<p>Following the restructure of the HR and Learning and Development function, which saw a reduction in HR staff, funding for temporary HR resources was sought from the Transition Fund in support the delivery of various change projects. These resources can be flexed to meet needs and project timelines. Support is provided by 1 fixed term member of staff.</p> <p><b>Delivered to date:</b></p> <ul style="list-style-type: none"> <li>• Work with Heads of Service and departmental managers to assist with restructure activity including planning, reports design and consultation - Complete</li> <li>• Reviewed the operational leave policy</li> <li>• Role assisted with TVFCS transition plan activities as per the agreed plan and as appropriate</li> <li>• Support and consultation provided for Risk and Performance and Service Delivery restructures including consultation meetings, formal consultations and selection processes</li> <li>• Support arrangements reviewed during Q1 and role advertised in Q1</li> <li>• Completion of support and consultation for Risk and Performance and Service Delivery restructures</li> <li>• Collation of objectives identified for E&amp;DI Forum consideration</li> <li>• Bursary Policy review</li> <li>• Armed Forces Covenant development</li> <li>• Two tier entry feasibility report</li> <li>• Additional HR support in place on temporary basis to respond to key projects</li> <li>• Development of PDI pilot to include behaviours - for pilot in Q1</li> <li>• Contract Review</li> <li>• Discipline review</li> <li>• Recruitment Attraction Review - initial review</li> <li>• Equality Diversity and Inclusivity action plan development for consideration by the EDI forum</li> <li>• Continue to address actions in EDI action plan</li> <li>• Formulated positive action plan</li> </ul> <p><b>To be delivered:</b></p> <ul style="list-style-type: none"> <li>• Job profile review Q3/Q4</li> <li>• Attraction and positive action support</li> <li>• Intranet pages - develop for EDI</li> </ul>
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# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K16-602	<b>Systems Business Partner - resource</b> Two year temporary post – systems business partner, a customer facing role to deliver and rollout Firewatch upgrades, IBIS improvements and support development of other service applications from an end user perspective	Tony Vincent	07/06/2016	76,720	53,568	29/08/2016	31/08/2019	<b>Delivered to date:</b> <ul style="list-style-type: none"> <li>• Post filled and started on 29/08/16</li> <li>• Activity to understand role requirements and current system</li> <li>• Working on Firewatch 7.6 testing prior to implementation particularly around whole-time payments processing</li> <li>• Providing FireWatch 7.5 support</li> <li>• Checking if mileage claims could also be done within FW</li> <li>• Retained payments in Firewatch 7.6</li> <li>• Documentation of new FireWatch user manuals</li> <li>• Set up and testing new Fire Watch modules (Availability, mobilisation, self-service)</li> <li>• Provision of FireWatch 7.6 go live</li> <li>• Testing new Availability Service for Retained</li> <li>• Training and Go-Live on new Availability Service for Retained</li> <li>• Key member of the FireWatch Senior members forum</li> <li>• Liaising with Finance to ensure Station level Cost centre reporting is in place and correct</li> <li>• Acting Up payments in FireWatch</li> <li>• Officer OT payments in FireWatch (due to go live Nov 2018)</li> <li>• Testing of Mobilisation interface with TVFCS Vision Reference system (test environment only)</li> <li>• Assisting in setup of asset project at Station 2</li> </ul> <b>To be delivered:</b> <ul style="list-style-type: none"> <li>• General FireWatch 7.6 ongoing support and training</li> <li>• Setup and testing of new Self Service module</li> <li>• Setup and testing of Mobilisation interface with TVFCS Vision Live system (live environment)</li> <li>• Testing and release of major Firewatch release version 7.7 (now in our test environment)</li> <li>• Testing and release of major Firewatch release version 7.8 (when Beta version released by Infographics)</li> </ul>



# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K17-602	<b>Data &amp; Performance Analysis Manager</b> Resource for a 24 month period to rectify issues with data assurance emerging because of linkages and feeds between systems	Katie Mills	05/07/2016	92,000	40,096	24/10/2016	31/03/2019	<b>Delivered to date:</b> <ul style="list-style-type: none"> <li>• Original recruitment completed and resource started 24/10/2016, in post until Autumn 2017.</li> <li>• Audit of data flows for Corporate measures initiated</li> <li>• Restructure of team complete Autumn 2017.</li> <li>• New resource appointed 1st December 2017</li> <li>• Improvements to quarterly performance reporting</li> <li>• Preparation for HMICFRS (first two data collections submitted on time)</li> <li>• Development of and preparation for new Corporate Measures for 18/19</li> <li>• New SQL reports to reflect 19/19 Corporate Measures developed, released and communicated across the organisation.</li> <li>• Assessment of data integrity issues and development of plan to further review data flows and system development.</li> <li>• Investigation of issues associated with legacy methodologies and replacement with automatic processes with less room for error.</li> <li>• Scorecard decommissioned for cross organisational performance management use.</li> </ul> <b>To be delivered:</b> <ul style="list-style-type: none"> <li>• Ongoing management of HMICFRS data collection to include regular HMICFRS data collections</li> <li>• Continue data integrity work to further review data flows and system development to support effective performance monitoring, and migrate to business as usual</li> <li>• Decommissioning for scorecard for residual purposes</li> </ul>

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K19-601	<b>Development and Assessment pathway</b> 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	01/06/2018	31/03/2019	<p>To assist in a full review of the NVQ methodology of determining competency is required. A bid against the Transitional Fund was made to undertake research and make recommendations on how RBFRS should deliver a competency framework for the future.</p> <p><b>Delivered to date</b></p> <ul style="list-style-type: none"> <li>• Scope of work agreed and PID written and approved</li> <li>• Phase 1 work – research undertaken</li> <li>• Equality Impact Assessment and communication plan development project group established.</li> <li>• Research provisions in other FRS</li> <li>• Questionnaire to stakeholders</li> <li>• Stakeholder workshops organised</li> </ul> <p><b>To be developed:</b></p> <ul style="list-style-type: none"> <li>• Analysis of research to inform recommendations to SLT in Q4 - research completed by 31.1.19</li> <li>• Stakeholder workshops - by 30.11.18</li> <li>• Progress to be monitored via Programme Board</li> <li>• Review resource requirements to be supported from transition fund - in line with Q4 decisions</li> </ul>

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K22-602	<b>Temporary accounts officer</b> 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	48,061	03/04/2017	31/03/2019	<p>Prior to the Finance department restructure this post was financed from base budget. Currently, it is being funded by Transition Fund for a 2 year period whilst business process re-engineering takes place to streamline processes and improve efficiency.</p> <p><b>Delivered to date:</b></p> <ul style="list-style-type: none"> <li>• Resource recruited to start from April 2017</li> <li>• Undertaking activities related to invoicing, accounts payable and receivable, cash management and credit control for the Fire Authority</li> <li>• Support to Trading company and dealing with invoices, carrying out credit control and cash management</li> <li>• Post to be required until the successful delivery of the P2P process</li> </ul> <p><b>To be delivered:</b></p> <ul style="list-style-type: none"> <li>• Support implementation of efficient P2P processes</li> </ul>
K24-602	<b>Temporary procurement officer</b> 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	44,715	14/08/2017	31/08/2019	<p>This post is required while collaborative procurement options are being investigated.</p> <p><b>•Post filled in August 17</b></p> <ul style="list-style-type: none"> <li>• Contract register and work plan now being updated weekly</li> <li>• Contract repository review completed</li> <li>• Set up contract award process</li> <li>• Delivered range of new contracts including ALP contract, training, commodities, medical supplies as part of allocation of work within the team.</li> <li>• Supported the achievement of 90% of spend now in a formal contract.</li> </ul> <p><b>To be delivered</b></p> <ul style="list-style-type: none"> <li>• Monitor low level repeat spend remains compliant with RBFRS Contract Regulations</li> <li>• Ongoing achievement of annual Procurement work plan and service plan</li> <li>• Deliver procurement savings as reported to the Home Office</li> <li>• Support the delivery of new collaborative contracts across the Thames Valley</li> </ul>

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K26-601	<b>Temporary resource to manage the introduction of a Learning Management System.</b> 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	31/12/2018 (forecast)	30/06/2019	<p>Introduction of a e-learning platform required to facilitate achieving the organisational development objectives</p> <p><b>Delivered to date:</b></p> <ul style="list-style-type: none"> <li>• Resourcing and Development Manager started in mid-May and objectives set regarding the provision of a Learning Management System</li> <li>• Engagement with other organisations to understand the developments in eLearning</li> <li>• Further review of requirements completed</li> <li>• Unsuccessful attempts to secure an individual to date with alternative recruitment options being evaluated</li> </ul> <p><b>To be delivered:</b></p> <ul style="list-style-type: none"> <li>• Learning from Development Assessment Pathways review required to further inform need. Requirements to be refined to inform specification and tender process. Exploring opportunities for potential joint procurement with OFRS and BMKFRS - await outcomes of project before finalising - 31.12.18 (pending)</li> </ul>

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K27-601	<b>Dedicated mental health support post</b> 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	17,995	30/08/2017	31/03/2019	<p>Post created to support the RBFRS Health, Safety and Wellbeing Strategy and the Governments' focus on mental health and to assist with various initiatives to engage the Service.</p> <p><b>Delivered to date:</b></p> <ul style="list-style-type: none"> <li>• Mental Health and Wellbeing Adviser recruited in August however left in April</li> <li>• Recruitment of additional Blue Light Champions</li> <li>• Leadership session designed for Middle Managers - held on 1 Feb</li> <li>• Mental Health Strategy and Action Plan designed and approved via SLT</li> <li>• Training requirements identified</li> <li>• Training on mental health designed and piloted and mental health as mandatory training now being delivered</li> <li>• Training package on mental health to be delivered commencing Q2</li> </ul> <p><b>To be delivered:</b></p> <ul style="list-style-type: none"> <li>• Identify other resource requirements to address actions indicated in action plan - 31.12.18 for mental health training</li> <li>• Continuation of mental health training to all - continuous in to Q4</li> <li>• Identify further initiatives in line with Health, safety and wellbeing - action plan to follow - continuous review</li> </ul>

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K28-601	<b>Asset Management project</b> Effective asset management is critical to ensure that RBFRS has effective control and governance of its assets to realise value through managing risk and opportunity, in order to achieve the desired balance of cost, risk and performance. The regulatory and legislative environment in which RBFRS operates is increasingly challenging and the inherent risks that many assets present are constantly evolving. Good asset management will translate the RBFRS objectives into asset-related decisions, plans and activities, using a risk based approach and so it is imperative that an organisation wide asset management policy is agreed and published and that all assets are identified, recorded and tracked.	Andrew Mclenahan	01/07/2018	79,629	16,319	01/07/2018	29/03/2019	<b>Delivered to date:</b> <ul style="list-style-type: none"><li>• Two staff recruited, in July 18, on agency basis to undertake asset identification, tagging and recording exercise</li><li>• Pilot station (Wokingham Road) audit completed</li><li>• Dee Road station audit started</li><li>• Working Group established with regular meetings.</li><li>• Statement of Requirements for asset management system written</li><li>• Process flows and procedures written for asset identification, recording and tagging.</li><li>• Overall policy drafted</li></ul> <b>To be delivered:</b> <ul style="list-style-type: none"><li>• 'To be' process for on-going asset management to be agreed</li><li>• Asset management system to be completed and issued - awaiting appointment of Supplies and Asset manager (c. Feb/Mar '19) to review and determine direction of project</li><li>• Remaining stations to be visited and have assets recorded - by end of Feb '19</li></ul>
<b>Total ongoing (open) projects</b>				840,553	461,075			
<b>Closing total for completed projects</b>				776,932	776,932			
<b>Grand Total</b>				<b>1,617,485</b>	<b>1,238,007</b>			
<b>Total budget allocated</b>				1,617,485				
<b>Total budget available for allocation</b>				382,515				

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

### Procurement

(Data accurate as of 24/10/2018)

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	Contract Detail	Specification Owner	Supply Type	Contract Status	Sourcing Process	Collaboration	Contract Awarded	Est. Total Contract Value	CAP/REV	Contract Awarded
344	Facilities/Fleet	Andrew Mclenahan	Miscellaneous Commodities	Rob Read	Supply	New	Framework	Y	02/08/2018	£ 48,000	Revenue	Screwfix Direct Ltd
344	Facilities/Fleet	Andrew Mclenahan	Miscellaneous Commodities	Rob Read	Supply	New	Framework	Y	02/08/2018	£ 48,000	Revenue	Jafco Tools Ltd
410	Facilities/Fleet	Andrew Mclenahan	Aerial Ladder Platform	Tim Mansbridge	Supply	New	Framework	Y	09/08/2018	£ 850,000	Capital	Angloco Ltd
416	Facilities/Fleet	Andrew Mclenahan	HUB Mast Management	Matt Barber	Service	New	Tender	N	06/08/2018	£ 48,000	Revenue	Hub Telecoms Ltd
510	BIS	Tony Vincent	Satellite Broadband Internet Services Agreement	Lee Arslett	Service	Contract Extension	Tender	N	04/07/2018	£ 30,000	Revenue	Excelerate Technology Ltd
515	HR	Becci Jefferies	Maintenance of Fitness Equipment	Helen Morbin	Service	Contract Extension	Tender	N	19/07/2018	£ 10,000	Revenue	Fit-Tek Ltd
521	HR	Becci Jefferies	Payroll and Pension	Jacky Manning	Service	Contract Extension	Tender	Y	10/09/2018	£ 129,500	Revenue	Bradford Yorkshire Pension Fund / West Yorkshire Pension Fund
522	BIS	Tony Vincent	FireWatch	Lee Arslett	Supply	Contract Extension	Tender	N	23/07/2018	£ 54,900	Revenue	Infographics UK Ltd
525	HR	Becci Jefferies	Specialist Fire Fighter Pension Advice	Becci Jefferies	Service	New	Framework	Y	01/07/2018	£ 18,000	Revenue	Reed Global Ltd
567	Operations	James Powell	The Provision of wet waste collection from an incident	Iain Harrison	Service	Waiver	Waiver	N	14/09/2018	£ 18,000	Revenue	A1 Group



# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

Project No	Service	Contract Owner	Contract Detail	Specification Owner	Supply Type	Contract Status	Sourcing Process	Collaboration	Contract Awarded	Est. Total Contract Value	CAP/REV	Contract Awarded
603	Corporate Services	Katie Mills	Print	Melissa Gerbaldi	Supply	Re tender	Tender	N	03/09/2018	£ 40,000	Revenue	Press to print Reading Ltd
603	Corporate Services	Katie Mills	Print	Melissa Gerbaldi	Supply	Re tender	Tender	N	03/09/2018	£ 40,000	Revenue	Hobs Reprographics
603	Corporate Services	Katie Mills	Print	Melissa Gerbaldi	Supply	Re tender	Tender	N	03/09/2018	£ 40,000	Revenue	Conservatree Print and Design Limited
604	HR	Becci Jefferies	Specialist Level 1 and 2 Operational Training	Dom Manton	Service	New	Tender	N	03/09/2018	£ 160,000	Revenue	Fire Service College Ltd
605	Corporate Services	Katie Mills	Legal Enforcement Services	Paul Jacques	Service	New	Collaboration	Y	24/07/2018	£ 43,000	Revenue	West Berkshire Council
608	HR	Becci Jefferies	Fire Fighter Training	Dom Manton	Service	New	Collaboration	Y	17/07/2018	£ 102,000	Revenue	Oxfordshire County Council/ OFRS through Fire Service College
565	Facilities/Fleet	Andrew Mclenahan	Caps for Fire Fighters	Rob Read	Service	New	Quotes	N	24/07/2018	£ 5,000	Revenue	Michael Lupton Associates Ltd
581	HR	Becci Jefferies	Hosted Procurement and Contract Management Training Tool	Jane Lubbock	Service	New	Quote	N	06/09/2018	£ 8,000	Revenue	Cordie Ltd

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

### Human Resources Performance

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

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 YTD	Q2 17/18	Authorised establishment
STAFF IN POST	Wholetime	389	383			383	373	388
	Retained	74	74			74	68	91
	Control	41	40			40	43	39
	Green Book	149	149			149	136	179
	<b>Total Number of Staff in Post</b>	<b>653</b>	<b>646</b>			<b>646</b>	<b>620</b>	<b>698</b>
							<b>Q2 17/18</b>	
STAFF TURNOVER	Wholetime	6	8			14	9	
	Retained	4	5			9	2	
	Control	1	1			2	1	
	Green Book	10	9			19	3	
	Total Number of Leavers (Heads)	21	23			44	15	
	Staff in Post (SIP)	653	646			650	620	
	<b>Percentage of Leavers vs. SIP</b>	<b>3.2%</b>	<b>3.6%</b>			<b>6.8%</b>	<b>2.42%</b>	
							<b>Target</b>	<b>YTD 17/18</b>
FEMALE STAFF	Wholetime	4.1%	4.2%			4.2%	4%	3.48%
	Retained	5.4%	5.4%			5.4%		4.41%
	Control	68.3%	70%			70%		72.09%
	Green Book	57.0%	58.4%			58.4%		53.67%
	<b>Total</b>	<b>20.4%</b>	<b>20.9%</b>			<b>20.9%</b>		<b>19.35%</b>
							<b>Target</b>	<b>YTD 17/18</b>
ETHNICITY FIGURES	Wholetime	4.9%	5%			5%	5%	4.82%
	Retained	0%	1.35%			1.35%		1.47%
	Control	2.4%	2.5%			2.5%		2.32%
	Green Book	16.8%	16.11%			16.11%		13.23%
	<b>Total</b>	<b>6.9%</b>	<b>7.0%</b>			<b>7.0%</b>		<b>6.13%</b>

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

NB. 26 individuals hold more than one role (Dual Contract). This quarter there were 23 leavers and 13 new starters. No major trends have been identified following examination of the reason for leaving as the majority of staff that have left have retired or left for personal betterment.

Staffing figures have reduced this quarter even though we have recruited an additional 13 members of staff. Three of our interns recruited through the Change 100 programme have left the service after their Summer internships. One intern has remained with us on a casual basis.

Annual turnover, year to date, equates to 6.78%, if similar levels occur for the rest of the year this will suggest we will outturn at around 13%.

The number of employees from a BME background have increased by 0.07% from last quarter due to staff in post figures reducing, two BME employees joining the service and two employees leaving. Compared to this quarter last year we are 0.84% higher. Overall performance stands at 6.97%, exceeding the current target of 5%.

Although the number of female firefighters employed in the service remains unchanged from last quarter. We have had one RDS female Firefighter join and one RDS female Firefighter leave keeping the figures to 20 Operational female FF employed (WT & RDS). The percentage of female firefighters has increased from last quarter by 0.06% to 4.38% as a result of Wholtime staff in post figures reducing. We continue to exceed our target of 4%

Of the 13 people recruited this quarter, two were from an ethnic minority group (1 Green Book and 1 RDS). Seven females were employed (6 Green Book and 1 RDS).

The number of disabled staff employed by RBFPS has decreased from last quarter by 11% due to leavers.

The Equality, Diversity and Inclusion action plan and the recruitment project both focus on attraction as key objectives, aiming to identify and implement ways to attract individuals from a wider range of backgrounds.

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 YTD	2017/18 Performance	
							Q2 17/18	YTD 17/18
AGE PROFILE	25 and Under	35	31			31	23	23
	26-35	182	181			181	161	161
	36-45	223	219			219	214	214
	46-55	179	180			180	189	189
	56-65	32	34			34	31	31
	66 and Over	2	1			1	2	2
	<b>Total</b>	<b>653</b>	<b>646</b>			<b>646</b>	<b>620</b>	<b>620</b>

# Strategic Performance Report Q2 2018/19

## Quadrant Two – Corporate Health

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 YTD	2017/18 Performance	
							Q2 17/18	YTD 17/18
DAYS LOST TO SICKNESS	Short	383	464			847	385	797
	Long	532	575			1107	846	1638
	<b>Total</b>	<b>915</b>	<b>1039</b>			<b>1954</b>	<b>1231</b>	<b>2345</b>
	<i>(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).</i>							

## Disciplinary Cases, Grievances and Complaints

	Number commenced in Q1	Number commenced in Q2	Number commenced in Year to Date 18/19	Number commenced Year to Date 17/18
<b>Misconducts (including gross misconducts)</b>	5	10	15	11
<b>Grievances</b>	5	4	9	5
<b>Complaints (External)</b>	7	10	17	14
<b>Whistle Blowing</b>	0	0	0	2
<b>Use of RIPA</b>	0	0	0	0

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

### Quadrant Three - Priority Programmes

(Summary as of 08/11/2018)

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
<b>Operational Maintenance of Competence Review</b>	Dom Manton	<ul style="list-style-type: none"> <li>• TRI removed for firefighters to watch managers</li> <li>• Training specification analysis being progressed</li> <li>• Creation and consultation of operational competence policy underway</li> <li>• Meeting with OFRS GM L&amp;D to ensure alignment across the two services is consistent regarding the gap analysis of NOG training specifications.</li> <li>• Modules created and frequency periods identified and consulted with Rep bodies.</li> <li>• 90% completion of learning outcome documents</li> <li>• Communications message via OPS Bulletin release to update crews on delay of interim programme launch</li> </ul>	<ul style="list-style-type: none"> <li>• Training specification analysis to be further progressed</li> <li>• Continue work on training modules and consultation with Rep bodies</li> <li>• Final model to be provided for Firewatch build and testing following agreement of specification</li> <li>• Timescale to be reviewed for the launch of the interim model following testing completion anticipated to be Dec 2018</li> <li>• Report to SLT for final sign off and ownership of programme</li> </ul>	A ↑	<ul style="list-style-type: none"> <li>• Timescales reviewed based on the impact of operational commitments during the hot weather, OFRS reduction and changeover of staff and absences within L&amp;D department.</li> </ul>

# Strategic Performance Report Q2 2018/19

## Quadrant Three– Priority Programmes

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
<b>Recruitment Project</b>	Jacky Manning	<ul style="list-style-type: none"> <li>Review of the proposed project plan has been completed and time frames adjusted where necessary</li> <li>PDI leadership behavioural trial results to be reviewed for actions</li> <li>On line portal procurement completed and initial training provided. Trial with vacancies on the portal to start in September.</li> <li>Intranet pages being updated internally to reflect reviews</li> </ul>	<ul style="list-style-type: none"> <li>Timescales to be reviewed due to impact of very high levels of HR work</li> <li>Undertake review based on awareness of national developments</li> <li>Communications plan to be updated</li> <li>Review of the portal trial</li> <li>Research to be completed around best practice for job descriptions and personal specifications</li> <li>Focus groups to be held around improvements</li> </ul>	A ↑	Impact of very high levels of HR work and support to other HR projects has impacted timescales
<b>Continuous Improvement</b>	Katie Mills	<ul style="list-style-type: none"> <li>Libreea appointment to facilitate process mapping</li> <li>As agreed with stakeholders, work with third party temporarily paused on the to-be prevention processes. All as-is processes recorded</li> <li>Process improvement project underway with Libreea to review and map out the existing protection processes</li> <li>Scoping meeting held for the Procurement to pay processes to plan out the mapping of the as-is processes</li> </ul>	<ul style="list-style-type: none"> <li>As-is process maps to be agreed for the procurement to pay process</li> <li>Continued mapping work on the protection processes to highlight quick wins</li> <li>Awaiting appointment of the Prevention Project Manager to drive the prevention process improvement work</li> <li>Monitoring for further opportunities</li> </ul>	G =	<ul style="list-style-type: none"> <li>No project issues at this time</li> </ul>

# Strategic Performance Report Q2 2018/19

## Quadrant Three– Priority Programmes

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
<b>Corporate Communications and staff engagement</b>	Katie Mills	<ul style="list-style-type: none"> <li>Tender process completed and new supplier of Survey solutions commissioned for the staff survey</li> <li>Staff survey launched on the 17<sup>th</sup> September and due to run for 4 weeks. Closing date of the 15<sup>th</sup> October.</li> <li>Improving engagement with the public and internal staff through updates to the website and intranet to ensure relevant content and news stories.</li> <li>New branding templates now in use for key organisational documents</li> <li>Work started on commissioning media training</li> </ul>	<ul style="list-style-type: none"> <li>Following staff survey closure, results will be analysed and available for review</li> <li>Media training to start for Watch Managers, Group Managers, Station Managers, SLT and key green book staff</li> </ul>	G =	<ul style="list-style-type: none"> <li>No project issues at this time</li> </ul>
<b>HMICFRS Inspection Programme</b>	Katie Mills	<ul style="list-style-type: none"> <li>Workshops have been run for middle managers to review the self-assessment information prior to submission</li> <li>Document submission completed in August 2018</li> <li>The second data request was been compiled and submitted in August</li> <li>The self-assessment was submitted at the end of September</li> <li>Inspection dates were announced in September</li> <li>Service Liaison Lead visited the service in September for further familiarisation visit</li> </ul>	<ul style="list-style-type: none"> <li>New HMICFRS Service Liaison Lead appointed with additional engagement visits planned for October and November</li> <li>Preparation for the Discovery Week in December</li> <li>HMICFRS survey release for promotion to staff</li> <li>Communication plan to be reviewed following the date announcements</li> </ul>	G =	<ul style="list-style-type: none"> <li>No project issues at this time</li> </ul>



# Strategic Performance Report Q2 2018/19

## Quadrant Three– Priority Programmes

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
<b>Reward and Recognition</b>	Katie Mills/ Becci Jefferies	<ul style="list-style-type: none"> <li>The annual RBFRS ceremony took place on 28 September at Wokefield Park, Mortimer. Deserving winners were recognised at the ceremony. Good feedback was received on the event.</li> <li>Sponsorship for the event contributed to the cost</li> <li>RBFRS had representatives in 2 categories in the Spirit of Fire Awards: Supporter of the Year – Firefighter and Supporter of the Year – Fire and Rescue Service categories.</li> <li>Review of merit payment system completed</li> </ul>	<ul style="list-style-type: none"> <li>Benenden benefits to be reviewed</li> <li>Nominations for staff award 2019 to be opened</li> </ul>	G =	<ul style="list-style-type: none"> <li>No project issues at this time</li> </ul>
<b>Development and Assessment pathways</b>	Lorraine Sullivan	<ul style="list-style-type: none"> <li>Four stage project. Stage one timescales have been agreed for November delivery following review on capacity. Project meetings ongoing as per project plan.</li> <li>Initial process mapping completed on 26/06/2018</li> <li>Questionnaire design completed and after a pilot was made available to target stakeholders for completion. The finalised questionnaire completion deadline has now closed.</li> </ul>	<ul style="list-style-type: none"> <li>Stakeholder workshops underway - due to complete 05.11.2018</li> <li>Collation of all research / data continuing</li> <li>Findings report to be completed in November following questionnaire results analysis</li> <li>Work on the alternate model high level design commenced</li> </ul>	G =	<ul style="list-style-type: none"> <li>No project issues at this time</li> </ul>

# Strategic Performance Report Q2 2018/19

## Quadrant Three– Priority Programmes

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
		<ul style="list-style-type: none"> <li>Meetings with other FRSs completed and feedback is being reviewed and used to inform design</li> <li>Initial review on policies and procedures has been undertaken</li> <li>Stakeholder workshops have been arranged to seek views regarding future design</li> </ul>			
<b>Leadership Development Programme</b>	Nikki Richards	<ul style="list-style-type: none"> <li>All six cohorts have completed their full course and presented their learnings to SLT</li> <li>Courses now underway for recruitment, managing disciplinary issues, writing effective reports</li> </ul>	<ul style="list-style-type: none"> <li>Feedback collected from all six cohorts are to be analysed and evaluated</li> <li>Potential action plan to be agreed</li> <li>Review requirements for next steps of the leadership development programme</li> </ul>	G =	<ul style="list-style-type: none"> <li>No project issues at this time</li> </ul>
<b>Combined Remotely Managed stations and FDO project</b>	Doug Buchanan	<ul style="list-style-type: none"> <li>PID</li> <li>FBU secondment to project</li> <li>Phase one implementation proposals designed and agreed by SLT/FBU</li> <li>Phase one staff consultation 24 September to 23 October</li> <li>SLT workshop to consider phase two proposals</li> </ul>	<ul style="list-style-type: none"> <li>Post consultation implementation plan for phase one</li> <li>SMA selection process stages 1-3</li> <li>Preference exercises</li> <li>Agree phase two implementation plan for phase two</li> </ul>	A =	<p>Potential to miss target implementation dates. Project is complex and has a number of interdependencies and relationships with other projects that could delay progress.</p> <p>A specific issue that may delay phase 1 implementation on 1 April 2019, is ability to deliver in 3x L2b courses in February 2019.</p>

# Strategic Performance Report Q2 2018/19

## Quadrant Three– Priority Programmes

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
<b>Retained Support Unit</b>	Doug Buchanan	<ul style="list-style-type: none"> <li>Gap analysis report presented to SLT</li> <li>SLT agreement on final disestablishment plan (effective 01 January 2019)</li> <li>Consultation exercise / placement exercise complete</li> </ul>	<ul style="list-style-type: none"> <li>Line management of RSU for Q3 to be transferred from R&amp;P to OPAS</li> </ul>	G =	<ul style="list-style-type: none"> <li>No issues</li> </ul>
<b>IRMP 2019 to 2023</b>	Doug Buchanan	<ul style="list-style-type: none"> <li>FA agreed draft for public consultation</li> <li>Public consultation delivered</li> </ul>	<ul style="list-style-type: none"> <li>Produce post consultation summary report</li> <li>Members workshop</li> <li>FA agree Corporate Plan and IRMP 2019-23 for publication</li> </ul>	G =	No issues
<b>New Fire Station at Theale</b>	Alex Brown	<ul style="list-style-type: none"> <li>PIN engagement process progressing well. Once complete, full tender documents will be prepared for release to market.</li> </ul>	<ul style="list-style-type: none"> <li>Preparation of remediation tender documents to specialist market.</li> <li>Progress with end user engagement to inform VE process.</li> <li>Revised programme timelines to be developed.</li> </ul>	A =	<ul style="list-style-type: none"> <li>Once remediation tender process is completed, revised timelines can be produced for this project to delivery.</li> <li>Until outcome of remediation tender is known, the additional VE work will not commence.</li> </ul>
<b>Whitley Wood Project</b>	Alex Brown	<ul style="list-style-type: none"> <li>Outcome of Stage 2, Concept design presented to SLT for consideration.</li> <li>Development of full business case in support of project.</li> </ul>		A =	Following the decision made at Management Committee on 22 October 2018, this collaborative project has now closed. An alternative standalone scheme will be progressed.

# Strategic Performance Report Q2 2018/19

## Quadrant Three– Priority Programmes



Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
<b>Firehouse Facility</b>	Alex Brown	<ul style="list-style-type: none"> <li>Contract completed with practical completion issued on 25th September 2018.</li> </ul>	<ul style="list-style-type: none"> <li>Instructor induction process to be completed in order to re-commence live fire training on 1st October 2018.</li> <li>As part of the project closedown reports will be presented to next programme board</li> </ul>	G =	On track, no issues raised
<b>Crowthorne refurbishment</b>	Alex Brown	<ul style="list-style-type: none"> <li>Planning application approved for fire station project.</li> <li>Planning application approved for temporary accommodation at decant site at Wellington College</li> </ul>	<ul style="list-style-type: none"> <li>Development of main contractor tender pack in order to meet governance timelines for authorisation to award in time for project to commence in April 2019.</li> </ul>	G =	On track, no issues raised
<b>Caversham Road refurbishment</b>	Alex Brown	<ul style="list-style-type: none"> <li>Next 12 – 18 months will be devoted to design development with end users and key stakeholders. Once concept design is completed, more accurate timescales can be put forward however, these must be balanced with other key projects also under development.</li> </ul>	<ul style="list-style-type: none"> <li>Outcome of initial round of feasibility and concept design in order to feed decision-making process on option to take forward to design development.</li> </ul>	G =	On track, no issues raised


## Quadrant Four - Risk

## Corporate Risks (As of 29/11/2018)

We have performed a robust and systematic review of those risks we believe could seriously affect the organisations performance in relation to safety of our staff, reputation of our ability and the ability to deliver against our strategic commitments.

We maintain a risk register of risks faced by the organisation (excluding Health and Safety and community risk as these are addressed separately through both Occupational Health and Safety and the IRMP Programme). Below are the higher-level corporate risks that are considered and discussed on a regular basis by the Senior Leadership team and reviewed by the Audit and Governance Committee. The risks identified do not comprise all of the risks associated with the organisation and are not set out in priority order. Additional risks not presently known to management, or currently deemed to be less material, may also have an adverse effect on the business.

	No risk movement
	Risk decreasing
	Risk increasing



Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>Capital Investment Strategy (Risk: 233) Risk Owner: Assistant Chief Fire Officer</b>					
<b>Inherent Score: 23</b>					
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	<ul style="list-style-type: none"> <li>• Ensure a Property Asset Management Plan is developed</li> <li>• Ensure maximum use of memorandum of understanding and ensure compliance with statutory duty to collaborate by positive engagement with blue light and other partners.</li> <li>• Ensure effective project management through procurement of professional services and management through the programme board.</li> <li>• Additional personnel added when required for resilience. Flexible staffing model to scale up when required.</li> <li>• Annual update to Strategic Asset Investment Framework</li> <li>• Develop partnerships and opportunities for potential income generation through Joint venture and colocation opportunities</li> </ul>	<ul style="list-style-type: none"> <li>• Being developed. In service plan as work package for completion for April 2019 release. Progress is being made now fit for purpose project has been completed. This work will need to align closely with revised IRMP to ensure operational alignment.</li> <li>• Good progress with TVP on all projects and with other partners. All collaborative opportunities explored at outset of each project and engagement documented. Now part of TV Collaboration Board work stream and Collaboration Estates Operational Group</li> <li>• Professional services team working closely with Property Capital Projects team to bring the schemes forward through the planning process. Highlight reports and project updates to Programme Board and Fire Authority.</li> <li>• Property Capital Projects team scaled up to provide resources necessary to deliver Property Capital</li> </ul>	16	13	



Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
	<ul style="list-style-type: none"> <li>• Ensure additional flexibility in project plans where planning consent is required</li> <li>• Ensure good and effective communication on progress</li> <li>• Establish a ten year asset plan through the Strategic Asset Investment Framework.</li> <li>• Establish clear processes for the development of each projects business case with gateway review at key stages</li> </ul>	<p>programme as per SAIF. If additional projects become live ahead of schedule due to opportunities, then additional resources may be needed.</p> <ul style="list-style-type: none"> <li>• Work progressing on revision of SAIF for February 2019.</li> <li>• Continued engagement with stakeholders at Berkshire OPE and wider collaboration conversations.</li> <li>• Forward Planner sets out entire programme of works across entire property portfolio to identify key milestones, ensure sufficient time is allocated to the planning process ahead of tenders and to avoid pinch points across the programme.</li> <li>• Communication through SLT and Programme Board with updates to staff through Cascade. Lead member, property development working group and management committee as well as regular Group Manager level meetings across all departments.</li> <li>• Fire Authority agreed the SAIF on 31st July. The plan will be reviewed on an annual basis in line with the medium term financial plan.</li> <li>• Strict project governance now in place with approved gateway process and change management process adhered to for every project. PCP team all progressing with relevant professional qualifications to ensure in-house team is competent and capable.</li> </ul>			

# Strategic Performance Report Q2 2018/19


## Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>Emerging risks and implications of Grenfell Tower (Risk: 408) Risk Owner: Assistant Chief Fire Officer</b>					
<b>Inherent Score: 24</b>					
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	<ul style="list-style-type: none"> <li>• Ensure current policies are revised, updated and integrated across function to include the implications of the impacts and burdens</li> <li>• Ensure adequate people and financial resources within the community safety functions including proactively managing succession to mitigate any emerging risk</li> <li>• Ensure development programmes are re-aligned to include the appropriate new skills and knowledge to meet any new demands for staff</li> <li>• Ensure staffing models are flexible and agile enough to deal with a rapidly changing landscape</li> <li>• Ensure new work is embedded in service plans and any new performance measures are developed and reported on</li> <li>• Additional resources to be put in place with additional funding provided</li> </ul>	<ul style="list-style-type: none"> <li>• New ways of working now being prioritised and implemented in conjunction with AM P&amp;P SD. New meeting structures in place.</li> <li>• New ways of working prevention and protection are building teams to support work. New FI/ Enforcement/ PAS/ Fire Engineering Hub to be developed alongside this work.</li> <li>• AS determined by P&amp;P new ways of working project plans</li> <li>• Staffing models are being determined by P&amp;P New ways of working project managers in consultation with AM P&amp;P SD</li> <li>• Service Plan being updated and revised following appointment of AM P&amp;P SD</li> <li>• Development of new Hub has been allocated additional funding.( Grenfell allocation)</li> </ul>	16	16	
<b>Collaboration, partnership working &amp; shared service (Risk: 410) Risk Owner: Assistant Chief Fire Officer</b>					
<b>Inherent Risk Score: 22</b>					
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	<ul style="list-style-type: none"> <li>• Actively drive and engage with the Thames Valley strategic collaboration board</li> <li>• Continue to manage projects through programme office processes and report on updates.</li> </ul>	<ul style="list-style-type: none"> <li>• Governance arrangements now in place to lead and oversee collaborative projects. Development of collaboration document including terms of reference for sign off by constituent authorities by end of Aug 2018.</li> <li>• Regular highlight reports to Steering Group, Executive Board and RBFRS Programme Board to ensure progress and scrutiny</li> </ul>	12	12	




# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>Pension Liabilities (Risk: 413) Risk Owner: Chief Fire Officer</b>					
<b>Inherent Risk Score: 21</b>					
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	<ul style="list-style-type: none"> <li>• Pension Board to provide scrutiny on behalf of the Scheme Administrator (Fire Authority)</li> <li>• Seek legal advice on emerging issues as appropriate to ensure actions taken are within parameters and are escalated to Fire Authority as appropriate</li> <li>• SLT to consider any matters arising as appropriate</li> <li>• Careful monitoring of SLAs and service provision from WYPF as a result of their client base increasing</li> </ul>	<ul style="list-style-type: none"> <li>• PB had training, meetings examine arising matters/risk assessment maintained by PB. Further training &amp; input - LGA Oct 2017. Tax trng, developments considered by PB. Annual report to FA. New member and Chair of PB in place.</li> <li>• Advice sought on 30/08/17 and 14/3/18 on identified issue - approach/impacts shared with SLT. VSP - MO and legal advice sought. A&amp;G report July 2018 &amp; update to Man Comm on VSP 22 Oct 2018. Response from 3rd party 15.11.18</li> <li>• Agreed actions SLT 29 May 2018 &amp; A&amp;G July 2018. Provision of information to assist. decision making discussed at contract meeting 6.9.18. Paper to Man Comm October response received 3rd party 15.11.18</li> <li>• Discussion at contract meeting 6.9.18 to ensure that the focus on performance/access to expertise not lost. Audit scope reviewed - consider business continuity and assurance of expertise. now 6 month reports to A&amp;G</li> </ul>	15	15	


# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>Firefighter Safety (Risk: 417) Risk Owner: Deputy Chief Fire Officer</b>					
<b>Inherent Risk Score: 25</b>					
<p>If we do not maintain the safety, health and wellbeing of our operational staff through effective training; operational policy and guidance; safe systems of work and; means to capture and respond to operational learning, we risk a significant firefighter injury or fatality, a failure to comply with our legal duty and an undermining of the operational effectiveness and competence of our staff. This could significantly impact the effectiveness of our operational response, have a long term impact on staff welfare and damage our public reputation and trust levels.</p>	<ul style="list-style-type: none"> <li>• Programme of Work to be undertaken across SD Hubs to have in place "Service Readiness" ensuring all stations operating to common standards for training, assurance, delivery off PP&amp;R and maintenance of standards. To be led by DCFO and AM SD</li> <li>• Monitoring experience levels on RDS stations</li> <li>• Operational assurance framework processes, ensuring firefighter risk management, are being monitored for effectiveness and changes implemented as necessary.</li> <li>• Monitor operational competency</li> <li>• Monitor operational refresher training</li> <li>• Alignment of RBFRS Operational Policy and Guidance with the National Operational Guidance (NOG)</li> </ul>	<ul style="list-style-type: none"> <li>• Station Audit process trialled, framework and policy in place. Full Audit programme has now commenced.</li> <li>• Further review to be undertaken early in Q4 to look at impact of new RDS personnel becoming qualified</li> <li>• OA monitoring process and roles further adapted to ensure review by OPAS, RSG and SDMT as appropriate to matter identified.</li> <li>• Percentage of eligible staff in qualification monitored through SPB, SLT and Audit and Governance. Performance measured against core areas of the Fire Professional Framework</li> <li>• OTP not yet live - Station audit process now in place, training sampled as part of audit. Stations able to plan training using FireWatch.</li> <li>• This work is being delivered through the Thames Valley Delivery Group as part of TV Collaboration. OFRS officer leading with officers from across all 3 services supporting. Policies and procedures being monitored/maintained during transition.</li> </ul>	19	19	


# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>ESMCP (Risk: 418) Risk Owner: Deputy Chief Fire Officer</b>					
<b>Inherent Risk Score: 18</b>					
<p>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.</p>	<ul style="list-style-type: none"> <li>• Service level project board to oversee RBFRS delivery across national programme work streams and SC partners.</li> <li>• Representation on SC Programme Board with funded programme support and appointed staff within each regional work stream group.</li> <li>• Representation on National Fire Customer Group by DCFO for SC Region</li> <li>• Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified.</li> <li>• Preparation of systems (e.g. TVFCS ICCS) being completed with national programme funding already secured</li> <li>• Regular reporting to Audit and Governance Committee to ensure transparency in service and national programme progress</li> <li>• Detail resource requirements to ensure all work streams are successfully delivered</li> <li>• RBFRS review of implications of National Programme move to an incremental approach to ESN delivery. To be completed with a 75% of assurance and fed back to National Programme by September 2018. Interim positions of 25% and 50% in June and August.</li> </ul>	<ul style="list-style-type: none"> <li>• Head of BIS internal sponsor. Appointed PM in place. RBFRS project Board in place. Board tasked with developing RBFRS options under new ESN incremental delivery model subject to FBC publication.</li> <li>• Current commitments remain sufficient. Monitoring commitment to work streams in context of developing narrative National Programme of a move to an 'incremental approach to ESN'. Reviewing current Prog Mgt provision with SC partners.</li> <li>• Continue to attend FCG for updates and input to National Programme.</li> <li>• Contact maintained through SC Board. Regular police attendance and SCAS dial in. Unclear how incremental approach will impact collaboration opportunities though regular discussion maintained. Current consideration for joining up on assurance testing.</li> <li>• Work continues within TVFCS. Vodafone putting in place DNSP connection. Some delay in ICCS upgrade. No concerns over progress given move to incremental approach and no identified funding issue in this area.</li> <li>• Update to A&amp;G made 01 Nov 2018. Letter sent from FA through A&amp;G in support of NFCC/LGA letter. Response received from Permanent Secretary and reported to A&amp;G.</li> <li>• National Programme confirmed incremental approach Sept 2018. Programme still subject to Full Bus Case review, now due early 2019. Work streams continue to progress where they can making necessary business assumptions.</li> </ul>	14	14	


# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
		<ul style="list-style-type: none"> <li>Return on 06.06.18 on RBFRS approach - 25% assurance. NP sought further return for 03.09.18 with higher assurance. Not possible until NP address questions raised. RBFRS developing options for delivery based on incremental delivery. A&amp;G Inf 01 Nov 18</li> </ul>			
<b>Operational Availability, Crewing and Capabilities (Risk: 419) Risk Owner: Deputy Chief Fire Officer</b>					
<b>Inherent Risk Score: 21</b>					
<p>If we fail to maintain appropriate numbers of personnel and associated skills and knowledge requirements, in line with our planned establishment and current or future demands, then we can expect this to affect our ability to provide an efficient and effective level of service delivery that matches our commitments and stakeholder expectations. This could significantly impact community safety and organizational reputation.</p>	<ul style="list-style-type: none"> <li>RDS Project to create sustained recruitment and retention and deliver increased availability across all RDS stations.</li> <li>Focus on RDS recruitment, training, succession planning and retention</li> <li>RDS management and training support</li> <li>Watch management accountable for management of leave policy, maintaining an accurate crewing forecast and ensuring appropriate level of qualifications on watches</li> <li>Hub managers accountable for ensuring leave policy adhered to, watch levels are managed across stations and vacancies are managed.</li> <li>OPAS accountable for monitoring and reporting on crewing levels across the service (WDS, RDS and FDO)</li> <li>On-going proactive management of service delivery workforce planning needs through the Workforce Planning Group</li> <li>RDS Working Group and RDS User Group established post RDS project to maintain focus on recruitment, retention, training and succession to build and maintain sustainable RDS capability</li> <li>Completion of process mapping and improvement planning of systems and processes supporting availability, crewing and succession planning.</li> </ul>	<ul style="list-style-type: none"> <li>Project close down will be completed and signed off by Project Sponsor by end of Dec 2018.</li> <li>Overall net gain in recruitment. Focused RDS support through sustained working group post project. Local succession planning taking place for skills. Review of L1/driver skills completed.</li> <li>New arrangements with RSU taking place with L&amp;D. Hub leads continue to support. Initiatives in hubs for WDS temp opportunities for increased RDS involvement with HAG/NFST, exercises and drill nights.</li> <li>Increased focus through Hub management 121s and SDMT on leave management. Leave policy reviewed, adjusted for clarity for JO's and issued.</li> <li>Increased focus through Hub management 121s and SDMT on leave management.</li> <li>Development of further IM from Vision and Firewatch to improve reporting. Movement of OPAS into SD completed.</li> <li>Group meeting regularly with long term forecasting in place and promotion/recruitment requirements planned forward and linking with developing OPAS work.</li> <li>Meeting dates booked and attendees agreed</li> <li>Initial meeting now held with Librea who have been commissioned to undertake process mapping and</li> </ul>	14	14	

# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk


Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
		improvement work. Awaiting scope to be returned for review and sign-off.			
<b>Capacity, Capability and resilience (Risk: 422) Risk Owner: Director of Support Services</b>					
<b>Inherent Risk Score: 21</b>					
<p>If RBFRS fail to increase the capability, capacity and resilience of our workforce which may become increasing likely as we lose knowledge through retirement of experienced staff, and require new skills and additional capacity to help us responds to the changing demands of the workforce reform programme and vision 2019, then we can expect to fail to deliver against our statutory requirements and broader organisational development objectives</p>	<ul style="list-style-type: none"> <li>• Revise the RBFRS people strategy, taking in feedback from the recent peer review and National CFOA people strategy</li> <li>• strengthen workforce planning information to cover all staff and regularly review as part of performance monitoring</li> <li>• Implement middle managers development programme in collaboration with TV partners</li> <li>• Increase flexibility of recruitment policies to enable RBFRS to attract and retain the best staff</li> <li>• Review reward and recognition arrangements for all staff</li> <li>• in terms of resilience we have a number of grey book staff who have been in temporary positions for a considerable then of time and through the workforce planning group we need to determine a plan to substantiate position where possible</li> <li>• Intelligence shows that over the next 6-12 months we will need to develop a plan to run selection and recruitment programmes for all grey book posts from FF to ACFO to enable us to have sufficient capacity, capability to deliver the service</li> </ul>	<ul style="list-style-type: none"> <li>• Strategy has been agreed and through consultation. Work is now starting on developing the detailed action plans. A number of related project plans agreed and monitored through PB.</li> <li>• Workforce Planning Board established. Standard report -workforce information. Impacts of IRMP projects identified, promotion schedule agreed 06/18, monitoring promotion activity &amp; pools for succession reported, specific Task &amp; Finish group set up</li> <li>• Middle Manager development programme embedded with majority of MM now completed. full evaluation of programme still to come to SLT.</li> <li>• Recruitment PID agreed at PB March/ updated May. Work leads assigned, priorities identified, regular review on project progress via project meetings in between PB meetings. Portal secured</li> <li>• This action forms part of the People Strategy and will also be picked up in the recruitment project.</li> <li>• This is a new treatment designed to respond to a growing concern around temporary roles</li> <li>• Temporary chains considered as part of the Workforce Planning Group</li> <li>• We are at the early stages of the treatment and will be seeking external support where possible. Promotion process for GMs complete.</li> </ul>	18	18	

# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>Failure in delivery of ESMCP National Programme (Risk: 425) Risk Owner: Deputy Chief Fire Officer</b>					
<b>Inherent Risk Score: 22</b>					
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.	<ul style="list-style-type: none"> <li>• Programme Management structures for SC Region</li> <li>• Communication of service and regional concerns through Fire Customer Group and NFCC lead.</li> <li>• ESN National Programme change to an incremental approach to ESN delivery - Review of impacts to be completed June - Sept 2018 – incl. extension of airwave implications and appetite for phased product adoption.</li> <li>• Informing of FRS position to National Programme through the NFCC.</li> </ul>	<ul style="list-style-type: none"> <li>• DCFO Steve Foye maintains on-going oversight of national progress at Fire Customer Group and chairs SC Regional Group. This is an on-going treatment. National Programme are currently going through a programme "reset". Expected July 2018.</li> <li>• Attending or dialling into monthly Fire Customer Group meetings. Regional NFCC ESN team attend South Central Programme Board. Monthly and other updates from national programme shared with key staff for impacts and feedback.</li> <li>• June return made to ESN National Programme re incremental approach (see risk 418). Project Board developing options for take on of ESN subject to FBC completed by National Prog early 2019. To go to SLT and TVFCS.</li> <li>• CFO providing challenge at NFCC council. NFCC chair and LGA chair wrote to Perm Sec Aug 2018 with response received November 2018.</li> </ul>	18	18	
<b>Management of Assets (Risk: 427) Risk Owner: Deputy Chief Fire Officer</b>					
<b>Inherent Risk Score: 21</b>					
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.	<ul style="list-style-type: none"> <li>• Introduce and maintain asset management system within Facilities.</li> <li>• Finance to review policy and methodology for the disposal of assets.</li> <li>• ICT to review and capture current asset management process ensuring any disposal arrangements align with organisational policy</li> <li>• Introduction of the use of Tranman to provide a fully automated process for the management of operational assets.</li> <li>• Business Case to be brought forward for asset management approach across the directorates. For</li> </ul>	<ul style="list-style-type: none"> <li>• 1 temp staff gathering asset info from across SD (1 left service 09.11.18) will delay completion, forecasting End Feb 2019. Bus Case in development though loss of Project lead in Oct. Recruitment for replacement underway.</li> <li>• work on this has started but will be revisited as the project moves forward particular to review definitions of Assets and values of assets</li> <li>• ICT fully engaged in asset management project activities with a view to ensuring that where appropriate, existing systems are explored and assessed against overall RBFRS requirements</li> </ul>	18	18	





Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
	<p>assets in ICT, facilities and operations (fleet and equipment).</p> <ul style="list-style-type: none"> <li>New Supplies and Assets Manager role to be established within Facilities as per planned structure changes. Role will link with Ops Equipment and other functions to support alignment of asset management</li> </ul>	<ul style="list-style-type: none"> <li>As above, asset information being collected across SD. Further work required prior to full implementation including consideration of the findings from the Wokingham Road pilot.</li> <li>Development of business case with clear options is now subject to new lead in role. It will include range of options that focus driven by overall ways of working which may include appropriate system/s as part of solution.</li> <li>Role profile completed and recruitment underway. Expected to be completed Jan 2019</li> </ul>			
<b>Fire Service College (Capita) (Risk: 479) Risk Owner: Head of HR and L&amp;D</b>					
<b>Inherent Risk Score: 13</b>					
<p>If the Fire Service College fails to deliver its services, which may become more likely given the financial health of the parent company (Capita PLC), then we can expect to see a cessation or reduction in the availability of training courses for new firefighters and existing staff (covering a range of areas), which will be significant in relation to our need to develop and maintain a safe and competent workforce.</p>	<ul style="list-style-type: none"> <li>Monitor training needs and bookings with the FSC to ensure courses are to be delivered as planned</li> <li>Identify other providers of training</li> <li>Export recruitment data through each stage of the forthcoming recruitment process to enable management of the process internally in the event the online platform ceases to be available.</li> <li>Reorganise commitments internally as necessary to accommodate any changing circumstances</li> <li>Regular financial health monitoring</li> </ul>	<ul style="list-style-type: none"> <li>Training Plan for 2018/19 outsourced training considered - No difficulties identified in accessing training as at Oct 2018 - monitoring continues. Training requirements for 19/20 TCR process commences Oct.</li> <li>Provider options considered in relation to training need, availability and cost. Alternative providers for most training known to organisation.</li> <li>Provision in system enable the export of data. To be built into recruitment process commencing Feb 2018 - WT campaign closed</li> <li>Assess requirements as circumstances dictate. Consider outsource of other training to enable recruit training to be delivered in house if necessary but not required for WT before 2019/20</li> <li>monitoring of the financial health of capita provided via procurement for awareness</li> </ul>	10	10	



# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk


Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>Ongoing viability of Capita Communications and Control Solutions (Risk: 480) Risk Owner: Head of Business Information Systems</b> <b>Inherent Risk Score: 20</b>					
If Capita Communications and Control Solutions ceases trading, is sold or divested, or stops providing services to RFBRS, which is an increased possibility given Capita Systems recent profit warning, then we can expect software and hardware support for the Vision Mobilisation and control systems to be disrupted, degraded, or cease altogether, which is significant in respect of our Service delivery response, and Collaboration objectives	<ul style="list-style-type: none"> <li>Monitor corporate and financial health of Capita Communications and Control Solutions</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing monitoring continues - no major issues or alarming trends developing. Update - no significant change in credit position but some additional negative press coverage has recently come to light</li> </ul>	13	13	
<b>Impact of GDPR Non-compliance (Risk: 481) Risk Owner: Head of Business Information Systems</b> <b>Inherent Risk Score: 18</b>					
If we do not manage the service's compliance to GDPR requirements, which is increasingly likely due to impending legislative enforcement, then we can expect increased likelihood of negative reputational impact and significant financial penalties in the event of a personal data breach.	<ul style="list-style-type: none"> <li>Central Policy updates to reflect GDPR</li> <li>IG Team resourcing</li> <li>GDPR compliance tracking</li> <li>Investigate/implement Subject Access search and rights application system to reduce organisational overhead and time to respond to SARs</li> </ul>	<ul style="list-style-type: none"> <li>In-scope policies have been identified and 9 policies have now been revised and published</li> <li>Additional resource is being sought to alleviate routine workload from key existing resources. Update: Interviews did not identify a suitable candidate - now being advertised through Fusion plus</li> <li>Ongoing tracking of progress against action plans - 83% complete as of 16th November, with an estimated completion date of early January 2019 based on current rate of progress</li> <li>Initial research into potential solutions started - utilising Gartner magic quadrant for research. Update: System capabilities reviewed favourably by IG and ICT teams. Onsite demo date not finalised yet.</li> </ul>	13	13	

# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk



Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>Management of Corporate Data, Information and Knowledge (Risk: 482) Risk Owner: Head of Business Information Systems</b>					
<b>Inherent Risk Score: 17</b>					
If RBFRS fails to effectively manage the sharing, control and distribution of corporate data, information and knowledge, which is increasingly likely due to the increasing complexity of data flows into, out of and within the organisation, as well as significant change in organisational structure and personnel, then we can expect mishandling and loss of critical information as well as reduced efficiency in getting the right information to the right individuals for the right action to be taken, which is significant in respect to achieving all of our strategic objectives	<ul style="list-style-type: none"> <li>• Create a data classification framework to ensure that appropriate departments and individuals are sighted on the data classes their role(s) demand, and which defines the management and handling of specific record types.</li> <li>• Create an Information Sharing policy to ensure that consistent handling of critical information is defined</li> <li>• Review and update email distribution lists to reduce unnecessary exposure to information</li> <li>• Create a document management policy to clarify the lifecycle management of information types and permissible modes of storage/transmission</li> <li>• Create Process and Standard Operating Procedure documentation for business critical information flow management to cover inbound, outbound and intra-service information flow</li> <li>• Establish learning/comms Vehicles to ensure consistent familiarisation and awareness of information management processes and procedures</li> </ul>	<ul style="list-style-type: none"> <li>• Draft framework accepted. Work has begun to draft the business case for necessary resourcing to progress. Scope and deliverables have been defined and started.</li> <li>• Consultation with the wider organisation continues.</li> <li>• Initial scope identified and tangible deliverables documented. Further effort will come out of the draft classification framework document set.</li> <li>• Document Management policy in draft revised target date December 2018</li> <li>• Initial scope identified and tangible deliverables documented. Further effort will come out of the draft classification framework document set.</li> <li>• Initial scope identified and tangible deliverables documented. Further effort will come out of the draft classification framework document set.</li> </ul>	16	16	
<b>Data reliability, validity and analysis (Risk: 483) Risk Owner: Director of Support Services</b>					
<b>Inherent Risk Score: 21</b>					
If we fail to maintain reliable systems and accurate data that supports effective and timely analysis and continuing improvement of knowledge about our activities and their impacts, then we will not be able to make informed, evidence based decisions, manage and improve performance of services, report effectively on this performance to	<ul style="list-style-type: none"> <li>• Commission work to scope longer term data resolution and development.</li> <li>• Maintain capacity within the data and performance team to deal with all organisational intelligence requirements, ensure scope of responsibility is clear and use of analytical capacity efficient.</li> <li>• Develop skills and capabilities of data and performance team to enhance analytical capability of the organisation.</li> </ul>	<ul style="list-style-type: none"> <li>• TV mapping and modelling steering group now reports into TV collaboration board. Reviewing data systems and development projects across the organisation will continue following review of the data function and structure.</li> <li>• DPAM secondment extended until end March 2019 to allow review of data and performance team to ensure this function is able to meet new and emerging organisational requirements.</li> <li>• Training requirement submitted for 2018/19 with some flexibility for developing requirements.</li> </ul>	15	15	

Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<p>the Fire Authority and the public and respond to audit needs - such as HMICFRS. This would substantially undermine our financial and resource efficiency, operational effectiveness and our political and public reputation.</p>	<ul style="list-style-type: none"> <li>• Ensure close liaison and effective working relationships with BIS to ensure data assurance and reporting methodology, as well as ensuring D&amp;P team have access to data required to perform role, and SQL reporting controls</li> <li>• Ensure clear, documented and agreed definitions of performance measures, starting with corporate measures</li> <li>• Ensure accuracy of reporting systems and processes, ensure smooth scorecard retirement</li> <li>• Improve data entry processes across the organisation to ensure data integrity</li> <li>• Developing performance department to actively support other teams in using performance management tools, data and information and knowledge to define delivery plans</li> <li>• Ensure performance management framework and processes are aligned to HMICFRS requirements, where this is appropriate and helpful.</li> <li>• Build links with analysts and data managers in partner FRSS, Home Office and HMICFRS to ensure any issues and efficiencies are identified.</li> </ul>	<p>Ongoing identification of training needs alongside development of skills as individuals become more experienced in post.</p> <ul style="list-style-type: none"> <li>• Agreed an approval process with BIS for commissioning and approval process of data reporting to ensure data integrity. Fortnightly meetings in place to monitor progress on development work.</li> <li>• Significant progress made as part of development of 18/19 Corporate measures. New SQL reporting tool launched as part of quarter 1 reporting, feedback collection period now underway. Review of RDS Avail complete, automated, and added to SQL report.</li> <li>• Small number of outstanding issues in relation to scorecard retirement, these will be risk assessed prior to a decision to turn off. Access removed for users 13/09.</li> <li>• Work underway as part of the BPI programme to identify areas of continuous improvement in prevention and protection processes to include data entry and quality.</li> <li>• Team manager is developing relationships and communication channels with hub managers. Data input and process focus continues to have an impact on value added here. Support provided for use of new SQL reports.</li> <li>• Completion of two data requests. Assessment of data requested and national picture in progress.</li> <li>• Met with HMI data leads from Ox and Bucks in June and October. Continue to build contact with HO analysts. Taken key role in developing new TVFCS performance data group.</li> </ul>			

Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>Response to Home Office Reform Programme (Risk: 484) Risk Owner: Director of Support Services</b>					
<b>Inherent Risk Score: 21</b>					
<p>If RBFRS fails to meet the expectations of the Home Office Fire Reform Programme and fails to deliver against the revised national framework as monitored by the HMICFRS Inspection Programme, which may become increasingly likely given absence of clarity on the details of the inspection programme, then we can expect to receive a lower than desired inspection assessment, reputational damage and loss of public confidence which will be significant in our ability to meet our strategic objectives.</p>	<ul style="list-style-type: none"> <li>• Ensure plans and projects (inc IRMP) are focused on delivery of services as set out in the efficiency and effectiveness elements of the National Framework and HMICFRS methodology. Gather evidence to show how projects are delivering against plans.</li> <li>• Ensure that the new People Strategy is aligned to the people element of the National Framework and HMICFRS methodology.</li> <li>• Engagement with HMICFRS through NFCC, directly and through national and regional consultations and events, to ensure ability to plan against emerging programme.</li> <li>• Ensure that we have adequate resource to manage and direct the preparation for and process of the inspection.</li> <li>• Ensure that we have adequate capacity across the organisation to meet the practical requirements of the HMICFRS Inspection.</li> <li>• Identify stakeholders and develop a communication plan to ensure all stakeholders are fully informed in relation to the Inspection Programme plans and RBFRS preparation.</li> </ul>	<ul style="list-style-type: none"> <li>• Corporate Plan and IRMP 2019-23 aligned to National Framework (including HMICFRS), has concluded its consultation phase for report to Fire Authority. Reporting to quarterly SPB and bi-monthly Programme Board on project progress in place.</li> <li>• People Strategy published. Projects have been started on key focus areas and long term plan being developed to understand timescales for the delivery of the remaining activities. Project tracker in place.</li> <li>• Responses to consultations and attendance at events. New Service Liaison lead assigned in October, visits arranged to ensure SLL fully briefed ahead of Discovery phase.</li> <li>• Project group has been set up to support preparation. Two data submissions completed. Document request and self-assessment submitted. Engagement Visits complete for new SLL. Discovery Week planning underway.</li> <li>• A standard service plan objective for HMICFRS involvement has been developed and agreed for use across the organisation for 2018/19. Following completion of inspection, requirement actions to be incorporated into 2019/20 corporate planning.</li> <li>• A communication plan for staff and FA members has been developed and continues to be rolled out with updates as required. Work ongoing around organisational awareness of inspection processes, including workshops and 1:1 meetings.</li> </ul>	15	15	


# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>Volatility of funding (Risk: 506) Risk Owner: Chief Fire Officer</b>					
<b>Inherent Risk Score: 24</b>					
If RBFRS fails to receive sufficient funding, which is becoming more likely given the level of national debt, the Government's fiscal policy, increasing volatility in local funding and increasing budget pressures, we can expect to face further reductions in service delivery and a loss of public trust, which will severely impact on our ability to deliver our statutory duties and strategic objectives.	<ul style="list-style-type: none"> <li>• Political engagement with Central Government to ensure new burdens are matched with new funding</li> <li>• Political engagement with Government to remove precept cap and referendum requirements which will allow additional flexibility in local funding</li> <li>• Engagement with Central Government, through Political lobbying, Fire Finance Network and NFCC, on new Fire Funding proposals</li> <li>• Engagement with fire minister and Home Office Officials to explain and clarify RBFRS pressures and risk/ demand methodology.</li> <li>• Write to all Berkshire MPs to gain support for our return to Government for the Local Finance Technical Consultation</li> </ul>	<ul style="list-style-type: none"> <li>• Responded to Central Government on 2019/20 Local Finance Technical Consultation. Engagement with Berkshire MPs has been encouraging and engagement continues.</li> <li>• Responded to Central Government on 2019/20 Local Finance Technical Consultation. Engagement with Berkshire MPs has been encouraging and engagement continues.</li> <li>• Will look to respond through the various channels to ensure our views are taken into account early on in any decision-making processes.</li> <li>• Correspondence has been exchanged between minister and officials and a conference call has taken place on 11 May.</li> <li>• Chairman has written to all local MPs to canvas support for flexibility in precept funding.</li> </ul>	18	18	
<b>Management of Resources (Risk: 507) Risk Owner: Assistant Chief Fire Officer</b>					
<b>Inherent Risk Score: 24</b>					
If we fail to manage resources tightly which is more likely in the short term given that the organisation has undergone substantial restructuring then we can expect that resource utilisation will be sub-optimal which will negatively impact on our ability to deliver an efficient and effective service to the public.	<ul style="list-style-type: none"> <li>• Robust internal budget monitoring and management processes</li> <li>• Initiate budget setting process for 2019/20 in September</li> <li>• Agility in internal planning processes to ensure delivery plans are matched to Medium Term Financial Plan</li> <li>• Effective and flexible Treasury and Reserves management</li> <li>• Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified.</li> </ul>	<ul style="list-style-type: none"> <li>• Q1 revenue and capital budget monitoring work completed with full engagement from cost centre managers. New permanent employee focused on this area started Aug 18.</li> <li>• Planning is underway and is a key deliverable for the Finance and Procurement Service Plan</li> <li>• Planning for IRMP projects delivery is in place.</li> <li>• 10 year capital strategy presented to Fire Authority in July</li> <li>• On-going treatment. Work with Police , regional FRS's and SCAS through range of forums (ESMCP, SEORRG, LRF, BRG TV Collaboration and Partnership etc.).</li> </ul>	13	13	

# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q1 risk score	Current Risk Score	Direction of travel
<b>Property Capital Projects - Theale (Risk: 516) Risk Owner: Head of Property Capital Projects and Estates</b>					
<b>Inherent Risk Score: 22</b>					
If the site remediation works are more extensive than surveys indicate, which is possible on this site, then we could see an increase in the costs to carry out the remediation works.	<ul style="list-style-type: none"> <li>Site remediation will form part of a separate tender to the main build contract in order to work more closely with the specialist contractors to identify the works and strategy to remediate this site in line with requirements for build contract.</li> <li>Negotiation with site owners to ensure they are fully informed of state of remediation and impact on purchase negotiations.</li> </ul>	<ul style="list-style-type: none"> <li>Responses to the contractor engagement has indicated that the site is viable and the team will now progress with full tender process to return an outcome by March 2019.</li> <li>Network Rail are regularly updated and will have sight of the remediation tender results on an open book process.</li> </ul>	22	22	
<b>Capacity to respond to Subject Access Requests (Risk: 556) Risk Owner: Head of Business Information Systems</b>					
<b>Inherent Risk Score: 18</b>					
If we receive a significant volume of Subject Access Requests, which is increasingly likely due to recent introduction of new rights under GDPR/the data protection act 2018, we may be unable to respond within legislative timescales due to the complexity of subject data searches within RBFRS.	<ul style="list-style-type: none"> <li>Increase Capacity of Information Governance team to process and manage Subject Access Requests</li> <li>Investigation of tools and processes to reduce overall information search effort</li> </ul>	<ul style="list-style-type: none"> <li>Recruitment underway</li> <li>Discussions with IG team and ICT team regarding process improvement options in progress. GDPR specific tools under review for future implementation</li> </ul>	New risk	18	n/a
<b>Employer Pension Contribution Increases (Risk: 559) Risk Owner: Assistant Chief Fire Officer</b>					
<b>Inherent Risk Score: 24</b>					
If RBFRS fails to receive sufficient government funding to pay for increases in the employer contribution rates of firefighter pension schemes, which is likely given the squeeze on public finances, we can expect to face further reductions in service delivery and a loss of public trust, which will severely impact on our ability to deliver our statutory duties and strategic objectives.	<ul style="list-style-type: none"> <li>Political engagement with Central Government to ensure new pension burdens are matched with new funding</li> <li>Political engagement with Government to remove precept cap and referendum requirements which will allow additional flexibility in local funding to meet pension burdens</li> <li>Engagement with Central Government, through Political lobbying, Fire Finance Network and NFCC, on new Fire Funding proposals to take account of pension burdens</li> <li>Write to all Berkshire MPs -explain pension pressure</li> </ul>		New risk	24	n/a



## Accident Investigations

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 Y.T.D.
Accidents Requiring Investigation	Minor	12	9			21
	Moderate	6	7			13
	Major	0	0			0
Near Misses Requiring Investigation	Minor	5	4			9
	Moderate	4	10			14
	Major	0	2			2
*Accident Investigations Completed	Minor	12	9			21
	Moderate	2	4			6
	Major	0	0			0
*Near Miss Investigations Completed	Minor	5	4			9
	Moderate	2	3			5
	Major	0	0			0
**Recommendations not Implemented	Minor	0	0			0
	Moderate	0	0			0
	Major	0	0			0



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

\*\*Recommendations arising from accident investigations that have not been implemented.

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

**Moderate** - an accident which causes an injury requiring medical treatment immediately (not including first aid) or at a later date (for example physiotherapy), and/or an accident that is likely to lead to more than three days' absence from work or normal duties (i.e. restricted duties) but is not a specified injury as defined under RIDDOR, or a near miss event, including Dangerous Occurrences as defined under RIDDOR, which had the potential to have caused such injuries. These investigations are carried out by someone who is trained in analytical accident investigation, known as an Accident Investigation Officer (AIO).




**Major** - an accident that causes a death or a specified injury as defined under; or a near miss event, including Dangerous Occurrences as defined under RIDDOR, which had the potential to have caused such injuries. Major events are investigated by a team of AIO's, co-ordinated and led by an Area Manager.


**Near miss** definition: An unplanned event including damage to equipment and property that had the potential to cause death, injury or ill health. Accident categories may be re-categorised at any point before or during the investigation, which can retrospectively affect the numbers.



## Audit Recommendations



The audits shown have been undertaken and recommendations agreed. The information provides a progress on those open recommendations as of 06/11/2018.

	Audit action continuing to progress
	Audit action progress decreasing
	Audit action progress improving

Ref:	Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Date of Audit Report	Allocated to
151	<b>Cyber Security (or Cyber Risk Management)</b>	Management should look to get the software management portal completed so they can observe their actual compliancy with licenced software as well as with unsupported software.	31/03/2018	31/12/2018	Medium	In progress. Software asset management tool is in active use and a software inventory is being built. UPDATE May 18: Snow SLM configuration is in progress with currently 50 complete. All agreements have been imported, now working on license import and manual one-off matching exercise to generate automated notifications to asset owners. UPDATE Sept.18: completed a comprehensive manual review of our software-licensing environment and are now ready to import this information into our software asset management software, once the licensing automation module has been purchased and installed. <b>UPDATE November 2018: Only two elements of our software environment are outstanding from an import perspective, on track for revised completion date</b>	<b>RED</b> 	06/12/2017	Head of Business and Information Systems (HBIS)



# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Ref:	Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Date of Audit Report	Allocated to
153	<b>Cyber Security (or Cyber Risk Management)</b>	Management should remove all legacy software from their computers as the manufacturers no longer release security patches for them.	31/03/2018	31/12/2018	Medium	Software asset management tool inventory will be used to catalogue legacy applications and flag for retirement. Legacy software will disappear, as older machines are decommissioned. Only current software is being installed onto new builds. UPDATE May 18: Requires purchase of additional modules for Snow SLM, which will automate the identification and removal of unused or redundant software, and recycle licensing if appropriate for alternate legitimate usage. <b>UPDATE November 2018: All pre-requisites for purchasing and installing the automation platform have been completed and initial install and configuration is planned for early November 2018. On track for revised completion date</b>	RED 	06/12/2017	Head of Business and Information Systems (HBIS)
156	<b>Procurement Advisory Review</b>	Recommends RBFRS considers investing in contract management software, which may serve as a repository of documents alongside providing other information such as key trigger dates within contracts.	31/12/2018		n/a	The Authority is currently planning to purchase an additional Sage module that will encompass this information and link this to the scanned copies of live contracts on the S drive. This work will commence in July 2018. UPDATE June 18: Current Sage supplier has been asked to provide P2P module options that will work with Sage but is not limited to Sage only so portable to any new software the Authority might move to in future. Update July 18. Libreea are mapping current P2P manual processes August 18. Project brief to commence full review and identify options and business case for a new P2P solution to be considered by SLT 7th Aug 18 <b>UPDATE October 2018: Delayed due to other priorities P2P tender ready for issue to potential suppliers November 18</b>	AMBER 	07/12/2017	Procurement Manager




# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Ref:	Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Date of Audit Report	Allocated to
157	<b>Procurement Advisory Review</b>	Recommends RBFRS Ensures that the governance in collaborative procurement projects, where there is shared responsibility and accountability between organisations, is agreed. Terms of reference for projects should identify which parties have lead accountability and authority for key decisions.	31/03/2018	31/07/2018	n/a	This is a new requirement as a result of the high proportion of tenders now being run collaboratively. This piece of work is already on the Thames Valley Procurement Collaboration programme of work. UPDATE Jan 18 - A first draft is due to go to the next Procurement Collaboration meeting in March 2018. UPDATE June 18: Report drafted for review by the Strategic Collaboration Board Update July 18 Collaboration Executive Board have requested a lesson learned at their next meeting and may then request a governance document for procurement collaboration <b>UPDATE October 2018: Procurement Governance report prepared and signed off for consideration at a future appropriate meeting of the Collaboration Executive Board</b>	GREEN 	07/12/2017	Procurement Manager
159	<b>Timesheets and Timekeeping</b>	Management will streamline the policies where possible into fewer documents, enabling more swift updating and review of policies	01/09/2018	31/03/2019	Low	Currently being looked at to when best to undertake in line with rest of policy review Update July 18: Annual leave Policy for WT and RDS is currently being reviewed in-line with the RMS/FDO policy. This will look to amalgamate the RDS and WT policies and consider incorporation of the optimisation of crewing policy. Green book leave policy amalgamation was considered but it was identified that due to the vast differences this policy should remain separate – Green book A/L policy is currently out for formal consultation due for publication 3 September <b>UPDATE Nov 18 - The revised Green book leave policy has been published.</b> <b>The WT leave policy will undergo a review following the implementation of the RMS/FDO project to align with necessary changes. Any amalgamation will be considered at this time.</b>	GREEN 	01/03/2018	HHR & LD


# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Ref:	Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Date of Audit Report	Allocated to
160	<b>Timesheets and Timekeeping</b>	Guidance relating to the parameters for completing the timesheets in practice will be included in the Flexible Working Hours Policy. Once completed this will be communicated to all current and future non-uniformed staff and those who manage non-uniformed staff.	01/09/2018	31/12/2019	Low	Currently being looked at to when best to undertake in line with rest of policy review UPDATE July 18: To be undertaken following publication of the Annual Leave Policy <b>UPDATE Nov 18 – Guidance on how to complete annual leave on FireWatch time sheets has been published within the Firewatch guidance section on Siren. Drop in sessions for staff have been arranged to demo the new timesheet/ annual leave authorisation process and the recording requirements.</b>	<b>GREEN</b> 	01/03/2018	HHR & LD
161	<b>Timesheets and Timekeeping</b>	Management will implement a reference guide for activities and type of leave to be used within the Firewatch system	01/09/2018	31/12/2018	Low	To be commenced UPDATE July 18: To be undertaken following publication of the Annual Leave Policy <b>(UPDATE Nov 18 - Still to be finalised)</b>	<b>GREEN</b> 	01/03/2018	HHR & LD
167	<b>Timesheets and Timekeeping</b>	Policies will be amended to state under what circumstances staff may enter their own leave	01/09/2018	31/03/2019	Low	Currently being looked at to when best to undertake in line with rest of policy review UPDATE July 18: Guidance document to be issued following finalisation of the Annual leave policy for Green Book staff <b>UPDATE Nov 18 – Green Book Policy updated and guidance written (WT and RDS to be completed in line with the review post RMS/FDO project)</b>	<b>GREEN</b> 	01/03/2018	HHR & LD

# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

Ref:	Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Date of Audit Report	Allocated to
176	<b>Key Financial Controls</b>	The finance team will review the activities carried out by staff members and ensure that each activity can be carried out by at least two members of staff and thereby ensuring roles can be covered where there are staff absences.	01/09/2018	31/01/2019	Low	Staffing structure is currently being reviewed, but cross training has begun in Qtr 1 18/19 and this will be reinforced once the permanent staffing structure has been implemented. UPDATE July 18: Staffing structure is currently being finalised, with new structure implemented in August 2018. Cross training began in Qtr 1 18/19 and this will be reinforced once the full staffing structure has been implemented. <b>Update November 2018– Cross training is progressing on a number of tasks / areas. Cross working has also commenced on budget monitoring to enhance resilience and cover. Final area to be reviewed and developed is the Exchequer and Systems Manager role and her team, although resilience is already in place for a number of tasks.</b>	<b>GREEN</b> 	16/03/2018	Deputy Head of Finance

A Capital Investment Strategy audit was undertaken during Q2 and reported to Audit and Governance on 1<sup>st</sup> November. There were no actions from this audit.

A facilities audit was also undertaken and the final report for this audit will be presented to Audit and Governance in December.

## Audit Recommendations Closed during Q2

Ref:	Audit title	Audit Action	Date by	Completion	Priority	Progress	Date of Audit Report	Allocated to
154	<b>Procurement Advisory Review</b>	Recommend that current controls are extended to cover post-award contract management. In particular, for business-critical contracts that are high in risk, value or complexity.	31/07/2018		n/a	Procurement Strategy and new Contract Framework approved by SLT August 2018. Online procurement and contract management training course being rolled out to staff	07/12/2017	Procurement Manager
155	<b>Procurement Advisory Review</b>	Recommend that RBFRS considers extending the procurement training to cover contract management and contract deployment. This is vital in ensuring that any value captured up to the state of award can be maintained thereafter.	31/07/2018		n/a	Online training tool signed off and being rolled out across the service to up to 200 staff	07/12/2017	Procurement Manager
163	<b>Timesheets and Timekeeping</b>	Managers will be issued guidance and reminded of their responsibility to regularly review timesheets			Low	Weekly email to managers has been developed and Cascade article to be issued	01/03/2018	HHR & LD
164	<b>Timesheets and Timekeeping</b>	RBFA will investigate the possibility of implementing refresher Firewatch manager training for non-uniformed managers, to ensure wider awareness of efficient methods for reviewing time.	01/09/2018		medium	Drop in sessions arranged and included as part of induction for new staff	01/03/2018	HHR & LD

# Strategic Performance Report Q2 2018/19

## Quadrant Four - Risk

168	<b>Timesheets and Timekeeping</b>	Once the self-serve module is implemented: It will be mandated as the official method for inputting holiday requests. The new process will be clearly communicated.	31/01/2019		low	Interim arrangements now in place with standardised authorisation process for all Green book annual leave requests.	01/03/2018	HHR & LD
169	<b>Key Financial Controls</b>	RBFRS will ensure that all journals are prepared and approved in line with the delegation of authority	01/09/2018		Low	New method for approval was implemented in October 2018.	16/03/2018	Deputy Head of Finance
171	<b>Key Financial Controls</b>	RBFRS will rename the accounts with 'suspense' in their names on the balance sheet so that they accurately reflect the purpose of the account. If there are any actual suspense accounts remaining then RBFRS will ensure that these are reviewed and cleared on a monthly basis.	01/09/2018		Low	Agreed changes were made in August 2018.	16/03/2018	Accounting Manager
172	<b>Key Financial Controls</b>	RBFRS are planning a P-to-P project for 2018 and will build this requirement (identifying a secure method for sign off), into the project (digital signature).	01/09/2018		Low	Sign off solution within system already implemented. P2P project is due out to Tender in Qtr 3, and this requirement has formed part of the spec.	16/03/2018	Deputy Head of Finance
175	<b>Key Financial Controls</b>	RBFRS will investigate how segregation of duties can be incorporated into the SAGE system to ensure that invoices and journals cannot be posted without authorisation from an independent and appropriate person. RBFRS will look to build this into SAGE during the P-to-P project scheduled for 2018.			Low	Sign off solution within system already implemented in October 2018. Will look to develop this further as part of the P-to-P project.	16/03/2018	Exchequer and systems manager

### Planned Audits

In Q3, scheduled audits include:

- Risk Management and Governance
- Fire Fighter Pension Administration (tbc)

In Q4, scheduled audits include:

- Fleet disposal
- Key Financial Controls/ VAT and APYE
- Payroll Provider follow-up
- Recruitment Practices
- GDPR Compliance



### 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 that will technically enable the implementation and ongoing delivery of the Strategic Commitments and Vision 2019. This is a high-level update for items agreed as part of the action plan and reflects the period July to September 2018.

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 – over 90% compliance achieved. 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.  ICT Audit action plan has identified a range of activities, which are currently in execution; expected completion for all outstanding actions is end of Q4. This effort will reduce any additional effort required to achieve Cyber Essential Certification. All but two audit actions have been completed – the outstanding actions concern ongoing software license management. These activities are now replanned to complete at the end of 2018.	R
ICT infrastructure is fit for purpose and supports a reliable, robust IT environment	TVFCS Vision infrastructure resilience improvement plan in place and scheduled with the supplier. Ongoing capacity and resilience augmentation continues.  New Mobile Data Management (MDM) solution implemented and all legacy Blackberry and other non-standard mobiles replaced for standard Samsung J5 phones. Opportunities to improve resilience and availability continue to be exploited, including increased firewall resilience for both RBFRS and TVFCS, and a change to the access methods for Firewatch and IBIS, both critical business systems for RBFRS.	G
Software and Hardware Asset management plans established	A software asset management solution for ICT resources has been implemented and is operational. RBFRS Device strategy is in development and work is underway to leverage existing asset management solutions across other RBFRS services (facilities, transport). Work continues in enhancing our utilisation of existing asset management platforms to automate hardware and software asset lifecycles as far as possible, and recycle these assets for use elsewhere within RBFRS where appropriate, maximizing useful life and value from these assets. Ongoing efforts are being made to identify, analyse and rectify resilience issues in key systems, notably Vision within TVFCS. Resilience and functionality upgrades have been scheduled for later in the year. The ESN focused upgrade has been retained, as this implements several important bug fixes and feature improvements that have been on hold pending ESMCP schedule publication. A live BCM simulation test including decant to secondary control in Kidlington was postponed due to system issues during Q1 but is now rescheduled for Q3.	G

# Strategic Performance Report Q2 2018/19

## Appendices

Task	Progress	RAG
Cross training and up skilling of the ICT team	Our new starters have integrated well and are adding value to the team, to the extent that they are now shadowing existing duty communications officers for out of hours on call work. This will allow flexibility in the duty rota and bring additional strength in depth to this critical function. External network consultant contract has been renewed on a reduced hours basis, as internal skills continue to build in this technical area. One member of the team will depart in early Q1 18/19, which we plan to recruit a comms/electronics specialist into to assist with the non-ICT technical support elements of the organisation's remit. Advanced discussions are underway to secure an ICT apprentice to start during the 18/19 financial year. A set of budget bids created to alleviate resourcing pinch points in the organisation and to reduce overall reliance of fixed term or temporary contract positions further.	G
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. VFire roll out across the remaining stations is underway and being carried out in conjunction with other station visits to minimize resource requirements. The SLA & Catalogue are 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. The rollout of vFire to remaining stations has been completed, and ongoing refinement of our vFire portal have brought improvements in request and ticket differentiation and visibility, and improvements to the processes and workflow associated with Joiners, Movers and leavers have been implemented. A software update will allow ICT to significantly simplify the look and feel of Vfire to make it even more user friendly, based on feedback from all sections of the user community.	G
ICT work plan of BAU activities and prioritised development implemented	Annual work plan agreed and currently on schedule. The 2018/19 service plan has been compiled and published.	G
Applications portfolio (a list of all our systems) will be realigned to remove unnecessary applications	Software asset management capability has identified several opportunities for retirement of redundant, underutilised or duplicated applications. The process of decommissioning will continue for a number of months. Windows 10 and Office 2016 rollout is over 50% completed – this rollout is significantly simplifying the number of different installation types and configurations to a single standard per hardware platform. Windows 10 and Office 2016 rollouts are now completed with a very few exceptions where specialised software application require legacy system architecture. These applications are being examined for replacements in order to facilitate the eradication of the legacy environment. Implementation of Software license automation capability will allow us to maintain the minimum necessary license count and identify dormant software systems for decommissioning projects. Implementation is expected by end of year 2018.	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. Work to create a strategy to support flexible working has been included in the 2018/19 service plan.	

# Strategic Performance Report Q2 2018/19

## Appendices

Task	Progress	RAG
ITIL best practice standards in place embedded across whole of ICT	<p>The change and configuration management process is now embedded and functioning as expected. Bi-weekly standard change implementation windows have been established and all changes to systems, hardware or software are managed through a standard process.</p> <p>Problem Management process pilots have been carried out with some success - in one case successfully eradicating an issue manifesting between two third-party systems after a number of previous outages.</p> <p>Problem and change/configuration management processes are now fully embedded within ICT, which has allowed several opportunities to identify and eradicate repeat instances of incidents, resulting in increased efficiency and less drain on support resources. There have been zero instances of issues caused by ICT infrastructure changes since implementing the new change management processes.</p> <p>Organisational development options to further align with the ITIL framework are under active consideration and will be developed further during Q3</p>	G
Timelines for re-tendering, aligned to joint and shared tender opportunities	<p>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. RBFRS has partnered with Buckinghamshire and Milton Keynes FRS and Oxfordshire FRS in a novel paging application that has the potential for enhanced mobilisation of retained crews in the future. Opportunities to explore joint working and joint procurement activities with not only our Thames Valley Partners but also other national FRS' are being explored via the NFCC ICT manager's group.</p>	G
A corporate content management solution is in place	<p>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 continues to be slow. Testing continues with mixed results. Ongoing effort is being applied to bring this to closure. Discussions to determine the future contract and technical management have been conducted internally and further discussions with the vendor have been scheduled for Q3</p>	R

### Appendix B: Update on Progress of the Fleet Strategy

**Steve Foye, DCFO.** 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 the action plan and reflects the period July to September 2018.

Task	Progress	RAG
Fleet and Engineering Management structure designed to meet future needs Fleet Strategy and principles agreed and Partnership with HFRS implemented	The Partnership is in the final stages of its current lifecycle. Given the success of the partnership, our intention is to recommend its continuation through renewal of the existing agreement. This extension for the forthcoming 2019-2024 term is in draft form and, subject to SLT and monitoring officer agreement, will be presented to the Management Committee for approval on 3 <sup>rd</sup> December.  Alongside this, we are looking at the roles in operation as part of the partnership to ensure they fully meet our needs going forward and to ensure all posts are filled.	G
Agree 4 year Main Pumping Appliance renewal plan - Commence Procurement exercise with TVFRS's	Following on from the delivery of three new fire appliances during July, the appliances have received good feedback in terms of their design, layout and stowage capabilities. There has however been some technical challenges that we are in the process of trying to overcome with regards to faults on the control units. An initial firmware update by the manufacturers seemed to have rectified this however, subsequent faults on two of the appliances have occurred. We are working with the manufacturers Emergency One to establish the root cause of the faults and get these rectified as soon as possible. The old appliances that have been replaced will be kept as part of our reserve capability in the medium term. Ultimately, we will reduce the reserve fleet but this will be after 2021.  The next two new appliances are planned for 2019/20 with a further 2 the following year. We are considering the potential for increasing that number but will do this in consideration of our longer term Strategic Asset Investment Framework, availability of funding and with a mind to not adversely impacting our appliance replacement cycle.  We will start work this year on our procurement approach for appliance provision for 2021 onwards. We will continue with the principle of doing this in collaboration with our partners in Oxfordshire and Buckinghamshire Fire and Rescue Services.	G
Review Equipment notes and technical information and create appropriate reference database	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. Work is on-going, reducing and scanning documents to the electronic folders.	G

# Strategic Performance Report Q2 2018/19

## Appendices

Task	Progress	RAG
<p>Fleet Investment plan is created to align to medium term financial plan -</p> <p>Fleet and Equipment Asset Management plans established</p>	<p>Following on from the revised SAIF, which was approved by the Fire Authority on the 31 July 2018 and in conjunction with the development of a 25-year replacement schedule for all fleet assets has laid the foundation to allow better programming of replacements and budget management. Our fleet assets are to go under a detailed review to look at age profile, utilisation and costs to further inform our replacement and budget decision-making – this work will be on-going during Q3&amp;4.</p> <p>Asset management is in the process of being reviewed to improve effectiveness and governance of all assets. This work will continue through Q3&amp;4 as we look to create a sustainable and robust process that serves the organisation and utilises synergies where possible.</p>	G
<p>Agree replacement programme for Special Appliances</p>	<p>The tender and procurement process for the ALP purchase has been completed and the outcome is that Angloco has been selected as the manufacturer. We now have detailed design drawings and are in the process of finalising the specification and details for the vehicle.</p> <p>We are currently looking at the potential replacement of other special appliances including the Operational Support Unit. The intention is to initiate a project to enable us to look specifically around the replacement of these specials appliances with a view to maximising the investment laid out in the SAIF. This work will be on-going through Q3&amp;4.</p>	G
<p>Determine multi-use vehicles requirements, available to provide off road access, flexible and effective back-up vehicles</p>	<p>Work undertaken in 2017/18 and at the start of 2018/19 has already led to underutilised vehicles being disposed of or reallocated. Where some progress has been made in acquiring some new vehicles and interim solutions are in place such as Maidenhead, there is still further work that needs to be undertaken to establish a more detailed long-term fleet replacement strategy specifically around pool and 4x4 vehicles.</p> <p>As mentioned above, this work will be on-going during Q3&amp;4 and developed in-line with both the SAIF and IRMP to try to create a sustainable and effective model for the future.</p>	A



### Appendix C: Update on Progress of the Peer Review Action Plan

#### Doug Buchanan, Group Manager, Risk and Performance

In February 2017, RBFRS welcomed a Peer Challenge team into the organisation to offer an external assessment of the Service. This Peer Review action plan is intended to address areas of development identified through that process to support effective delivery of the Strategic Commitments and Vision 2019. This is a high-level update for progress against agreed actions and reflects the period July to September 2018.

Task	Progress	RAG
Develop and publish a member/officer protocol	Completed October 2017.	
Ensure effective communication with staff, including SLT visits, staff forums, Cascade and The Shout	CLOSED - Ongoing engagement and communication with all staff groups remains a focus for the Service, particularly during a changing environment. The observations and recommendations of the Peer team have been absorbed into business as usual processes, which will be reviewed where appropriate.	
Conduct a review of the NVQ systems and assessment of competence and implement findings	CLOSED – Project in train – progress monitored through Programme Board. RBFRS officers recognise that our current system for assessing competence should be subject to review. PID to review the route to competence will be presented to Programme Board July 2018.	
Conduct a review of the addressing and recording of operational competence in collaboration with TV partners	CLOSED – Project in train – progress monitored through Programme Board The TRI system utilised to assess and record maintenance of operational competence requires review. PID to conduct collaborative review of MOC will be presented to Programme Board July 2018	
Continue to publish the Pay Policy Statement on the website	CLOSED - Business as usual.	
Implement the middle managers development programme to support effective leadership	CLOSED – Programme implemented. Middle manager development programme now virtually complete and feedback has been very positive. It is expected this programme will be completed during Q2.	
Introduce a supervisory level staff development programme across the organisation	CLOSED: draft specification for a supervisory programme produced and a focus group of supervisory managers will help to refine, with a view to creating a pilot for Q4	
Review of the promotion process and consideration of accelerated promotion opportunities	CLOSED – promotions processed reviewed. RBFRS have reviewed the promotion process with an intent to ensure we give the greatest opportunity for the best candidates. We are currently developing a service delivery model that will require further review.	
Monitor the NFCC work on accelerated promotion	CLOSED - Business as usual within organisational/people development.	

# Strategic Performance Report Q2 2018/19

## Appendices

Task	Progress	RAG
Establish an Equality and Diversity Forum and create an action plan, with a focus on culture, and subject to public consultation	CLOSED – EDI Forum established and regularly meeting. Equality Objectives and action plan developed. This work has progressed well through Q1.	
Establish task and finish groups to examine particular strands of EDI	CLOSED – operates to meet aspects of action plan. This work has progressed well through Q1.	
Recruitment project to review how RBFRS can attract individuals from underrepresented groups	CLOSED - A recruitment project has been developed to identify opportunities to effectively engage and target under-represented groups.	
Roll out EDI training across the service	CLOSED - Training provider identified and EDI courses being delivered across the Service.	
Manage RDS recruitment, retention and training through the RDS project Board	CLOSED – Project in train – progress monitored through Programme Board. - RDS project board progressing various work packages with successful results already evident. Intention to absorb this work into business as usual in 2018.	

### Appendix D: Information Governance Report (July 2018 to September 2018)

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

<b>Information Requests...</b>	<b>July 2018</b>	<b>Aug 2018</b>	<b>Sept 2018</b>	<b>Total</b>
New Information Requests Received	9	12	10	<b>31</b>
Total Information Requests Actioned	25	18	17	<b>60</b>
IGT - Hours Spent on Information Requests	48 ¼	30	44 ½	<b>122 ¾</b>
Others - Hours Spent on Information Requests	19	12	23	<b>53</b>
Timeframes not met (figures relate to request due date)	2	1	2	<b>5</b>
Internal Reviews (figures relate to request due date)	0	0	0	<b>0</b>

### Incident Reports

<b>Incident Reports...</b>	<b>July 2018</b>	<b>Aug 2018</b>	<b>Sept 2018</b>	<b>Total</b>
New IRS/FI requests received this month	31	26	13	<b>70</b>
IRS/FI requests confirmed (includes not charged for)	7	4	4	<b>15</b>
Total IRS/FI requests actioned (incl. still in progress)	39	41	19	<b>99</b>
Income from requests Figure in brackets - total ££ so far this year	£918.00 (£1,836.00)	£306.00 (£2,142.00)	£102.00 (£2,240.00)	£1,326.00 (£2,240.00)

Incident Recording System (IRS) Reports are charged at £102.00 (2018/19).

Fire Investigation (FI) Reports (where produced) are charged at £354.00 (2018/19).

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



### Appendix E: Service Provision Measure Definitions

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

ID	Measure	Definition
7	Number of S&W's delivered to those who are at heightened risk of having an accidental dwelling fire and being injured as a result	Research has shown that certain groups of people are at heightened risk of having an accidental dwelling fire and being injured as a result. S&Ws will be targeted towards these groups.
8	% of priority home safety referrals, where there has been a threat or incidence of arson, completed within 48 hours	When RBFRS are made aware of the threat or incidence of arson against an individual(s) a home safety visit is conducted within 48-hours.
9	% of priority category 1 home safety referrals, where there is a significant heightened risk of an individual having a fire in their property, completed within 48 hours	When RBFRS are made aware of a home or an individual who is at significantly high risk of having a fire, a home safety visit is conducted within 48-hours.
<b>Protection</b>		
10	Total Number of Full Fire Safety Audits carried out	This is the total number of full fire safety audits carried out in premises in Berkshire. This is calculated once the service has been closed by RBFRS and only includes the initial full fire safety audit. A Fire Safety Audit is carried out to enforce the Regulatory Reform Order (RRO) 2005, which applies to virtually all non-domestic premises and covers nearly every type of building, structure and open space.
11	% of audits where the results were satisfactory	This is the number of closed fire safety audits carried out in commercial premises, where the result was satisfactory and no further action or follow-up was required.
12	% of audits requiring informal activity	This is the number 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
13	% of audits requiring formal activity	This is the number of closed fire safety audits carried out which result in formal activity. This includes action plans, voluntary restrictions or premises requiring an Enforcement Notice, Prohibition Notice, Alterations Notice, or Prosecution Notice.

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

ID	Measure	Definition
20	% of respondents satisfied with the services with regards to Fire Safety Audits	Results are from a customer feedback questionnaire which is sent to business owners/ managers who have had a full fire safety audit, asking about their satisfaction and experience with the service they received from RBFRS.

## Appendix F: Corporate Health Measure Definitions

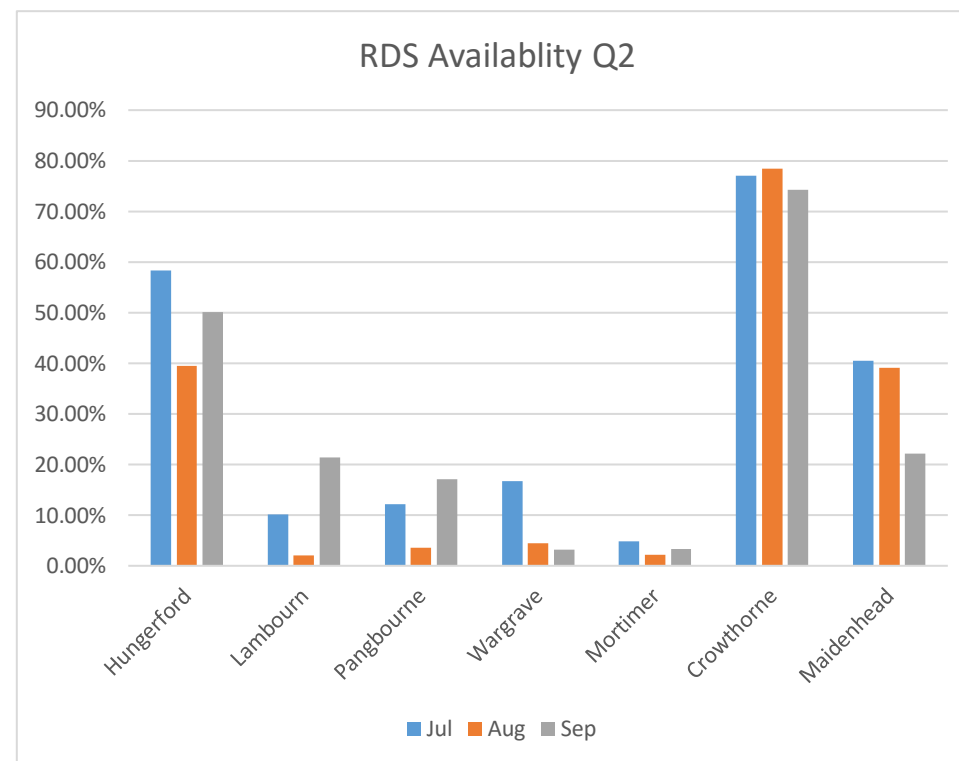
ID	Measure	Definition
<b>Human Resources and Learning &amp; Development</b>		
21	% of working time lost to sickness across all staff groups	This measure looks at sickness across the whole organisation and the percentage of time lost based on the number of working hours available to the organisation.
22	% 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.
23	% 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.
24	% of eligible operational staff in qualification	This measure examines performance in the key qualifications, outlined in the 9 core areas of the Fire Professional Framework, required by staff to maintain effective service delivery .
<b>Health and Safety</b>		

25	All injury accidents including RIDDOR (RIDDOR & Total)	RIDDOR( <i>Reporting of Injuries Diseases and Dangerous Occurrences Regulations</i> ) are more serious injury accidents and the total number of accidents.
<b>Finance and Procurement</b>		
26	% of spend subject to competition	This measure is looking at all items of expenditure over £10k as RBFA must obtain quotes or tenders for all these purchases. This excludes statutory payments such as local authority charges or HMRC.
27	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)
<b>Freedom of Information</b>		
28	Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act and Environmental Information Regulations).	Number of decision notices issued by the ICO that uphold any part of a complaint that we have breached the relevant legislation.
29	Number of Information Commissioner assessments finding that the Service has breached Data Protection Legislation (Data Protection Act and forthcoming legislation)	Number of occasions where the Information Commissioner has informed RBFRS that we have breached the legislation.

### Appendix G: RDS Establishment and Availability

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

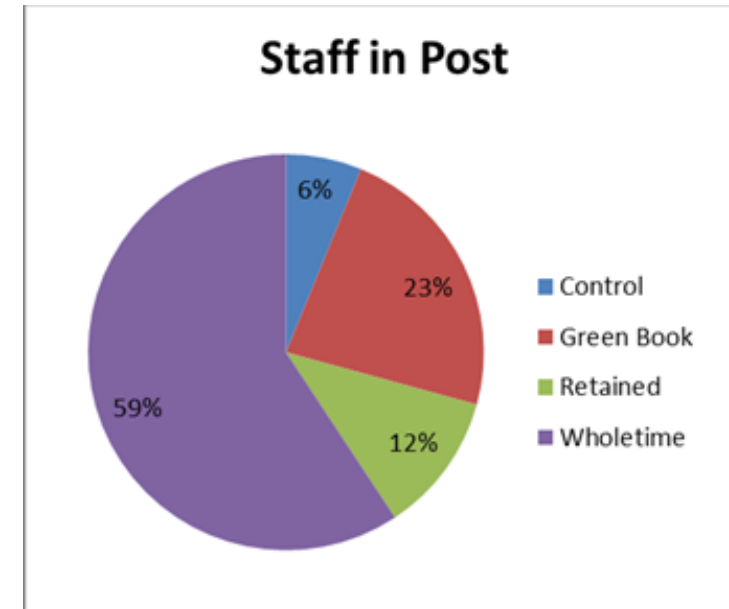
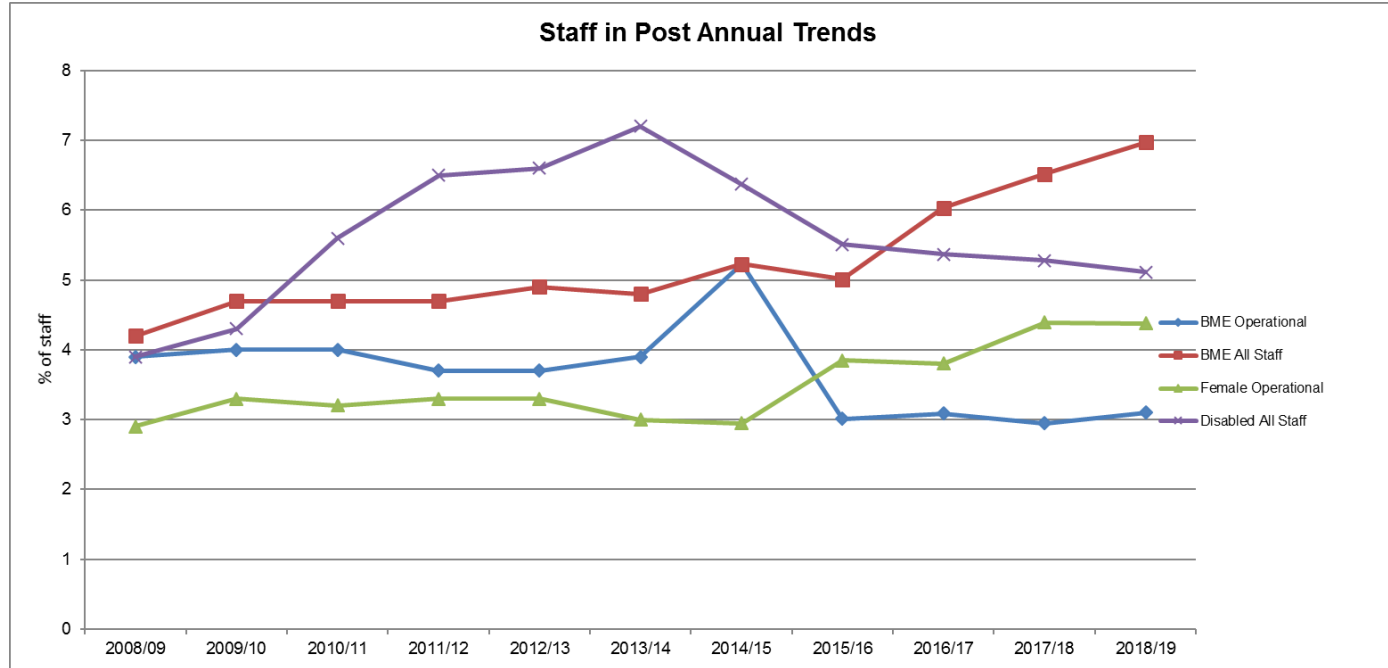
	Staff in Post (SIP)	FTE	Establishment (Est)	SIP v Est	FTE v Est
05 Hungerford	10	4.65	13	76.92%	35.74%
06 Lambourn	9	3.60	13	69.23%	27.67%
07 Pangbourne	6	3.34	13	46.15%	25.69%
09 Wargrave	15	8.01	13	115.38%	61.61%
11 Mortimer	6	3.49	13	46.15%	26.84%
15 Crowthorne	14	7.36	13	107.69%	56.62%
19 Retained	14	5.44	13	107.69%	41.81%
<b>Total</b>	<b>74</b>	<b>35.88</b>	<b>91</b>	<b>81.32%</b>	<b>39.42%</b>



### Appendix H: HR Supporting Charts

(Source: Data calculated and supplied by HR)

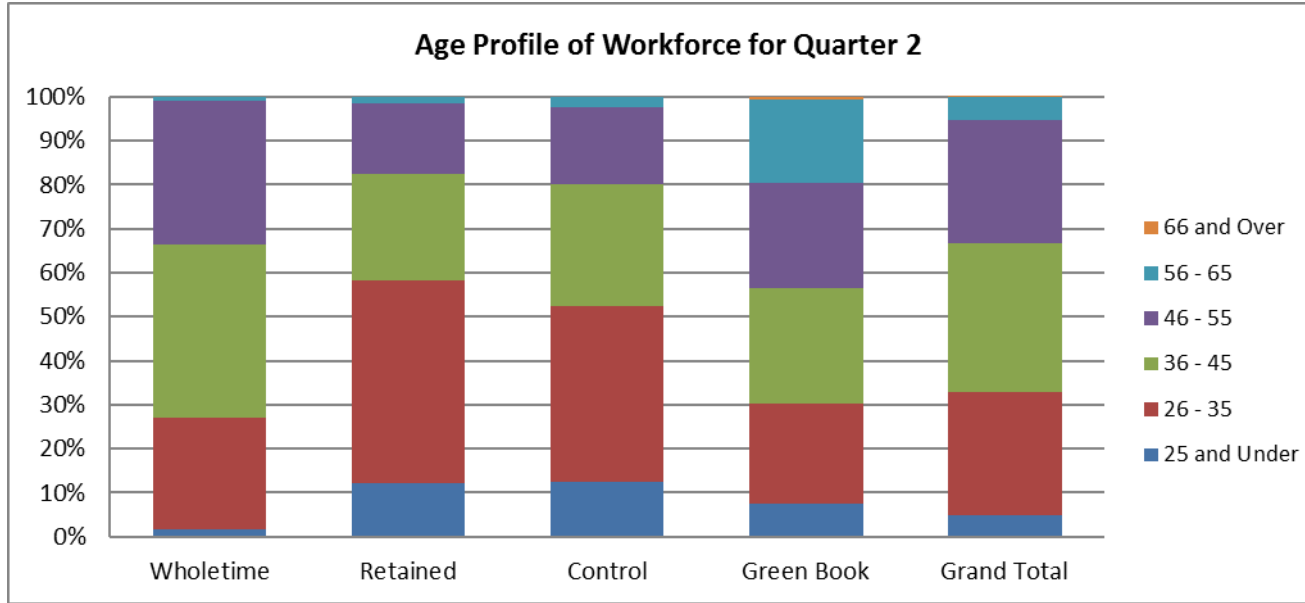
#### Staff in Post



#### Quarter 2 – 2018/19

Percentage of BME operational	3.10%
Percentage of BME all Staff	6.97%
Percentage of female Firefighters	4.38%
Percentage of Disabled staff	5.11%

### Staff Age Profile

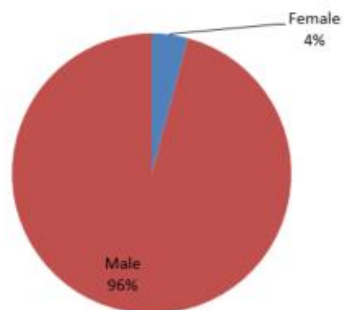


Age Group	Wholetime	Retained	Control	Green Book	Grand Total
25 and Under	6	9	5	11	31
26 - 35	97	34	16	34	181
36 - 45	151	18	11	39	219
46 - 55	125	12	7	36	180
56 - 65	4	1	1	28	34
66 and Over	0	0	0	1	1
<b>Grand Total</b>	<b>383</b>	<b>74</b>	<b>40</b>	<b>149</b>	<b>646</b>

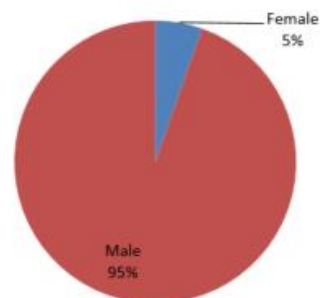


### Gender of Staff

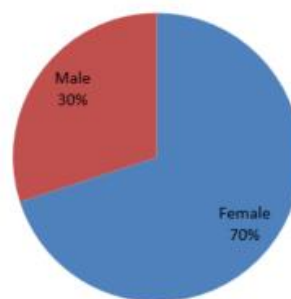
Gender Profile - Wholetime



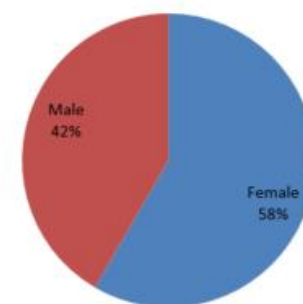
Gender Profile - Retained



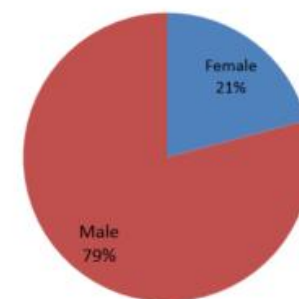
Gender Profile - Control



Gender Profile - Green Book

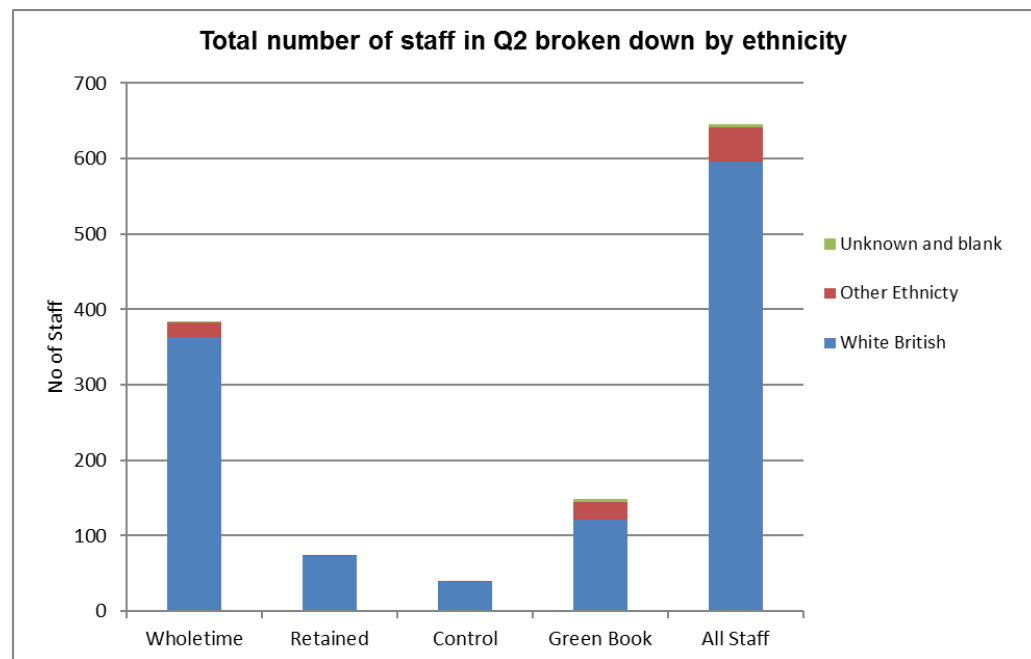


Gender Profile - All Staff



Gender	Wholetime	Retained	Control	Green Book	All Staff
Female	16	4	28	87	135
Male	367	70	12	62	511
<b>Total</b>	<b>383</b>	<b>74</b>	<b>40</b>	<b>149</b>	<b>646</b>

### Ethnicity of Staff

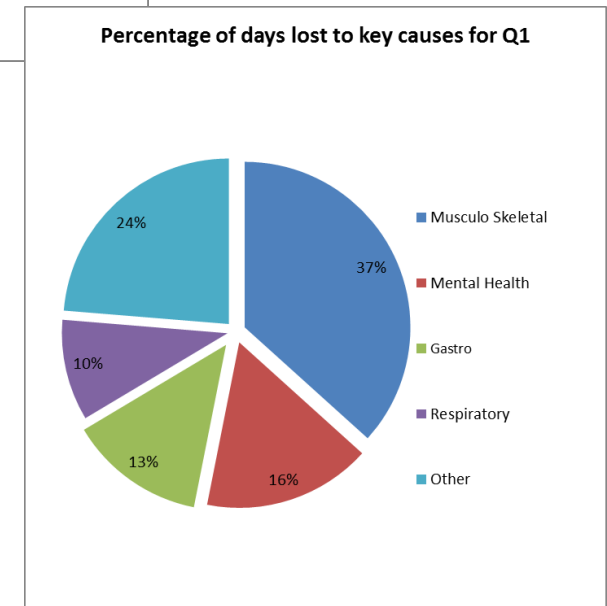
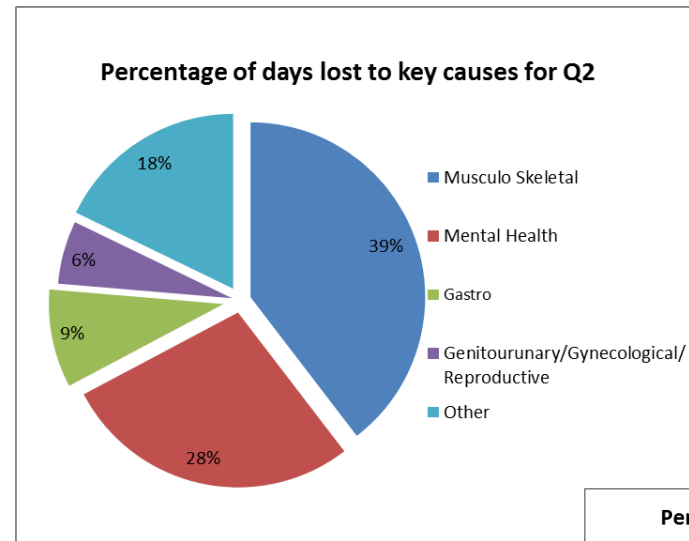
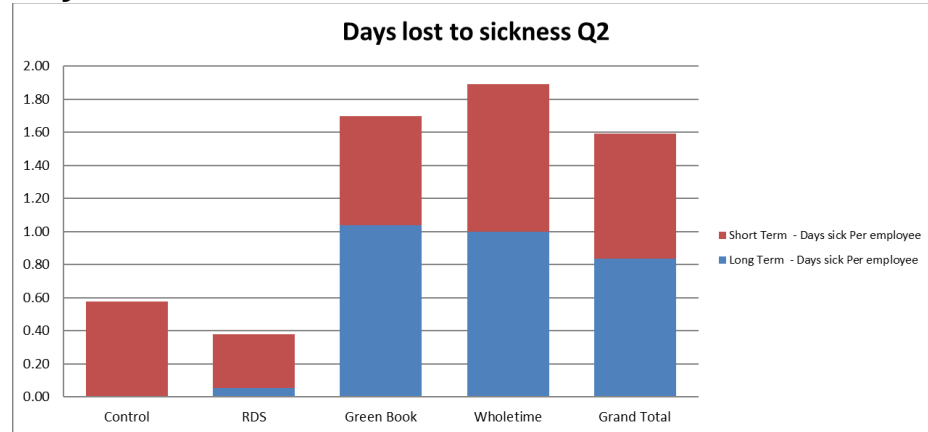


Ethnicity	Grand Total
Asian or British Asian: Indian	5
Asian or British Asian: Other	2
Black or Black British African	6
Black or Black British Caribbean	4
Black or Black British other	1
Chinese	2
Mixed White and Asian	3
Mixed White and Black Caribbean	2
Other	1
Other Mixed	4
Unknown	5
White British	596
White Irish	4
White Other	11
<b>Grand Total</b>	<b>646</b>

# Strategic Performance Report Q2 2018/19

## Appendices

### Days Lost to Sickness

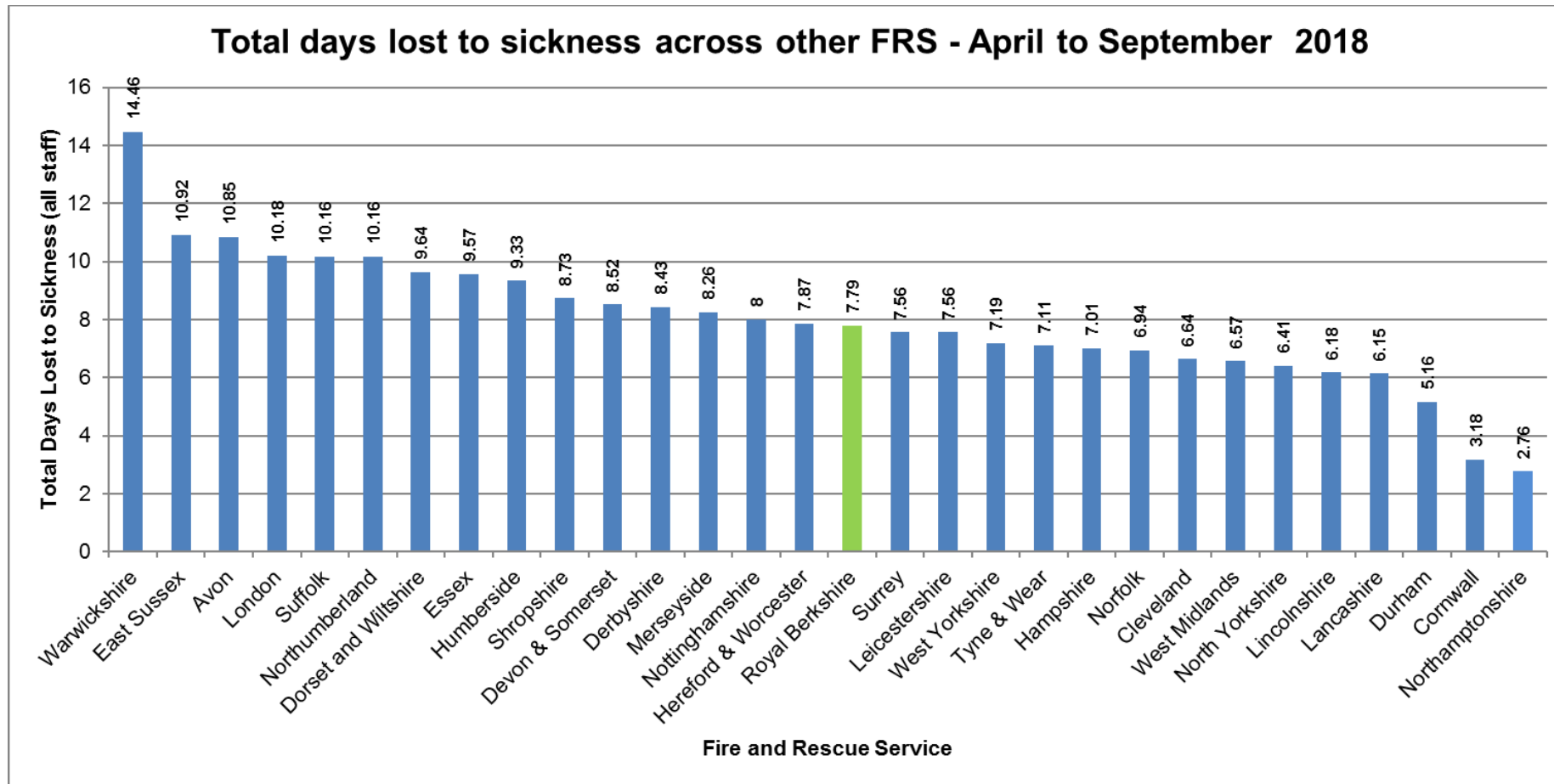


### Q1 18/19

Cause	Days Lost	Occurrences
Musculo Skeletal	353	47
Mental Health	158	11
Gastro	128	41
Respiratory	95	19
Other	228	47

### Q2 18/19

Cause	Days Lost	Occurrences
Musculo Skeletal	475	49
Mental Health	332	18
Gastro	109	38
Genitourinary/Gynaecological/Reproductive	70	4
Other	214	52



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

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

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

[performance@rbfrs.co.uk](mailto:performance@rbfrs.co.uk)