

Strategic Performance Report



Quarter 3 2017/18



We will ensure appropriate fire safety standards in buildings



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



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



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



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



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

**ROYAL BERKSHIRE
FIRE AND RESCUE SERVICE**

Enabling people to lead safe and fulfilling lives



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This version of the report was updated on 12/03/2018

Introduction

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









This report contains performance across four Quadrants:

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

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

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

Key to Icons and Colours

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

Key Highlights

Context - requirements

Key Requirement Data - October 2017 – December 2017

	Quarter 3 2017/18	Year to date 2016/17 (to end of Q3)	Quarter 3 last year (2016/17)	Year to date last year – 2016/17 (to end of Q3)
Emergency incidents responded to	1636	5419	1827	5858
Primary Fires	220	729	258	724
Secondary Fires	174	784	140	680
Special Services (RTC)	100	312	133	368
Special Services (other)	244	714	201	764

The number of emergency incidents in Berkshire has fallen compared to the same period in the previous year. Primary fires and RTCs have also seen a fall, whereas numbers of secondary fires and other special services have risen.

Three audits have been carried out during Q3- Cyber Security, Risk Management and Governance and Procurement Advisory Review. Fourteen actions from these remain open and are being worked on within timescales. Eleven actions have been completed and closed.

Successes

This quarter **we have met our targets or are improving performance in 23 out of 36 corporate measures (63%)**.

Performance has improved compared to last quarter in these areas;

- **Increased numbers of Home Fire Safety Checks** delivered to those at heightened risk of dying. This measure was showing red last quarter and is green for the current quarter.
- Detailed analysis of turnout time failures has **improved performance on the response standard**. This is still amber but shows a steady quarter on quarter improvement over the year so far.
- The **percentage of eligible staff in qualification is at its highest level (99%) this year**.

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Key Highlights

Additional areas of success:

- We have delivered an **increase in the RDS establishment** leading to greater availability.
- **89% of spend is now subject to competition** (against a target of 70%).
- The first cohort of individuals have commenced the leadership development programme, with the remainder due to start in March 2018. This and the agreement of a draft people strategy has **reduced the risk score of the Capacity, Capability and Resilience corporate risk**.
- Additional resources have been put in place to support the developing project resulting from the **Grenfell tower incident and reduce the associated organisational risk**.

Concerns and plans for improvement

Performance against our targets is declining in some areas this quarter, or is below target and not improving.

- The number of Fire Safety Audits closed continues to be lower than target. RBFPS has been focusing more attention on higher risk premises and this translates into a larger volume of work per completed Audit. Capacity has also been an issue and **the number of Fire Safety Inspecting Officers will increase in Q4**. We will ensure successful training of these new members of staff.
- This quarter has seen a drop in performance in the time taken for TVFCS to mobilise (44% within 60 seconds compared with a target of 60%). There has been a 20% turnover of staff in 2017. New staff have been recruited and a dip in performance is normal. **Further embedding of training should improve confidence and speed in Q4**.
- The percentage of working time lost to sickness this quarter, at 4.9%, is higher than our 3% target. Long term sickness has reduced but this has been counterbalanced by an increase in short term absence. **Work underway to tackle this includes development of a mental health strategy and action plan, alongside continued work to support rehabilitation**.

Other areas where progress has not been as anticipated:

- The ESMCP project has an amber status as it is awaiting revised Home Office plans for implementation. The project is preparing for a Summer 2018 transition date but recent updates suggest this may be later.
- The Whitley Wood project is currently on hold to enable further in-depth discussions to take place to revisit the scope. This has led to the project moving to a red status.
- The Capital Investment Strategy risk has increased this quarter. There have been delays in obtaining planning permission for Theale, which has delayed the project by 8-12 weeks.

Emerging issues and risks and focus for next quarter

- Inspection – Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFS) have confirmed that RBFPS will be inspected as part of the second tranche of FRS, in autumn/winter 2018. There is significant preparation work to do, with the data requirement due in April and the first visit of our Service Liaison Lead at the end of March.



Supporting Performance Information

Quadrant One: Service Provision

(Data accurate as of 05/01/2018)

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Dwelling Fire Deaths and Safeguarding											
1	Number of Fire Deaths in Accidental Dwelling fires*	0	2	0	0↔		2	0	0	0	
		(Source: Scorecard Corporate Measures (P&P) / IRS9.06a)									
		There were no fire deaths in accidental dwelling fires for Q3. The primary focus of the Service’s prevention activity (see measures 4 to 7) is to proactively contribute to this level of performance.									
2	Number of Fire Casualties in Accidental Dwelling Fires*	29 MAX	7	1	1↔		9	22 MAX	7	19	↑
		Source: Scorecard Corporate Measures (P&P) / IRS9.06a)									
		There are ten fewer casualties compared to the previous year and represents a beneficial outcome for communities in Royal Berkshire so far this performance year. This is also a key area of focus for Prevention activity and links to the work described under measures 4 to 7									
3	% of safeguarding referrals made to Local Authorities within 24 hours*	100%	100%	100%	100%↔		100%	100%	N/A	N/A	N/A
		(Source: Manual calculation by Safeguarding Coordinator)									
		This is a new Corporate Measure for 2017/18, which records performance in the discharge of our statutory responsibility to report safeguarding issues involving children and vulnerable adults. We have generated 43 safeguarding referrals in Q3 managing them all within the required timeframe. We have a statutory duty to report safeguarding concerns to the appropriate authority where our staff encounter situations, environments or persons at potential risk. RBFRS recognises and acknowledges the importance of the duty placed on our Service and staff. In recognition of the importance of this duty, we have introduced this time bound measure (The timeframe is not required or directed through legislation or guidance and may not be present within other organisations).									

*See appendix D for service provision corporate measure definitions

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Quadrant One: Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Prevention											
4	Risk of Death	7000	1,443	1,006	1,794 ↑		4,243	5250			
5	Risk of Injury	2500	7,85	830	711		2,326	1875			
	TOTAL	9500	2,228	1,836	2,505 ↑		6,569	7125			
	Number of Home Fire Safety Checks (HFSC) delivered to those who are at heightened risk of dying/being injured in the event of an accidental dwelling fire*	<p>(Source: SQL Home > Stats > Scorecard > Copy of SC_IRS_Audit_Summary > CM04... and CM05...)</p> <p>Please note change in performance in previous quarters due to data entry lag. Figures are accurate as of 31/01/2018</p> <p>There has been an upward trend and improving picture in the number of HFSC's carried out for those individuals who are at heightened risk of dying, with almost 800 more in this category being completed during Q3 compared to Q2. This has been achieved by hubs reviewing their monthly targets to focus on achieving the annual target, and focusing activities and supporting processes to allow for more effective provision of this service. Supporting activity includes time spent arranging visits, delivering leaflets in risk areas, working with residents in those areas to promote the understanding and importance of the service we provide and is in addition to the time spent delivering the individual HFSC visits. This will actively continue into Q4 and beyond. Hubs will continue working with local partners and utilising data sources to identify those most vulnerable to fire, and the recruitment of Safe and Well Technicians (to meet establishment). To ensure we can continue to contribute to this measure RBFRS teams are working to further refine the risk profiles in their areas and are proactively working to achieve the targets set out in the IRMP.</p> <p>Despite this improving performance, the final year-end target for HFSCs for those at risk of dying is unlikely to be achieved.</p>									
6	% of dwelling fires RBFRS attends where there was either no working smoke alarm installed, or a smoke alarm did not operate despite being present. This is measured against the total number of dwelling fires. *	41% MAX	37.4%	35.7%	31% ↑		34.7%	41% MAX			
		<p>(Source: SQL Home > Stats > Scorecard > Copy of SC_IRS_Audit_Summary > CM06)</p> <p>Please note change in performance in previous quarters due to a review of data systems and an audit of data calculations.</p> <p>Of the 323 dwelling fires in Berkshire, so far in this performance year there were 112 incidents where there was no working smoke alarm. In 40 of these incidents there was no smoke alarm installed. (data accurate as of 17/01/18).</p> <p>There has been a steady improvement in performance for this measure throughout the year. There are a number of ongoing activities that RBFRS undertakes to support achieving this measure. These include: Home Fire Safety Checks, participation in the national 'Test it Tuesday' campaign, ongoing education in schools and community groups</p> <p>Protection activity is aligned to our risk based inspection programme and Fire Safety Inspecting Officers are seeking out unlicensed HMOs, where fire safety systems may be less likely to be well maintained, and action is taken to remedy this.</p> <p>These activities help to ensure more people own and have a working smoke alarm in their premises, which in turn contribute to achieving measures 1 and 2.</p>									

*See appendix D for service provision corporate measure definitions

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Quadrant One: Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
7	% of category 1 HFSC referrals, where there has been a threat or incidence of arson, completed within three days*	100%	83%	80%	100% ↑		79%	100%	66.6%	22%	↑
<p>(Source: SQL Home > Stats > Corporate Measures > SC_HFSC_CorporateMeasures_Audit)</p> <p>Please note change in the previous quarters performance data following a detailed manual analysis/ audit of data.</p> <p>During Q3 there were 3 referrals from TVP for individuals who had been threatened with arson. All three were completed within 3 days. There have been 14 referrals by TVP this performance year (April to December). Two of these individuals (one in Q1 and one in Q2) did not receive a HFSC within 3 days as they had left the premises and were not available for an intervention to be conducted. One of these has since been completed as the occupier returned to the premises.</p>											
Protection											
8	Full Audits*	1400	250	241	208		699	1050	363	1249	
9	Audits & Follow Ups		Data not available	Data not available			Data not available				
	Total Number of Full Fire Safety Audits and follow-up visits carried out*	<p>(Source: FSR101 + FSR103 – Scorecard FSR Home Office Book. Data feeds for Audits and Follow-ups are still being developed to obtain accurate figures)</p> <p>Fire Safety Audits are only included in these totals when a service is closed and a premise is satisfactory (as per Home Office definitions). As the Fire Safety Inspecting Officers find more premises not complying with the Regulatory Reform (Fire Safety) Order 2005, the time taken to work with the premises will increase, and it will take longer for these to show in the number in this measure. It may mean we complete less overall audit numbers but that our efforts have the best effect on reducing risk to the public and firefighters. We are working on data behind measure nine to reflect the large volume of work being undertaken at present for these problem premises. This should be complete for Q4 reporting.</p> <p>Following the IRMP in April 2017 Fire Safety Inspecting Officers (FSIOs) are attempting to get to these higher risk premises they are encountering significant challenges. For example, one area of focus is unlicensed Houses of Multiple Occupation (HMOs). RBFRS works with local authorities in regards to HMO's but by the very nature that we are seeking unlicensed properties, there is no premise list to work from. This means an element of on the ground discovery and identification has to be undertaken. This work is time-consuming and once premises are identified, there is often further work to identify the property owner and gain entry to the property.</p> <p>We are currently exploring how we best reflect the additional complexity of our audit work through our data so the volume and range of activity being completed is clear against the overall number of audits completed.</p> <p>The impacts of the Grenfell Tower incident, and the services proactive actions in auditing and visiting high rise and potentially ACM clad premises, has been previously reported. The on-going resource needs for both our Grenfell work and our risk based inspection programme confirm a long-term need for effective skills and capacity in this area. Having already stopped service restructure changes that affected</p>									

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Quadrant One: Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		FSIO's in 2017 (in response to the Grenfell demand) we have now successfully recruited a number of new Fire Safety Inspecting Officers (FSIOs). This will support the service through a number of forecast retirements and match the fire authority's financial support for this work. We are fully committed to the long-term sustainability of skills and capability in this area. The majority of our new FSIOs will require training and there will be an associated lag before they reach full competence and realisation of their full capacity. We are supplementing our internal skills with specialist advice and we are exploring our long-term approach to fire engineering skills for the most complex buildings. A key area of work is now underway to refine our working practices, policies and systems to maximise capacity and support our teams in the Hubs in delivering local risk based activity underpinned by access to specialist knowledge where needed.									
10	Satisfactory*	50% max	64%	56.02%	62.5%		60.8%	50% max	78.5%	80.5%	↑
11	Informal Activity*	45% min	28%	31.12%	29.33%		29.47%	45% min	16.5%	16.7%	↑
12	Formal Activity*	5% min	1.20%	2.07%	0.96%		1.43%	5% min	0.83%	0.56%	↑
13	Success Rate*	95% min					(0 cases)	95% min	100%	100%	
	Outcomes of Full Fire Safety Audits (above)*	(Source: FSR 102 – Scorecard FSR Home Office Book)									
		Although the target percentages are not yet being met, there has been a significant improvement in performance compared to 2016/17, demonstrating that through the risk based inspection programme, higher risk problem premises are being targeted and appropriate action taken to rectify the issues. These figures, as in measure 8, are only included in these totals when a service is closed and a premise is satisfactory (as per Home Office definitions).									
		During Q3, there were 20 possible prosecution cases. 7 of these cases were resolved without going to court through either cautions (2) or advice letters (5). These premises will be monitored and if the property owner does not comply with the regulations then the cases will be fast tracked to court.									
		13 cases are currently being investigated and case analysis being conducted. 2 further cases, which are high profile, will likely be full prosecutions in the coming months.									
		The way in which all Protection activity is recorded and subsequently how the system provides the data for this measure is being reviewed to ensure that it accurately reflects how enforcement activity is delivered. As part of this a new database user guide is being produced and training to FSIO's on correct data entry aims to be delivered by 31/03/2018. The data team are also reviewing what is being measured in the new SQL reports.									

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Quadrant One: Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Response											
14	% of occasions where the first fire engine arrives at an emergency incident within 10 minutes, from time the emergency call was answered*	75.0%	72.40%	73.01%	74.39% ↑		73.2%	75.0%	73%	n/a	n/a
		(Source: Scorecard incident recording system-section 3. /IRS30e (based on the total of all emergency incidents responded to within 10 minutes, divided by the total of all emergency incidents responded to)).									
		There are three factors that influence the achievement of this measure – TVFCS call handling times, the time taken for fire crews to ‘turnout’ and the travel distance to the emergency incident. Factors within our control, call handling and crew ‘turnout time’, will continue to be monitored and any opportunities for improvement will be identified and actioned where appropriate. Travel time to emergency incidents continues to be the main factor for not achieving this target.									
		Since the formation of the Hubs in September 2017 a lead officer in each hub has been tasked with monitoring performance. They work together to identify areas for improvement through analysing turn out time failures. Since the formation of this working group new guidance has been issued to watch managers on reporting of turnout time failures, ensuring fire crews use the mobile data terminals to book in attendance at an incident, increasing the time the Ascot satellite pump remains on the station and questioning the use of Ascot as a standby pump at other stations. The roadworks in Wokingham town centre have had an impact on travel time and crews are actively seeking and planning alternative routes. Finally, the policy on arranging a standby pump is being reviewed by hubs and consideration is being given to reducing the time taken for a standby appliance to be mobilised. Hub level monitoring of performance will continue and lead officers will be working with partners and colleagues, such as TVFCS, to identify how this performance can be maintained and improved.									
15	Whole Time(shifts)	100.0%	100%	99.45%	97.8 %		99.1%	100.0%	100%	100%	
16	RDS (hours)	50.0%	35.6%	36.68%	40.37% ↑		37.60%	50.0%	40.1%	41.1%	↑
	% of shifts/ hours where there is adequate crewing on frontline fire engines (above)*	(Source: Scorecard Central Team (CT) Book – (CTT07a) based on shifts worked at planned appliance crewing for WT (56) and a manual check of FireWatch) Whole Time In quarter 3, the service achieved availability of 14 wholetime appliances on 98.37% of shifts against a target of 100%. There were four shifts where an appliance was unavailable for the whole shift. Optimum crewing (60 or more personnel) was achieved on around 50% of shifts with the remainder of the crewing being between optimum and minimum (minimum being 56 personnel) other than the four shifts identified. The following outlines the circumstances pertaining to the four times that appliances were not available during quarter 3: Sunday 15 Oct – Ascot’s appliance was unavailable due to short-term sickness of two personnel on the watch. Consequently, an additional junior officer was required for the day shifts of the 14 th and 15 th October. This need was meet from another station on the 14 th but not the									

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Quadrant One: Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance			
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD	
		<p>15th. The Bracknell appliance remained fully available with a crew of five all day, and the remaining two crew members were posted to Slough and Whitley Wood for the remainder of the shift. This instance has drawn out learning that resulted in additional guidance for managers.</p> <p>Sunday 24 December - Slough appliance17P2 was unavailable for the white watch night shift. This was a consequence of two occurrences of short notice unplanned urgent personal leave when crewing was already at minimum. This was with the oversight of the Service Duty Manager. As above, learning from this event will inform guidance for officers.</p> <p>Monday 25 Dec and Tuesday 26 Dec – Slough appliance 17P2 was unavailable for both Green watch day shifts. Crewing predictions in early December identified eight shifts over the Christmas period that could lead to appliance unavailability. Managerial actions reduced this to the two above occasions with all efforts to secure additional personnel exhausted. The Slough appliance was identified as having the least impact on fire cover given that the other Slough appliance, along with Windsor and Langley appliances were available.</p> <p>Taking account of the intended vacancy factors in this quarter, when operating with such a lean crewing model, this performance is good. Nonetheless, the intent and commitment of the service is to sustain 100% availability and every effort will be made to deliver this. The Operational Policy and Support team, in close liaison with the three operational Hubs, are proactively monitoring wholtime establishment so service delivery can actively manage operational availability. Their work includes:</p> <ul style="list-style-type: none">a. Monitoring crewing on a daily (Monday to Friday) basis at 0730hrs to identify predicted shortfalls across all watches.b. Monitoring shortfalls up to and beyond the 0900hr shift change and taking direct interventions when required.c. Identifying predicted weekend shortfalls and taking direct interventions to support the weekend Duty Officer cadre.d. Maintaining an issues log to identify patterns of concern across all stations and watches.e. Issuing additional guidance and prompts to Hub management if required.f. Further developing our systems and tools to enable managers in managing and monitoring establishment movement and appliance availability. <p>A range of recruitment and promotion processes have now been completed that will reduce current vacancy factors reducing pressure on appliance crewing.</p> <p>Retained Duty System</p> <p>Availability of RDS appliances continues to be a key area of focus with the RDS Project Board overseeing a number of initiatives focused on driving up recruitment and streamlining processes such as recruit training. The Q3 performance figures are encouraging and reflect the initial gains made in this area with a corresponding gradual increase in station establishment. In the last 12 months, a further 15 on call Firefighters have been recruited across all stations. Five Firefighters will be attending their initial training course in January. Due to the time it takes to</p>										

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Quadrant One: Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		become a fully competent fire fighter and be able to contribute to station availability i.e. to be BA qualified, we expect to see a more substantial increase in availability towards summer 2018. (see appendix F for RDS establishment and availability in Q3)									
		Station personnel are now actively taking the leading role in running regular recruitment days (2 per station per year) for their own stations.									
Customer Service											
17	Domestic Respondents	100%	100%	98.65%	100%		99.38%	100%	N/A	N/A	N/A
18	Commercial Respondents	95%	100%	100%	100%		100%	95%	N/A	N/A	N/A
19	Fire Safety Audit Respondents	90%	100%	100%	100%		100%	90%			
		(Source: Owned by Risk & Performance - manual calculation from results of postal surveys returned)									
	% of Questionnaire respondents satisfied with the overall service (above)*	During Q3, there were 37 responses to the customer feedback survey following a domestic dwelling fire. All respondents were satisfied with the response they received.									
		During Q3 there were 19 responses received following a fire in a commercial premise. All respondents were satisfied with the response they received.									
		1 response was received following a fire safety audit and all respondents were satisfied with the way in which the audit was conducted.									

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Service Provision - Service Measures

(Data accurate as of 5 January 2018)

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Response Service Measures											
1	Dwelling Fire		52.5%	52.44%	61.25%		55.4%				
2	Road Traffic Collision		53.8%	52.70%	46.27%		51.1%				
	% of occasions a second fire appliance attending arrives within 2 minutes of the first appliance to arrive.	(Source: Scorecard IRS Book Section 3. Unitary Attendance Measures IRS 3.0f and IRS 3.0g) This measure is very dependent on the geographical location of incidents and the travel distance for the supporting appliances. Work which has been carried out by the newly formed hubs to achieve the response standard (see service provision measure 14) for crew turnout time will have a direct impact on this measure and the arrival time of the second appliance									
3	5 seconds	92%	88.74%	89.63%	91.19% ↑		89.9%	92%	92.9%	89.1%	↑
4	10 seconds	97%	97.42%	97.65%	98.52% ↑		97.9%	97%	98.8%	97.7%	↑
	% of occasions where time to answer emergency calls is within (above)	(Source: Scorecard Corporate Measures Book Section Response Measures IRS 2.0 a,b and f) Performance against both measures has continued to improve during Quarter 3, with the 10-second target being exceeded and the 5-second target only being narrowly missed. It is expected that these measures will continue to improve as the new intake of recruits improve in confidence									
5	Within 60 seconds	60%	52.37%	50.13%	44.14%		49.1%	60%	53.4%	48.5%	
6	Within 90 seconds	80%	76.68%	76.81%	72.08%		75.3%	80%	77.1%	74.3%	
7	Within 120 seconds	95%	87.6%	86.24%	83.86%		86%	95%	87.2%	85.6%	
		(Source: Scorecard Corporate Measures Book Section Response Measures IRS 2.0 a,b and f)									

*See appendix D for service provision corporate measure definitions

Strategic Performance Report Q3 2017/18

Quadrant One: Service Provision

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
	% of occasions where time to mobilise (above)	Significant staff turnover has taken place during 2017, with a loss of existing staff representing 20% of the establishment. New staff were recruited during September and went 'Live' on the system in October following a 5-week training course. The introduction of new staff into the live Fire Control environment will normally result in a dip in performance, which reflects the difference between 'competence' at the point at which they are assessed as suitable to form part of core crewing and the 'confidence' that a more experienced member of staff gains as they are exposed to 'live' work. Assuming that no further significant turnover is experienced, we would expect to now see a gradual improvement in performance over coming quarters. More in depth analysis of incidents where the call handling measures have not been achieved will take place during the next quarter to establish whether there are issues with the systems used by TVFCS which are impeding performance and, if so, whether technical solutions can be applied to reduce the impact of those issues. There are procedures and workflows associated with some incident types which are a barrier to achieving the levels of performance in the measure e.g. Call challenge being applied to some types of automatic fire alarm activations and the need to refer some incidents to a third party before mobilisation. We will work with the performance team to find a way of identifying these issues with a view to providing more meaningful performance information.									
8	Whole Time under 90 seconds	100%	76.04%	77.01%	83.08% ↑		75.65%	100%			
9	RDS under 300 seconds	100%	71.74%	73.03%	67.8%		71.25%	100%			
	% of occasions where crew turnout (above)	Source: Scorecard IRS Book Section 6. Resources used at Incidents Measure IRS 6.07 The Service Delivery Station Managers functional leads for the hubs, have spent a significant amount of time working with fire crews explaining the importance of this Service Measure, how it assists with the 10-minute response standard and actions that can be taken to achieve this. Over the last quarter, we have seen a significant improvement in the turnout time of wholtime stations. In order to increase the levels of crewing and appliance availability the turnout times of retained duty system fire crews has been increased to between 6 and 8 minutes. This decision has been balanced against the risk of no crews being available, Vision mobilising system will be reviewed in Q4 in relation to the increased turn out times, so the nearest/ quickest appliance will be mobilised to an emergency incident. The Hub functional lead officers will continue to work with RDS stations to try and decrease the percentage of response failures.									

*See appendix D for service provision corporate measure definitions

Service Plans

To ensure effective delivery of our services in line with our strategic plans and priorities the various activities undertaken across functions are detailed and monitored through Service plans that are developed and maintained by Heads of Service. 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:

- HR and L&D
- Corporate Services
- Health and Safety
- Facilities and Assets,
- Response, Prevention and Protection (Service Delivery and Policy and Collaboration)
- Finance & Procurement
- Business Information & Systems
- Strategy and Risk.

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.

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

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



Quadrant Two: Corporate Health Performance

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
Human Resources											
1	% of working time lost to sickness, across all staff groups	3%	4.59%	4.87%	4.91%		4.91%	3%	3%	3.36%	
		(Source: Data calculated and supplied by HR) (Note: RDS figures should be viewed with caution as this figure is calculated based on the average shift length and these vary considerably and many sickness episodes may be recorded as unavailable)									
		In this quarter we have seen an increase in the percentage of working time lost to sickness. This increase of 0.04% on the previous quarter is attributable to short term absence. Long term sickness has reduced this quarter.									
		The total days lost to sickness for this quarter has increased by 1% (1247 days lost compared to 1231 last quarter). However, whilst long term sickness reduced from 846 to 673 days, there has been a 33% increase in short term sickness, 574 days in Q2 compared to 385 days in Q3.									
		The number of short term days lost has increased this quarter for Control (15% / 5 days), NU (50% / 65 days) and WT (29% / 119 days). This increase in short term sickness is due to an increase in those recording ‘colds’ as a reason for absence (74% increase on last quarter but reduced from this time last year) and ‘gastro-intestinal’ related absences which Increased by 34% this quarter and is higher than the same quarter last year.									
		Both musculoskeletal (MSK) and mental health related issues continue to be the top two causes of sickness absence.									
<u>Mental Health</u>											
There has been a significant decrease (243 days, 55%) on the previous quarter. Mental health absences equate to 15% of the total days lost to sickness this quarter, compared to 35% last quarter. 438 days (14 episodes) were lost in Q2 and 195 days (13 episodes) this quarter											
Whilst performance in this area improved, mental health absences have increased by 82% compared to this time last year. A mental health strategy and action plan has been developed. Absences are closely monitored and a wide range of interventions to prevent											

*See appendix E for corporate health measure definitions

Strategic Performance Report Q3 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		<p>absence and support individuals delivered. The Wellbeing Adviser (Mental Health) has worked to recruit 40 Blue Light Champions who will help to raise mental health awareness and reduce stigma.</p> <p><u>Musculoskeletal (MSK) Sickness</u></p> <p>There has been an increase of 171 days (32%) on the previous quarter. MSK absences equate to 41% of total days lost to sickness in Q3 in comparison to 29% in Q2. 357 days (51 episodes) were lost in Q2 and 528 days (43 episodes) this quarter. Musculoskeletal absence is higher than the same time last year. The increase could be as a result of a re-categorising some absences previously recorded in the 'hospital appointment/operation' category. The Movement Specialist works with individuals and line managers to support rehabilitation, providing advice and prescribing exercise.</p> <p>There were three accidents at work resulting in absence accounting for 74 days lost. These cases resulted in two long term and one short-term MSK absence. One accident took place in Q2 but the individual is still absent from the work place.</p> <p><u>Supports and Health Promotion:</u></p> <p>The Benenden provision enables scheme members to obtain a diagnosis and access treatment quicker than the NHS and bring their operations forward resulting in a quicker return to work.</p> <p>The wellbeing day held on 11 October 2017 had a mental health theme and included exhibitors, some practical sessions and creative activities.</p> <p>RBFRS achieved second place in the Thames Valley Business Magazine Awards, workplace mental health category, for the support available around mental wellbeing. Whilst pleased with this recognition, RBFRS is committed to undertaking further work to improve the mental health of staff.</p> <p>The Health, Safety and Wellbeing Member Champion continues to accompany the Health and Fitness Advisor on watch visits.</p> <p>Staff have been provided with winter health advice to help prevent the spread of germs. 26 TVFCS staff requested a flu vaccination voucher. The Joint Working Group for TVFCS recognised the proactive approach to managing seasonal sickness absence to support performance and resilience.</p>									

*See appendix E for corporate health measure definitions

Strategic Performance Report Q3 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
2	% of eligible operational staff successfully completing fitness test	100%	99.8%	98.8%	99.3% ↑		99.3%	100%	97.6%	97.6%	↑
		<p>(Source: Data calculated and supplied by HR)</p> <p>There are two eligible personnel yet to be tested, one RDS and one flexi duty officer. These have been chased through the appropriate management line.</p> <p>Three personnel failed to meet the required standard, one RDS, one 9-day fortnight watch manager and one officer. Two of these individuals have subsequently met an appropriate standard and the third is having investigations for a medical condition that may have an impact on fitness performance. Both the Fitness and Health Adviser and Movement Specialist provide support as appropriate.</p> <p>The total number of eligible operational staff in Q3 was 402. 19 operational staff were not eligible for testing during the October round of testing due to being absent from the workplace due to injury, pregnancy or sickness. They will all be tested prior to returning to full operational duties.</p>									
3	% of eligible staff with Personal Development Appraisals	100%	53%	85%	91% ↑		91%	100%	99.29%	99.29%	
		<p>(Source: Data calculated and supplied by HR) (Data as at 31 December 2017) 533 staff were eligible to have received a Personal Development Interview (PDI) meeting between April and June 2017.</p> <p>Dual contract employees only require one PDI and therefore have only been counted once.</p> <p>64 were exempt for the following reasons:</p> <ul style="list-style-type: none"> 49 new employees within their probation period 15 employees who have been away from the workplace for the duration of the period for various reasons including maternity and sickness. <p>484 staff are recorded as having had their PDI meeting, which equates to 91%.</p> <p>The figures only account for those PDIs recorded on the system up to and including 31 December 2017. If PDI activity has been completed but not logged or was logged after this date it will be included as an update in Q4. Reminders to managers to undertake and</p>									

*See appendix E for corporate health measure definitions

Strategic Performance Report Q3 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		record PDI meetings were issued by HR at the beginning of Q2, a further chase to Line Managers based on the above outstanding figures will be issued during January 2018. Of the meetings that have taken place, 391 PDI forms have been returned to HR. 93 are still yet to be returned along with an additional 49 where PDI paperwork has not been recorded on FireWatch or returned to HR totalling 142 forms outstanding. Whilst performance has improved on the previous quarter, compared to the same quarter last year fewer records of the PDI meetings have been returned to HR. As mentioned in Q2 commentary this is due to reprioritisation of workloads following the Grenfell Tower incident and other associated workloads. PDI meetings were put on hold or postponed to a later date in the year so that the focus could be put on the High Rise project work.									
4	% of eligible operational staff in qualification	100%	95%	98.84%	99.14% ↑		99.14%	100%			
		(Source: Data calculated and supplied by L&D) This is a new corporate measure for 2017/18 and provides overall analysis of core operational training. Further detailed analysis and discussion is undertaken quarterly at the Organisational Development, People Learning Group (ODPLG) which ensures relevant stakeholders from across the Service consider performance outcomes and associated impacts. Locally in the Learning and Development department detailed analysis is undertaken and liaison with individual managers as necessary to address requirements, competence related matters and issues of attendance. Training and assessment activities in RBFRS are aligned with the Fire Professional Framework, which outlines the operational core skills requirements of Firefighters and Officers. National Occupational Guidance provides the standards applicable to the nine core skill areas (Water, Working at Height, Road Traffic Collision (RTC), Hazardous Materials, Casualty Care, Breathing Apparatus (BA), Driving, Incident Command and Core Skills). Our performance in this area for Q3 is 99.14%. This is an increase of 0.24% from Q2 (98.9%) and a total increase of 2.4% from Q1 (96.41%). Note: The RTC qualification is currently excluded as it only commenced in April 2017. However this measure is currently ahead of target (85% on individuals qualified at the end of the 3rd quarter). Areas of good performance include: <ul style="list-style-type: none">Breathing apparatus 100%- All eligible personnel are currently qualified and competent in this area									

*See appendix E for corporate health measure definitions

Strategic Performance Report Q3 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		<ul style="list-style-type: none">Working at Height 99% - This has increased by 9% from 90% in Q1 through improved planning by L&D Managers and Instructors with support from R&D administrative staff. At the end of the quarter, four individuals had expired qualifications. These individuals are booked on courses in Q4 to support requalificationEmergency Response Driving 99% - Two individuals qualifications expired due to workloads preventing attendance on course, programmed for early in the fourth quarterWater Rescue 99%- Two individuals not yet competent in this area, qualifications expired as a result of being unable to attend a course within time. Additional measures are in place to assist those who are unable to swim or are not confident in water. Individuals and line managers are actively encouraged to identify issues so appropriate development and support can be put in place <p>Areas for improvement:</p> <ul style="list-style-type: none">Incident Command has dropped from 99% to 97.6% due to staffing issues at L&D and a reduction in delivery and assessment capacity. Plans are in place to address this issue early in Q4 following the Station Manager promotion process. <p>Corrective actions highlighted in quarters 1 & 2 have been implemented. 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. 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 accident related injuries, including RIDDOR (RIDDOR & Total)	5/81	2*/9	2*/17	1*/7 ↑		5*/33	4*/61	2*/15	4*/41	↑
(Source: Data calculated and supplied by H&S)											
During Q3 there were 7 work related accidents, one of which was RIDDOR* reportable due to the injured individual being unfit for work for more than 7 days. Therefore Q3 has seen a reduction of one RIDDOR reportable injury and a decrease of 10 accidents overall when compared with Q2. Of the 7 accidents in Q3, one was classified as a major injury, 3 were classified as medium severity, and the remaining 3 were classed as minor. The major injury was a fractured ankle whilst playing football. Although a major injury and a fracture, this was											

*See appendix E for corporate health measure definitions

Strategic Performance Report Q3 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		not RIDDOR reportable due to sporting injuries only being reportable if the injury was caused due to defective equipment or failings in the organisation and management of the event, none of which were the case. The one RIDDOR reportable injury was a manual handling injury when lifting RTC equipment whilst training. Examination of the trends and follow up action is taken in all cases as appropriate. Learning from accident investigations is highlighted accordingly and opportunities taken to inform and improve working practices. There are no identifiable trends over the performance year and the top five reasons for accidents remain consistently the same and comparable to others in the fire service sector. <i>*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.</i>									
Spend											
6	% of spend subject to competition	70%	88.35%	89.15%	89.27%↑		88.67%	70%			
7	Compliant spend as % of overall spend	100%	99.4%	100%	100%↔		99.8%	100%			
		<i>(Source: Calculated by Procurement)</i> Measure 6 is a new corporate target and demonstrates how much of the supplier spend has have subjected to competition. The target for this year of 70% continues to be exceeded and almost 90% of all supplier expenditure suitable for competition has been subjected to competition. The current % of spend subject to competition continues to rise marginally as more spend categories are aggregated with partner spend and subject to competition The Authority works in collaboration with the two other Thames Valley FRS's, the National Fire Reform Procurement programme and have a joint procurement work plan in place that now includes Thames Valley Police. Where possible, all new areas of spend being subject to competition are being carried out and joint contracts are being put in place. This year over 80% of tendering activity will be through collaborative working with either our Thames Valley partners or via a national framework and the Fire Reform Procurement work stream. Measure 7 is a new corporate target and is designed to check that all expenditure is compliant with the RBFA Contract Regulations. The Authority should be seeking to achieve 100% compliance through ensuring that no purchase order is approved for any supplier for									

*See appendix E for corporate health measure definitions

Strategic Performance Report Q3 2017/18

Quadrant Two – Corporate Health

ID	Measure	2017/18 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2016/17 Performance		
									Q3 16/17	YTD 16/17	16/17 Vs 17/18 YTD
		expenditure over £10k unless it has been subjected to competition. The unplanned replacement of some operational equipment that could not be delayed resulted in the target not being achieved in the first quarter. Since then the 100% target has been achieved.									
Freedom of Information											
8	% Freedom of Information (FOI) requests and Environmental Information Regulations (EIR) referred to the Information Commissioner	0%	0%	0%	0%↔		0%	0%	0%	0%	↔
		(Source: Manual Input from Information Governance) A request being referred to the ICO does not necessarily mean a failure of our process – that would be indicated by the ICO finding against us. We will continue to aim to ensure requests are answered on time and satisfactorily.									

*See appendix E for corporate health measure definitions

Strategic Performance Report Q3 2017/18

Quadrant Two – Corporate Health

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

	Annual Budget	To Dec Outturn	Forecast to YE	Fcast - Budget Variance
	£'000	£'000	£'000	£'000
EMPLOYEES				
UNIFORMED	18,760	13,351	17,930	(830)
NON-UNIFORMED	5,370	4,079	5,500	130
TRAINING	485	166	480	(5)
OTHER	108	70	106	(2)
	24,723	17,666	24,016	(707)
PREMISES				
REPAIRS & MAINTENANCE	859	402	857	(2)
RATES	828	661	828	0
CLEANING	224	148	232	8
UTILITIES	352	217	337	(15)
	2,263	1,428	2,254	(9)
SUPPLIES				
INSURANCE	310	281	288	(22)
EQUIPMENT	430	243	434	4
INFORMATION TECHNOLOGY	653	580	713	60
CLOTHING/PPE	276	263	288	12
COMMUNICATIONS	691	163	689	(2)
OCCUPATIONAL HEALTH	152	61	152	0
PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTIONS	112	67	128	16
HYDRANT REPAIRS	41	20	41	0
COMMUNITY FIRE SAFETY SUPPLIES	113	97	108	(5)
SUPPLIES OTHER	199	174	217	18
	2,977	1,949	3,058	81
CONTRACTS				
LEGAL AND LEVIES	142	82	148	6
TVFCS	807	534	765	(42)
CONTRACTS OTHER	287	96	293	6
	1,236	712	1,206	(30)
TRANSPORT				
VEHICLE RUNNING COSTS	764	258	750	(14)
TRAVEL	243	197	230	(13)
	1,007	455	980	(27)
PENSIONS				
PENSIONS	418	244	463	45
	418	244	463	45
INCOME				
FEES & CHARGES	(59)	(32)	(60)	(1)
INCOME OTHER	(689)	(689)	(735)	(46)
	(748)	(721)	(795)	(47)

Strategic Performance Report Q3 2017/18

Quadrant Two – Corporate Health

NET COST OF SERVICES	31,876	21,733	31,182	(694)
DEBT CHARGES				
DEBT CHARGES INTEREST	392	214	392	0
	392	214	392	0
INVESTMENTS				
INVESTMENT INTEREST	(23)	(7)	(30)	(7)
	(23)	(7)	(30)	(7)
NET OPERATING EXPENDITURE	32,245	21,940	31,544	(701)
REVENUE FUNDING OF CAPITAL				
REVENUE FUNDING OF CAPITAL	594	0	594	0
	594	0	594	0
APPROPRIATION TO/(FROM) RESERVES				
APPROPRIATION TO/(FROM) RESERVES	(34)	(34)	(34)	0
	(34)	(34)	(34)	0
MINIMUM REVENUE PROVISION				
MINIMUM REVENUE PROVISION	362	0	362	0
	362	0	362	0
(SURPLUS)/DEFICIT	33,167	21,906	32,466	(701)

- 1.1 2017/18 has been a year of unprecedented change in the organisation. A great deal of the work necessary to achieve the £2.4 million of savings outlined in the MTFP has been initiated. The Service Delivery and Risk & Performance restructure has now been implemented and will deliver £496,000 in non-station based savings.
- 1.2 In parallel with these organisational restructures, a fundamental change in the way budgets are monitored and managed has been implemented. The decision to devolve budgets that were previously managed centrally is in keeping with two of the key elements of Vision 2019, namely, improving capacity, capability and resilience and creating a “one team” culture. Significant investment in training and the use of in-house expertise to create real time financial information has resulted in better control of cost centre budgets and the identification of further savings.
- 1.3 As a consequence of the consultation, engagement and implementation phases of the Service Delivery and Risk & Performance restructure, it has been necessary to fill a number of positions on a temporary basis and carry a number of vacancies. This has mitigated against the likelihood of redundancies, in line with the Authority’s commitment to avoid compulsory redundancies, where possible. Holding the vacancies has also provided some in-year headroom to manage any unfunded pay awards from the NJC.
- 1.4 Delivering the above-mentioned restructure, whilst avoiding the potential for compulsory redundancies, has necessitated a higher than usual level of temporary promotions amongst Grey Book staff. Because of the various temporary promotions, the overall Grey book staff in post has varied between 9 and 17 below strength during the year. These vacancies have mainly been at station level. In addition, there will be further underspends generated as the number of employees receiving development and trainee rates of pay is higher than that assumed within the budget. Overall, this has resulted in a forecasted underspend of £537,000, excluding RSU, for the financial year. It should be noted that this is an in-year underspend and will not be a recurring saving due to the recent and ongoing recruitment to grey book roles. It does however give additional assurance that the planned removal of grey book posts to meet the £1.3 million IRMP savings is achievable.

Strategic Performance Report Q3 2017/18

Quadrant Two – Corporate Health

- 1.5 Due to the pressures on grey book establishment, from the Risk & Performance restructure and the proposed disestablishment of the RSU, a number of vacancies have been carried and will continue to be carried, in the RSU. The four vacant posts being carried will lead to an additional in-year saving of £223,000. As the disestablishment of the RSU forms part of the £1.3 million agreed IRMP savings this is effectively the early delivery of these savings. When all of the RSU posts have been disestablished, the addition RSU costs will be removed from base budget, providing £423,000 of the savings required.
- 1.6 It is also pleasing to note that the recently established RDS project is starting to show early success. As a consequence of the vacancy levels an in-year underspend of £300,000 is expected in the RDS budget. Again, it is reassuring to note that the necessary recurring savings associated with the Authority's IRMP decisions can be met from this budget, whilst continuing to increase RDS availability.
- 1.7 The overtime budget excluding public holiday overtime for station-based staff is £546,000 compared to a forecasted spend for the year of £570,000. Whilst the planned increased recruitment will reduce this budget in the short term, it is estimated that in future years the overtime budget requirements will remain in line with the 2017/18 budget, due to the planned staff reductions that will come about as part of the IRMP implementation.
- 1.8 At Management Committee on 19 September 2017, Officers presented a four-phase plan to deal with the additional workload post Grenfell. Recruitment of additional resources is well under way and as a consequence unbudgeted costs of £180,000 are expected to be incurred in this financial year. Due to the savings made to date the in-year costs will be able to be met from existing budgets. However, the recurring costs will need to be considered in the MTFP.
- 1.9 Final agreement is still to be reached on the pay award for uniformed staff for 2017/18. A figure of 1% effective from 1st July 2017 was built into the original budget. An additional 1% totalling £150,000 has also been built into the estimated outturn on the basis that the rejected offer from the NJC was for 2% funded by Fire Authorities and a further 3% subject to wider negotiations.
- 1.10 Additional unbudgeted project work is taking place to streamline processes which will generate savings in 2018/19, but this will lead to a £30,000 overspend on non-uniformed staffing costs in the current year.
- 1.11 Outside of employee costs, a number of small variances have occurred in year. On Insurance, there has been a reduction in our contributions to the Fire and Rescue Indemnity Company (FRIC) as our number of claims has been lower than projected.
- 1.12 Based on the cyber security audit that was carried out last year, additional Information Technology costs have been incurred to implement recommendations. This has resulted in an overspend in this area which will not be ongoing. Additional work has also been completed in preparation for GDPR requirements, which become live early in 2018/19.
- 1.13 There will be an underspend in relation to the Authority's share of the running costs of TVFCS in 2017/18. Firstly, staff turnover and a high number of new recruits initially being on development rates of pay have led to an underspend on salaries. Secondly, technology contracts have been reviewed and renegotiated where possible and significant savings have been achieved on telephony. The Authority's share of the revenue costs of TVFCS is 38%.
- 1.14 Pension costs are estimated to be higher than budgeted due to additional ill-health retirement charges.
- 1.15 Additional unbudgeted income has been generated during the year from the sale of vehicles.

Financial Position as at December 2017-18 (Capital)

CAPITAL SCHEMES	Total Budget £'000	Total Spend to date £'000	Est. Spend to complete £'000	Total Est. Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. End Date	Notes
Fire Station Refurbishments - Hungerford Community Fire Station	809	809	0	809	0	0%	Qtr 1 2017/18	Station refurbishment completed on schedule in Qtr 1. Additional ground works & roof replacement were incorporated into the project as part of the build programme. Reduced running & annual maintenance costs will provide an ongoing revenue benefit.
Fire Station Build - Theale Fire Station	7,200	557	6,643	7,200	0	0%	Qtr 2 2019/20	Negotiations are nearly complete to purchase the site and this will be brought to management committee for approval on 17th April 2018. Subject to planning progressing as expected, work will commence in 2018 and will complete at the end of 2019. The approval to appoint the main contractor is scheduled to come to management committee on the 17th April 2018.
Whitley Wood Fire Station Firehouse	350	8	342	350	0	0%	Qtr 3 2018/19	Construction is expected to commence in Spring 2018 and be completed in Autumn 2018.
Fire Station Refurbishments minor works - Appliance bay door replacement programme	480	316	20	336	-144	-30%	Qtr 1 2018/19	Programme has now been completed with all bay doors being successfully replaced. Only retention payment costs are now expected and surplus budget is not required for this scheme.
Fire Station Refurbishments - minor works	355	254	86	340	-15	-4%	Qtr 4 2020/21	Kitchen installation works at Bracknell, Maidenhead and Langley were completed in quarter one. Subsequent to quarter one, two further capital bids were approved by Management Committee for minor works at Wokingham Road Fire Station (station wall) and Newbury Fire Station (rear bay drainage system). Whilst the work at Newbury has been completed, an underspend is reported for the Wokingham Road works which can be delayed to form part of the wider regeneration work. Further capital bids will be presented to Management Committee as deemed necessary.

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Quadrant Two – Corporate Health

CAPITAL SCHEMES	Total Budget £'000	Total Spend to date £'000	Est. Spend to complete £'000	Total Est. Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. End Date	Notes
ICT - IBIS redevelopment or replacement	131	55	76	131	0	0%	Qtr 2 2018/19	New specialist c# programmer is in post following departure of previous one and system development is progressing and is now expected to complete in Qtr 2 2018/19.
ICT - Helpdesk System	45	28	17	45	0	0%	Qtr 4 2017/18	System has been purchased and work is progressing with new functionality being rolled out across the authority. Completion is expected in Qtr 4 2017/18.
ICT - Sage 1000 upgrade	65	17	48	65	0	0%	Qtr 3 2018/19	The upgrade to Sage 1000 was successfully implemented in Qtr 4 2016/17. Plans for phase 2 of the project are being developed and will be completed in Qtr 3 2018/19.
ICT - Learning Management System (LMS)	45	0	45	45	0	0%	Qtr 2 2018/19	The project lead recruitment process was not successful and options to collaborate with neighbouring authorities are being investigated. Meetings with system providers are ongoing and project specification and tender documents will be developed following this.
ICT - Firewatch Development	60	30	30	60	0	0%	Qtr 1 2018/19	Modules have been purchased for this work to begin and it is now expected to complete in Qtr 1 2018/19. The delay is due to additional testing and training needs on new releases.
ICT - Mobile Data Terminal (MDT) Devices	60	56	4	60	0	0%	Qtr 4 2017/18	Replacement of MDT's and supporting hardware on all operational appliances including training vehicles. Hardware has been purchased and is being installed across the authority.
ICT - Cyber Security	60	0	60	60	0	0%	Qtr 4 2018/19	The tender process for this work is being developed and is expected to start in Qtr 4. The project will be completed in 2018/19.

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Quadrant Two – Corporate Health

CAPITAL SCHEMES	Total Budget £'000	Total Spend to date £'000	Est. Spend to complete £'000	Total Est. Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. End Date	Notes
ICT - Asset Replacement	236	42	194	236	0	0%	Qtr 4 2018/19	Annual asset replacement plan to be continued over the next two financial years as identified in the ICT strategy for asset management.
Fleet & Equipment - Fire Appliances	2,925	848	1,617	2,465	-460	-16%	Qtr 4 2019/20	4 new fire appliances were delivered in Qtr 1 2017/18. This is a shared exercise with Thames Valley partners that will see RBFRS procure 7 further vehicles over the next 3 years.
Fleet & Equipment - Special Appliances - Operational Support Unit	250	34	216	250	0	0%	Qtr 4 2018/19	Work is underway to establish a project to identify operational support unit vehicles, and that includes the scope of the hook lift pod system purchases, which will be compatible with the new vehicles.
Fleet & Equipment - Other Ancillary Vehicles	375	50	325	375	0	0%	Qtr 4 2020/21	The fleet strategy has identified a number of vehicles that are beyond serviceable use, and these are being reviewed and replaced as necessary.
Total (Under)/Over	13,446	3,104	9,723	12,827	-619			

Transition Bids Spend Summary

(As of 23/01/2018)

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q3 £k	Update
K10-601	Core Skills Training Programme Core skills development is a key plank of the OD programme and central to delivering new behaviours. This bid will support early delivery of key core skills and a long term core skills development and refresher programme, mapped to the Investors in People standard, leadership development and embedding into the L&D function	Becci Jefferies	01/09/15 26/04/16	104,000	78,305	Delivered to date: <ul style="list-style-type: none"> • Project management training - 111 people attended to date • Procurement framework skills – 12 people attended to date • Procurement overview – 20 people attended to date • Raising requisitions – 35 people attended to date • Finance for budget holders – 58 people attended to date • Appraisal (new PDI process) + corporate objectives + vision 2019 from Jan 16 - 58 people attended to date • Mindfulness course - 79 people attended to date • Resilience – 66 people attended to date • Managing Sickness course – 58 people attended to date • Crucial Conversations course - 69 people attended to date • Working with Members course - 41 people attended to date • Time management course - 38 people attended to date • Coaching course - 8 people attended to date • Mentoring course - 24 people attended to date To be Delivered <ul style="list-style-type: none"> • The review of Core Skills requirements has identified the need for implementation of several new courses: Interview Skills, Disciplinary Training, Writing Effective Reports, Managing High Performance and Equality Diversity and Inclusion-Unconscious Bias Training. • It is anticipated roll out of these course will commence in Q4.

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q3 £k	Update
K12-601	HR Advisor Support To ensure an HR resource with appropriate skills and knowledge is available until end March 2018 to support Managers to execute necessary staffing restructures and re-organisation to effect organisation change.	Becci Jefferies	02/02/2016	162,500	80,246	Delivered to date: <ul style="list-style-type: none"> • Role/support is working with Heads of Service and departmental managers to assist with restructure activity including planning, reports design and consultation • Reviewed the operational leave policy • Role assisted with TVFCS transition plan activities as per the agreed plan and as appropriate • Support and consultation provided for Risk and Performance and Service Delivery restructures including consultation meetings, formal consultations and selection processes • Support arrangements reviewed during Q1 and role advertised in Q1 • Completion of support and consultation for Risk and Performance and Service Delivery restructures • Collation of objectives identified for E&DI Forum consideration • Bursary Policy review To be delivered following the successful appointment of HR support: <ul style="list-style-type: none"> Policy review Contract Review Discipline review Armed Forces Covenant development Job Profile Review Two tier entry feasibility report Equality Diversity and Inclusivity action plan development for consideration by the EDI forum Recruitment Attraction Review Development of PDI pilot to include behaviours NVQ review

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q3 £k	Update
K16-602	Systems Business Partner - resource Two year temporary post – systems business partner, a customer facing role to deliver and rollout Firewatch upgrades, IBIS improvements and support development of other service applications from an end user perspective	Nikki Richards	07/06/2016	76,720	32,762	Delivered to date: <ul style="list-style-type: none"> • Post filled and started on 29/08/16 • Activity to understand role requirements and current system • Working on Firewatch 7.6 testing prior to implementation particularly around wholetime payments processing • Providing FireWatch 7.5 support • Checking if mileage claims could also be done within FW • Retained payments in Firewatch 7.6 • Documentation of new FireWatch user manuals • Set up and testing new Fire Watch modules (Availability, mobilisation, self-service) • Provision of FireWatch 7.6 go live • Testing new Availability Service for Retained To be delivered <ul style="list-style-type: none"> • General FireWatch 7.6 ongoing support (and testing new fix releases from Infographics) • Training on new Availability Service for Retained • Setup and testing of new Mobilisation and Self Service modules
K17-602	Data & Performance Analysis Manager Resource for a 24 month period to rectify issues with data assurance emerging because of linkages and feeds between systems	Nikki Richards	05/07/2016	92,000	40,096	Delivered to date: <ul style="list-style-type: none"> • Recruitment completed and resource started 24/10/2016 • Audit of data flows for Corporate measures and development of SQL reports completed • A MoU has been signed for a TV data sharing agreement, and a shared post with OFRS is being used to develop risk mapping. To be delivered <ul style="list-style-type: none"> • Working towards appointing a resource as original post holder left with role vacant between August 17 until December 17 • New resource appointed 1st December 2017 and evaluating current work and role requirements

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q3 £k	Update
K19-601	Review of competency assessments Funding for a resource for 6 months to complete a full review of the current methodology used when assessing competence at operational ranks through understanding the “as is” situation, research on potential alternative models with and final recommendation for consideration provided	Becci Jefferies	05/07/2016	30,000	3,182	Delivered to date <ul style="list-style-type: none"> • Scope of work agreed and PID written and approved • Phase 1 work – research undertaken Resource to further the project identified with activity commencing in Q4 To be Delivered: <ul style="list-style-type: none"> • Scope of activities and options to be assessed together with timescales set, following identification of resource to assist project
K22-602	Temporary accounts officer Funding for a temporary accounts officer for two years starting April 2017. This is the continuation of a post in the old structure that will be required while new ways of working are embedded within the department and the wider organisation.	Conor Byrne	02/08/2016	74,000	23,274	Delivered to date: <ul style="list-style-type: none"> • Resource recruited to start from April 2017 • Undertaking activities related to invoicing, accounts payable and receivable, cash management and credit control for the Fire Authority • Support to Trading company and dealing with invoices, carrying out credit control and cash management To be delivered: <ul style="list-style-type: none"> • Support implementation of efficient P2P processes

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q3 £k	Update
K24-602	Temporary procurement officer Funding for an additional Procurement Officer for two years starting April 2017. This resource will assist in the change of how procurement will be delivered going forward over the next 24 months, as well as assist in the delivery of the Procurement service plan ensuring compliance, knowledge and advice	Conor Byrne	02/08/2016	90,000	14,679	Delivered to date: <ul style="list-style-type: none"> • Contract register and work plan now being updated weekly • Contract repository review completed • Set up contract award process • Three tenders completed under supervision • Taken over from buyer role and checking all requisitions to ensure compliance • Worked on undress uniform project • Issued letters to critical suppliers to check business continuity plans To be delivered: <ul style="list-style-type: none"> • Set up quarterly report monitoring to capture any new categories • Produce quarterly reports for SPB • Support the delivery of the Procurement work plan and service plan • Support contract management framework roll out
K25-601	Temporary resource for a full time apprenticeships project manager to research, scope, plan and implement the RBFRS Apprenticeship Scheme	Becci Jefferies	01/02/2017	23,445	22,814	Delivered to date: <ul style="list-style-type: none"> • Recruitment undertaken to identify resource however no appointment made • Project initiation document signed off at the June Programme Board • Options and recommendations relating to apprenticeship schemes presented at the Senior Leadership Team meeting during September • Three Business apprentices in post. Two working within HR and L&D and one in Business Support. To be Delivered <ul style="list-style-type: none"> • Further research and options being evaluated in conjunction with evolving fire sector developments • Collaboration opportunities with other Fire and Rescue Services being explored • Extension of apprentices to other areas of the Service

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Quadrant Two – Corporate Health

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Spend end Q3 £k	Update
K26-601	Temporary resource to manage the introduction of a Learning Management System. The system will provide the ability to develop and host flexible e-learning reducing the need, in some areas, for face-to-face training.	Becci Jefferies	16/09/2016	69,516	0	Delivered to date: <ul style="list-style-type: none"> • Resourcing and Development Manager started in mid-May and objectives set regarding the provision of a Learning Management System • Engagement with other organisations to understand the developments in eLearning • Further review of requirements completed To be Delivered <ul style="list-style-type: none"> • Unsuccessful attempts to secure an individual to date with alternative recruitment options being evaluated Requirements to be refined to inform specification and tender process. Exploring opportunities for potential joint procurement with OFRS and BMKFRS
K27-601	Dedicated mental health support post A dedicated resource, based at the Bracknell Fire Station to provide Mental Health Support in line with the Health, Safety and Wellbeing Strategy	Becci Jefferies	16/05/2017	29,195	5,416	Delivered to date: <ul style="list-style-type: none"> • Mental Health and Wellbeing Adviser recruited in August Recruitment of additional Blue Light Champions To be Delivered <ul style="list-style-type: none"> • Work will support the Health and Wellbeing strategy and action plan with focus to be on policy, training and health promotion - See Action plan • Mental health Strategy and Action Plan agreed • Leadership session designed for Middle Managers to be held on 1Feb
Total ongoing (open) projects spend					300,774	
Closing total for projects completed during Q3					0	
Closing total for completed projects prior to Q3					747,619	
Total spend					1,048,393	
Total budget allocated				1,498,995		
Total budget available for allocation				501,005		

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Quadrant Two – Corporate Health

Procurement Plan

(Data accurate as of 11/01/2018)

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.

Since 1 April 2017 a total of 52 tenders have been completed and contracts are now in place. Below are the contracts awarded during Q3.

Project No.	Service	Contract Owner	Proc. Contact	Contract Detail	Spec. Owner	Supply Type	Contract Status	Proc. Process	Collaboration	Project Start Date	Project Target Comp. Date	Est. Total Contract Value	CAP or REV	Monthly Progress Update / Comments
391	Policy	Mark Gaskarth	Moses Kuria	Crash Recovery Software	Iain Harrison	Supply	Renewal	Quote	Y	01/10/2017	31/12/2017	£7,000	R	Awarded to Airbus Ltd
394	Finance	Conor Bryne	Jane Lubbock	Actuarial Advice	Ryan Masden	Supply	Renewal	Quote	N	01/11/2017	31/12/2017	£9,950	R	Awarded to Roberts Hymans Ltd
395	Fleet	Richard Battley	Emma Elliott	Fuel Management Maintenance/Service	Tim Mansbridge	Supply	Renewal	Waiver	Y	01/10/2017	31/12/2017	£20,000	R	Awarded to Vectec Ltd
400	Fleet	Richard Battley	Moses Kuria	Thermal Imaging Cameras	Rob Read	Supply	New	Waiver	Y	01/10/2017	31/10/2018	£7,000	R	Awarded to Terberg Ltd
402	Policy	Mark Gaskarth	Jane Lubbock	Fire Safety and Inspection Consultancy	David Sharpe	Service	New	Framework	N	01/10/2017	31/12/2018	£200,000	R	Awarded to Reed Global Ltd under the YPO Consultancy Framework 00569 Lot 2
404	BIS	Tony Vincent	Emma Elliott	MobileIron Mobility Management Solution	Lee Arslett	Service	New	Quotes	N	13/11/2017	12/11/2017	£46,670	R	Awarded to Bytes Software Solutions Ltd
409	Facilities	Richard Battley	Emma Elliott	Copyright Music Licence	Matt Barber	Service	New	Subscription	N	01/12/2017	31/12/2017	£20,000	R	Awarded to Performing Music Society Ltd
391	Policy	Mark Gaskarth	Moses Kuria	Crash Recovery Software	Iain Harrison	Supply	Renewal	Quote	Y	01/10/2017	31/12/2017	£7,000	R	Awarded to Airbus Ltd

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Quadrant Two – Corporate Health

Human Resources Performance

(See appendix G for supporting charts)

(Source: All data calculated and supplied by HR)

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	2016/17 Performance	
							Q3 16/17	Authorised establishment
STAFF IN POST	Wholetime	382	373	368		368	383	385
	Retained	65	68	70		70	61	91
	Control	38	43	39		39	36	40
	Non Uniformed	129	136	138		138	125	135
	Total Number of Staff in Post	614	620	615		615	605	655
	NB.19 individuals hold more than one role (Dual Contract).This quarter there were 21 leavers and 13 new starters. This quarter there were approximately 29% more leavers than in the previous quarter. No trends have been identified following examination of the reason for leaving. Based on current performance the annual turnover year to date equates to 7.79%, which indicates our performance is likely to outturn above the annual target of 9.4% (in line with the public sector average).							
Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	Q3 2016/17	
STAFF TURNOVER	Wholetime	7	9	5		21	3	
	Retained	2	2	5		9	6	
	Control	0	1	3		4	0	
	Non Uniformed	3	3	7		13	10	
	Total Number of Leavers (Heads)	12	15	21		47	19	
	Staff in Post (SIP)	614	620	615		616*	605	
	Percentage of Leavers vs. SIP	1.95%	2.42%	3.41%		7.79%	3.14%	
*See staff in post for commentary.								

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Quadrant Two – Corporate Health

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	2016/17 Performance	
							Q3 16/17	YTD 16/17
AGE PROFILE	25 and Under	19	23	22		22	28	28
	26-35	166	161	160		160	156	156
	36-45	212	214	214		214	220	220
	46-55	184	189	184		184	174	174
	56-65	30	31	33		33	37	37
	66 and Over	3	2	2		2	6	6
	Total	614	620	615		615	621	621
<p>As previously identified and in common with other Services, RBFRS has an ageing workforce profile. This results in a potential organisational risk around the required fitness levels of operational staff as the organisation will have a larger number of operational individuals over 50. The Health, Safety and Wellbeing Strategy and Action Plan recognise the need to focus attention in this area. Actions include workforce planning, increased support of fitness and initiatives to encourage healthy lifestyles and general wellbeing. The Movement Specialist and occupational health physiotherapy provisions together with the Benenden health care arrangements further provide support to all staff. Initial usage statistics suggest the Benenden scheme is being well used, and may therefore be a useful tool to utilise in the future for health interventions.</p> <p>The funding application, submitted in Q2, for research work with Bath University and Chris Rhodes (Clinical Nurse Manager) from Duradiamond, was not successful. Other options such as the ageing toolkit through the National Fire Chiefs Council will be considered, along with future research opportunities.</p> <p>The engagement of apprenticeships across the organisation continues and to date have recruited three apprentices across the service. This will have an impact on our age profile.</p>								
Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	Y.T.D. Target	YTD 16/17
FEMALE STAFF	Wholetime	3.66%	3.48%	3.53%		3.53%	4%	3.39%
	Retained	4.61%	4.41%	5.71%		5.71%		6.56%
	Control	71.05%	72.09%	69.23%		69.23%		66.67%
	Non Uniformed	54.26%	53.67%	55.07%		55.07%		54.4%
	Total	18.56%	19.35%	19.51%		19.51%		18.02%
<p>Our gender profile is broadly in line with other Fire and Rescue Services and although no new Firefighters have been recruited this quarter we continue to work towards encouraging female applicants into the operational roles Through RDS recruitment projects and reviewing approach to positive action.</p>								

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Quadrant Two – Corporate Health

Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	Y.T.D. Target	YTD 2016/17
ETHNICITY FIGURES	Wholetime	4.71%	4.82%	4.89%		4.89%	5%	4.7%
	Retained	1.53%	1.47%	1.42%		1.42%		0%
	Control	2.63%	2.32%	2.56%		2.56%		2.78%
	Non Uniformed	13.17%	13.23%	12.31%		12.31%		7.2%
	Total	6.02%	6.13%	6.01%		6.01%		4.62%
	% of all ethnicity groups except White British and unknown ethnicity across the service							
Measure		Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 YTD	2016/17 Performance	
							Q3 16/17	YTD 2016/17
DAYS LOST TO SICKNESS	Short	412	385	574		1371	507	1304
	Long	792	846	673		2311	247	1038
	Total	1204	1231	1247		3681	754	2342
	(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).							
Please refer to HR Corporate Measure “% of working time lost to sickness across all staff groups”								

Quadrant Three - Priority Programmes

(Summary as of 01/03/2018)

Project Summary						
Project	Strategy Ref	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
ESMCP	Home Office	Lee Arslett	<ul style="list-style-type: none"> Still awaiting the revised plan to be provided by the Home Office. Awaiting confirmed transition date but project working towards Summer 2018. Recent updates suggest the actual timescales could be later Programme is working towards initial milestones provided Control upgrade works continuing to progress High level training and vehicle installation plans drafted around existing assumptions 	<ul style="list-style-type: none"> Internal governance structure to be reviewed and any identified improvements to be put in place Delivery of plan to inform next steps. 	A ↔	<p>Issue: Lack of information from the programme is hindering progress around planning as having to make assumptions.</p> <p>Action: Awaiting agreed full plan to be provided from the Home Office</p>
New Fire Station at Theale	Integrated Risk Mgt Plan/ Strategic Asset Investment Framework	Alex Brown	<ul style="list-style-type: none"> Consultation meeting held with West Berkshire Planning Department. Confirmed the plan does not need to go to Planning committee and Planning application outcome pushed back by Local Planning Authority to 31st January 2018 Timeline for restricted contractor tender process revised with recommendation for contract award to be presented to Management Committee on 17th April 2018 for approval. 	<ul style="list-style-type: none"> Outcome of planning application to enable progress on site purchase Detailed design and cost estimation work can be completed Exchange of contracts with 5% of purchase price as a deposit Perform evaluation of tender applications in March 2018 	A	<p>Issue: Delay to the outcome of the planning application</p> <p>Action: Project still progressing</p>

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Quadrant Three– Priority Programmes

Project	Strategy Ref	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
			<ul style="list-style-type: none"> Site value agreed and awaiting cost estimates for items to be deducted from site value. Network Rail seeking their own estimates for the cost of remediation. Design freeze in place and working on detailed design and cost estimation work 			
Whitley Wood Project	Strategic Asset Investment Framework	Alex Brown	<ul style="list-style-type: none"> Project on hold until detailed requirements have been established to define the project's scope. Planned strategic meeting held in early December with team to investigate extent of co-location opportunities during January/February An accommodation schedule exercise performed to support the design process. 	<ul style="list-style-type: none"> User group meetings to be held to challenge existing working practices. These meetings will provide the underlying information on which to base the requirements. 	R	Lack of clarity of requirements is causing issues with agreement on the scope of the project. Revisiting the scope of the project has caused a delay to the project. However, this will ensure the end project will meet the needs of all the Stakeholders.
Review of RDS recruitment and retention	Integrated Risk Mgt Plan	Jim Powell	<ul style="list-style-type: none"> Project Board monthly meetings are now taking place Review of recruitment process in progress with planned actions underway to improve the written test, physical test. Programme of recruitment events to be launched in November 2017 Collaboration with OFRS has increased opportunity of access to initial training and increased frequency of BA training events and has resulted in significant reduction in time it take for personnel to ride the appliance 	<ul style="list-style-type: none"> Recruitment communication toolkit to be distributed. Survey to be conducted to establish any potential concerns regarding progression to watch manager role. Formal evaluation of Firewatch module to inform future provision Barrier periods trial to start in January 2018 to inform impact on RDS availability Review of terms and conditions in relation to RDS duty systems and staffing due to start in February 	A ↔	<p>Issue: Personnel movement and subsequent capacity issue is affecting the reduced crewing work due to no available lead</p> <p>Action: Timescale for the reduced crewing element of the project to be revised.</p>

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Quadrant Three– Priority Programmes

Project	Strategy Ref	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
			<ul style="list-style-type: none"> The existing barrier period policy has been revised and is in consultation with a view to trial in January 2018. The results will be monitored for 6 months and presented to SLT. Recruitment toolkit devised of station banners, updated posters, leaflets and pull up banners. To be distributed in January 2018 to stations. Reduced crewing work has been put on hold due to resource capacity issues. New work stream looking at RDS cover and provision of combination pumps started in November 			
Firehouse Facility	Strategic Asset Investment Framework	Alex Brown	<ul style="list-style-type: none"> OJEU notice issued in November. Procurement is proceeding with three bidders: Haagen, Alpine Metal Tech and KFT providing the 1st stage of the tender process. These in turn will be shortlisted to 2 after which they will submit they detailed proposals 	<ul style="list-style-type: none"> Evaluation of the submission of the final bidders will take place including interviews in January 2018 Final tender submissions by end of January followed by award in February 2018 	G ↕	On track, no issues raised
Remotely Managed stations	Integrated Risk Mgt Plan	Iain Harrison	<ul style="list-style-type: none"> First version of PID submitted to November's Programme Board 	<ul style="list-style-type: none"> An informal consultation will take place to gauge the initial reaction and to help shape the proposals Once completed any required changes to the recommendations will be made and included in a formal consultation exercise 	G ↕	On track, no issues raised

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Quadrant Three– Priority Programmes

Project	Strategy Ref	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
				followed by a detailed analysis of the results		
Officer Cover Review – Phase 2	Integrated Risk Mgt Plan	Doug Buchanan	<ul style="list-style-type: none"> PID approved in November 17 The FBU have been engaged and will continue throughout the project The compiling of the reports and proposals has begun 	<ul style="list-style-type: none"> The first IRMP lead members meeting will be held A formal meeting with the FBU is due to take place on 22nd January 2018 	G ↕	On track, no issues raised
Records Management	Information Governance	Lee Arslett	<ul style="list-style-type: none"> PID approved in November 17 	<ul style="list-style-type: none"> Project timescales to be confirmed based on priority 	A	Issue: A delay to the start of project has led to a revision of the timescales. Action: Specification workshop arranged.
Crowthorne refurbishment	Strategic Asset Investment Framework	Alex Brown	<ul style="list-style-type: none"> PID approved in November 17 Programme Board for the tri community station Project details are being established and recorded Crowthorne station staff are being involved with the specifications and have supplied numerous improvement suggestions 	<ul style="list-style-type: none"> Planning pre-application to be submitted in February 2018 for which outcome is expected in March. Potential locations for a full decant to be underway 	G ↕	On track, no issues raised
Leadership Development Programme for Middle Managers	Organisational Development	Nikki Richards	<ul style="list-style-type: none"> Proposal for the programme agreed by Senior Leadership Team Outline for potential development programme created and agreed Leadership Forum launch for middle managers Three cohorts started in Q3 	<ul style="list-style-type: none"> Leadership Forum themed on mental health Q4 cohorts commence 	G ↕	On track, no issues raised
Investors in People	Organisational Development	Katie Mills	<ul style="list-style-type: none"> Provider change over 	<ul style="list-style-type: none"> Review requirement to progress IIP 	A	Issue: Capacity to gain accreditation alongside the

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Quadrant Three– Priority Programmes

Project	Strategy Ref	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Accreditation (liP)						introduction of the inspection regime for FRS. Action: Under review given the new requirements under the inspection regime for fire and rescue services which includes a specific
Apprenticeship Scheme	Organisational Development	Becci Jefferies	<ul style="list-style-type: none"> HR Administrator Apprentice with Newbury College now in post A Business Support Assistant Apprentice vacancy will be live by Friday, 6 October Facilities Apprentice approved. A meeting with an identified provider (HIIT Training), has been set up to progress Meetings underway to discuss potential apprenticeship opportunities within other departments Project manager attending the Community Fire Safety Trailblazer group which meets monthly Unexpectedly, the application window to become an Approved Training Provider opened on 26 September and closes on 27 October 2017. A national sector specific conference and training event is being organised by Lynne Swift, Buckinghamshire FRS 	<ul style="list-style-type: none"> Report to be drafted for Senior Leadership Team in relation to the option to become an Approved Training Provider Review of policies and procedures underway Recruitment of Facilities Apprentice 	G ↑	On track, no issues raised

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Quadrant Three– Priority Programmes

Project	Strategy Ref	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Business Process Improvement	Organisational Development	Katie Mills	<ul style="list-style-type: none"> Payroll process review undertaken and identification of issues with the process and associated actions agreed as an improvement plan. Detailed process maps produced and agreed. Launch of new website as part of channel shift focus with improved functionality in support of business processes. 	<ul style="list-style-type: none"> Programme of business process improvements to be identified Continued improvement of digital services and functionality 	G ↕	On track, no issues raised

Key Programme Risks




KEY PROGRAMME RISKS					
ID	Project	Risk	Mitigation Actions	Owner	RAG/s core
443	Review of RDS recruitment and retention	If we cannot provide adequate capacity and resources to support this project, which is becoming increasingly likely given high demand across the organisation, then we can expect project delivery timescales to be delayed or become unachievable which is significant in respect of delivering the necessary treatments to control corporate risks 417 and 419	<ul style="list-style-type: none"> Station manager process will increase uniformed managerial capacity Resource issues to be escalated to programme board 	DCFO Foye	17


Quadrant Four - Risk

Corporate Risks (As of 12/03/2018)

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	Q2 Risk Score	Current Risk Score	Direction of Travel
Capital Investment Strategy (Risk: 233) Risk Owner: Assistant Chief Fire Officer Inherent Score: 23					
If we fail to effectively manage our property assets to ensure they are in the right locations and fit for purpose, which may become increasing likely given the level of skills and experience and capacity within our estates team and the increasing age of our fire 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	<ul style="list-style-type: none"> • Ensure a Property Asset Management Plan is developed • Ensure maximum use of memorandum of understanding and ensure compliance with statutory duty to collaborate by positive engagement with blue light and other partners. • Ensure effective project management through procurement of professional services and management through the programme board. • Additional personnel added when required for resilience. Flexible staffing model to scale up when required. • Annual update to Strategic Asset Investment Framework • Develop partnerships and opportunities for potential income generation through Joint venture and colocation opportunities 	<ul style="list-style-type: none"> • Being developed. In service plan as work package for completion by April 2018. Good progress being made. • Good progress with TVP on 4 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. • PIDS agreed for Theale, Whitley Wood and feasibility studies for Caversham Rd and Crowthorne. Highlight reports and project updates to Board and Fire Authority. • Appointed to post in Jan to support Strategic Property. FA funding approval for additional resources. 2 x new support posts added 1/12/17 	16	18	

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
money and ensure fire stations are at the heart of communities	<ul style="list-style-type: none"> Ensure additional flexibility in project plans where planning consent is required 	<ul style="list-style-type: none"> Version 2 approved by Fire authority. Amendments to planning assumptions with v3 to go to FA in Feb 18 Continue engagement with stakeholders at Berkshire OPE Delays in the planning permissions process for Theale has put back timelines for the project for 8-12 weeks and increased the current risk. 			
Volatility of Funding (Risk: 420) Risk Owner: Chief Fire Officer					
Inherent Score: 24					
If RBFMS fails to achieve a balanced budget, which is becoming more likely given the national deficit, Central Government fiscal policy, increasing volatility in local funding and increasing budget pressures, we can expect to face further reductions in service delivery, potential negative oversight opinions and loss of public trust, which will severely impact on our ability to deliver our statutory duties and strategic objectives.	<ul style="list-style-type: none"> Collaborative development of Medium Term Financial Plan with Members and Senior Leadership Team Robust internal budget monitoring and management processes Agility in internal planning processes to ensure delivery plans are matched to Medium Term Financial Plan Political engagement with Central Government to ensure new burdens are matched with new funding Political engagement with Government to remove precept cap and referendum requirements which will allow additional flexibility in local funding Engagement with Central Government, through Political lobbying, Fire Finance Network and NFCC, on new Fire Funding proposals Effective and flexible Treasury and Reserves management 	<ul style="list-style-type: none"> New planning scenarios developed and being progressed to budget setting processes at FA on 27th February. Preparation includes member activity First complete forecast by all cost centre managers was entered into database at the beginning of January. Revised service plans being developed by Heads of Service for Feb 2018. Senior Team restructure and associated roles completed to better align functions. New SD Hub delivery plans to be implemented by April 2018. Response to Central Government on Local Finance Technical Consultation submitted. Engagement with Berkshire MPs continues. There are only two visits outstanding Treasury policy will be reviewed based on current level of reserves and a revised policy will be approved by FA in Feb 2018 	22	17	↓


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Quadrant Four - Risk


Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
	<ul style="list-style-type: none"> Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified. Preparation of systems (e.g. TVFCS ICCS) being completed with national programme funding already secured 	<ul style="list-style-type: none"> On-going connection with Police, regional FRS's and SCAS through range of forums (ESMCP, SEORRG, TV Collaboration and Partnership etc.). Intent to undertake ESMCP regional collaboration event with Police Programme and SE Region - spring 2018. Work continues within TVFCS and in conjunction with BIS. No concerns over progress at last project board 			
Management of Assets (Risk: 427) Risk Owner: Deputy Chief Fire Officer Inherent Score: 21					
<p>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.</p>	<ul style="list-style-type: none"> Introduce and maintain asset management system within Facilities. Finance to review policy and methodology for the disposal of assets. ICT to review and capture current asset management process ensuring any disposal arrangements align with organisational policy Introduction of the use of Tranman to provide a fully automated process for the management of operational assets. Business Case to be brought forward for asset management approach across the directorates. For assets in ICT, facilities and operations (fleet and equipment). 	<ul style="list-style-type: none"> Business case to be developed in conjunction with ICT to establish an effective solution for asset management. Assumption is that systems suitable for different elements of business and associated requirements will be adopted. review will be carried out during Dec vFire demonstrations promising, costs minimal to implement - business case being built currently. Subject to business case for overall asset management approach. HoS for Facilities and assets and ICT coming together during Feb 2018 to create business case for consideration by SLT by 6th March 2018. 	18	18	↔

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
Collaboration, partnership working & shared service (Risk: 410) Risk Owner: Assistant Chief Fire Officer					
Inherent Score: 22					
<p>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</p>	<ul style="list-style-type: none"> • Actively drive and engage with the Thames Valley strategic collaboration board • Ensure adequate resources to ensure delivery of the collaboration programme • Ensure effective political engagement and active communications with Fire Authority and elsewhere • Develop and maintain relationships with partner agencies and other emergency services • Ensure horizon scanning workshops to identify opportunities for collaboration • Utilise staff engagement forums to embed collaborative culture • Ensure internal processes meet the legal test for considering and evaluating collaboration opportunities • Meet with TV partners when developing changes • Need to ensure PIDs show resourcing requirements to deliver project deliverables 	<ul style="list-style-type: none"> • Governance arrangements now in place to lead and oversee collaborative projects. Development of collaboration document including terms of reference for sign off in March 2018 • Three leads to ensure PID's and project plans have considered adequate funding and resources to deliver. Steering group meeting on 21st Jan • Engage with FA Lead member for Collaboration and at JCC. Member task and finish group set up with TOR and meeting schedule. • Ensure regular planned meetings and through OPE • Included and embedded in strategic planning processes • Consider utilising middle managers leadership programme and cadre of trained personnel • Business cases and committee papers include sections on alignment with duty to collaborate • meetings have taken place and are planned as work continues • Difficulty in creating capacity across the 3 organisations 	20	20	

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
Emerging risks and implications of Grenfell Tower (Risk: 408) Risk Owner: Assistant Chief Fire Officer					
Inherent Score: 24					
<p>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</p>	<ul style="list-style-type: none"> • Ensure effective political, community and partner engagement processes are in place to ensure integrated delivery of service • Ensure current policies are revised, updated and integrated across function to include the implications of the impacts and burdens • Ensure adequate people and financial resources within the community safety functions including proactively managing succession to mitigate any emerging risk • Ensure development programmes are re-aligned to include the appropriate new skills and knowledge to meet any new demands for staff • Ensure staffing models are flexible and agile enough to deal with a rapidly changing landscape • Ensure new work is embedded in service plans and any new performance measures are developed and reported on • 4 phase plan developed incorporating multiagency working/ • Additional resources to be put in place with additional funding provided • Ensure project plan defines timelines for integration of SD resources into hubs to avoid silo working and specialisms 	<ul style="list-style-type: none"> • Detailed conversations now taking place with the 6 unitary authorities to plan in the multi-agency inspections of high-rise buildings. Regular senior level liaison taking place. RBFRS attending formal meetings in unitary authorities when required. • PID developed to deliver new ways of working, re-energise and add more resource to assist with capacity, capability and resilience. • Ten new members of staff recruited into the Protection function. Development of these new team members planned and they are due to start in the next few months. • This will form part of the Succession Planning, Developing New Skills and Creating Capacity project. PID now developed. • New service plan created and PIDs now developed. • Detail of plan incorporated in PID. Project Support Officer working with the 6 unitary authorities to coordinate the multi-agency working. • Additional resources in place. RBFRS is better placed to deal with the emerging risks. PID contains detail of plan of work and resource needs. A service delivery team are being managed by the policy directorate. The 4 stage plan must support integration of resources into hubs (Target Sept 2018) 	21	18	

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
Pension Liabilities (Risk: 413) Risk Owner: Chief Fire Officer Inherent Score: 21					
<p>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</p>	<ul style="list-style-type: none"> Regular contract meetings with Pension Administrator - Conor and Becci Pension Board to provide scrutiny on behalf of the Scheme Administrator (Fire Authority) Participate in regional pension meetings to share understanding, seek guidance including from the LGA Advisor Build resilience by sharing understanding and learning within the HR department Maintain records on actions taken for reference and clarity Audit pension related pay matters to ensure adequate pension pay records are maintained and relevant actions taken e.g. transition to 2015 scheme Attend fire sector pension related events to ensure kept abreast of changes and can make relevant enquiries of the pensions administrator Seek legal advice on emerging issues as appropriate to ensure actions taken are within parameters and are escalated to Fire Authority as appropriate 	<ul style="list-style-type: none"> BAU with regular meetings scheduled throughout year and correspondence regarding emerging issues and changes in regulations. Performance reports provided monthly. Discussions on complex matters undertaken to ensure all parties clear Pension Board have received training, meetings examine arising matters and risk assessment maintained by Pension Board. Further training & input via LGA Oct 2017. pension Tax training available, developments considered by Board accordingly Attendance at regional meetings and other training as appropriate. Most recently pension tax training Action taken to build knowledge in department and with other FRSS - regional meetings attended by more than one HR rep and individual on PB also building knowledge is an HR rep BAU for RBFRS records. Discussion with Pension Administrator about link between pay and pension records. Audit of matching membership numbers undertaken quarterly. Discussion Contract meeting 20/12 re: GMP reconciliation - due Dec 18 Ongoing monthly check with specific attention given to known issues. Audit scope agreed as acceptable based on previous audit requirements 	18	18	

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
		<ul style="list-style-type: none"> Event attendance as appropriate. Most recent was pension tax training. Advice sought on 30/08/17 on identified issue - approach/impacts to be shared with SLT/ Pension Board as appropriate. Awaited. Other items such as VSP - MO involvement and legal advice sought 			
Firefighter Safety (Risk: 417) Risk Owner: Deputy Chief Fire Officer					
Inherent Score: 25					
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.	<ul style="list-style-type: none"> Training Strategy and maintenance of competence and standards for all operational staff. Review policies, procedures and processes. Align to national operational guidance (NOG). In the interim, address any urgent issues. Safety Critical Training is delivered from Training centre based on The fire professional Framework core skills and assessed on appropriate frequencies Deliver training aligned to National standards and monitor and address shortfalls in maintenance of competence RDS Project Board established overseeing all RDS improvement and reporting to Programme Board Review and streamlining of operational competency framework to simplify and focus on critical areas for firefighter safety Development of operational learning and assurance systems that encourage and improve development of staff 	<ul style="list-style-type: none"> In qualification status reviewed via ODPLG and SPB, MOC programme under review with additional resource identified. L&D work with TV FRSs SM appointment to SM posts will support capacity Operational alignment PID taken to Thames Valley FRS Collaboration Board. AM seconded to TV operational alignment work to progress project. Business as usual activity. Performance monitored via ODPLG, SPB, and discussion with SD regarding requirements undertaken as appropriate relating to need. Qualification framework agreed, developing core skills and training programme. Core operational qualifications agreed. Work on TRI for MOC ongoing with TV partners, capacity impacting progress. MOC resources will assist Barrier period trial underway to be evaluated over six months. Recruitment plan being delivered with 5 applicants already this year (2018). Since Lambourn 	22	22	

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
	<ul style="list-style-type: none"> Development and implementation of post incident operational debriefing process. Additional external resources commissioned to review operational assurance model and develop gap analysis and action plan. 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&R and maintenance of standards. To be led by DCFO and AM SD 	<p>trial and implementation of recruitment project numbers are higher than in the last 4 years.</p> <ul style="list-style-type: none"> Project underway to review operational competencies required aligned to FPF. TRI tool discussions held and development of tool however further work required. Capacity impacting progress to date but additional resources identified OPAS to develop. Part of operational assurance review. To be progressed in Q1 of 2018/19 First draft review from external contractor. Unable to complete work and this has been taken back into the organisation for completion. CLOSED Initial station visits start 8th March 2018. Two WM Seminars briefed during Feb 2018. Work instigated revise policies for service exercises, operational assurance, debriefing and learning). 			
Capacity, Capability and resilience (Risk: 422) Risk Owner: Director of Support Services					
Inherent Score: 21					
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	<ul style="list-style-type: none"> Revise the RBFRS people strategy, taking in feedback from the recent peer review and National CFA people strategy strengthen workforce planning information to cover all staff and regularly review as part of performance monitoring Implement middle managers development programme in collaboration with TV partners 	<ul style="list-style-type: none"> SLT agreed the revised people strategy objectives, which align to the NFCC people strategy. Further work required to develop the detailed action plan. Workforce planning data prepared. Workforce Planning Board to review regularly against other work projects affecting staffing, EDI data obtained to support EDI forum and objectives of group Middle Manager development programme now has three cohorts running including staff from OFRS and 	21	18	↓

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
workforce reform programme and vision 2019, then we can expect to fail to deliver against our statutory requirements and broader organisational development objectives	<ul style="list-style-type: none"> • Develop options and implement a process for two tier entry for operational staff • Increase flexibility of recruitment policies to enable RBFRS to attract and retain the best staff • Establish a review programme of training needs and methods of training delivery to ensure RBFRS develop the skills needed • Review reward and recognition arrangements for all staff 	<p>Bucks FRS 3 more cohorts are due to start from March initial feedback from attendees and trainer are positive</p> <ul style="list-style-type: none"> • SLT committed to exploring two tier. Updates from other FRSs sought. Prioritisation of activities to be considered in line with People Strategy. Feasibility project to commence January with report to 20 Feb SLT meeting • Recruitment PID drafted to be considered in line with People Strategy and at Programme Board. Work streams will be across a number of areas including EDI • Training requirements reviewed with Service Delivery & informed through TCR & other project requirements. ODPLG review performance re: Qualifications. MOC project underway - slow due to other priorities and temporary staff • To be considered in line with development of People Strategy and recruitment project • 			
Operational Availability, Crewing and Capabilities (Risk: 419) Risk Owner: Deputy Chief Fire Officer					
Inherent Score: 21					
If we fail to maintain appropriate numbers of personnel and associated skills and knowledge requirements, in line with our planned establishment and current or future demands, then we can	<ul style="list-style-type: none"> • Proactive targeted recruitment and retention campaigns • Improved RDS management support through new Hub arrangements. • Improvement in WDS management accountability at station and Hub level. 	<ul style="list-style-type: none"> • Links to RDS project board. New recruitment materials now available. Have a go dates linked to NFST test dates. Events on new website. Increase in recruitment numbers compared to previous years. • RDS leads sit on project board and working with R&D to support recruitment events. Also involved in work to 	16	14	↓



Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
<p>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"> • RDS Project to create sustained recruitment and retention and deliver increased availability across all RDS stations. • Review of current WDS establishment and forecast requirements at all levels. • Development in flexibility FDO roles to better meet the managerial and operational needs of the Service. • Undertake necessary promotion and recruitment campaigns to meet establishment needs in short and medium term. • Creating long term resilience in future capability needs in response to developing and new demands and expectation of the Service (protection, prevention and response). • Create a pan organisational workforce planning group to provide oversight and governance to enable identification of key strategic needs and issues relating to operational crewing/succession 	<p>look at ways to maximise availability - OIC/driver, BA1/driver.</p> <ul style="list-style-type: none"> • Action plan to evolve from MC establishment paper and associated SIT report, will look at predetermined extraction levels, leave management etc. Leave policy to be reviewed early 2018. • Barrier period trial underway to be evaluated over six months. Recruitment plan being delivered with 5 applicants this year already. Since the Lambourn trial and initiation of the recruitment project numbers are higher than the previous 4 years. • Forecast maintained by HR (JM) - reviewed at workforce planning board. Transfer process complete. Further recruits to be trained early 2018. Initial SM Process complete. 14 Trainees to be recruited July course. work ongoing • Agreement reached to undertake six-month trial of revised working model proposed by FBU officers group. To be monitored whilst FDO review work progresses • Recruitment process underway. Further SM process and development required. WM process to be planned and considered against IRMP outcomes. • Protection recruitment for new inspectors and SM Process completed in Jan. 18 Consideration for 2018 recruitment/promotion needs will be through workforce planning group. 			

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
		<ul style="list-style-type: none"> SLT approved ToR of Workforce Planning Group 23.1.18. Meetings now planned in with cross-functional and RB membership. 			
ESMCP (Risk: 418) Risk Owner: Deputy Chief Fire Officer					
Inherent Score: 18					
<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</p>	<ul style="list-style-type: none"> Service level project board to oversee RBFRS delivery across national programme work streams and SC partners. Representation on SC Programme Board with funded programme support and appointed staff within each regional work stream group. Representation on national Fire Customer Group by DCFO for SC Region Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified. Preparation of systems (e.g. TVFCS ICCS) being completed with national programme funding already secured Regular reporting to Audit and Governance Committee to ensure transparency in service and national programme progress Detail resource requirements to ensure all work streams are successfully delivered 	<ul style="list-style-type: none"> Project Board reporting to RBFRS Prog Board. SC Programme Boards held every 4-6 weeks aligning work streams and funding across the South Central ESMCP region. Joint working event with Police and SE delayed until spring 2018 due to reset program. Current commitments remain sufficient. Monitoring commitment to work streams in context of expected reset delivery plan from National Programme in summer 2018. Concerns over impacts of extended timelines on costs and resource raised nationally. Continue to attend FCG. Receive updates on national programme progress. Current concerns discussed at FCG - extending timeframes, ownership of additional costs, potential change in approach in when services go live and phased delivery of products. Joint working event planned spring 2018 with Constabulary and regional fire services to explore opportunities for efficiency through joint delivery of any work streams or products. Work continues within TVFCS. Vodafone putting in place DNSP connection. No concerns over progress given National Programme delay. 	14	14	

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
partnership working and our public and political reputation.		<ul style="list-style-type: none"> Update to A&G planned for March 2018. Await reset transition and implementation Plan from the National Programme. Work streams continue to progress where they can making necessary business assumptions. 			
Failure in delivery of ESMCP National Programme (Risk: 425) Risk Owner: Deputy Chief Fire Officer					
Inherent Score: 22					
If the ESMCP National Programme fails to deliver a new Emergency Services Network (ESN) or key component parts of ESN that properly enable FRS mobile communications, then the service risks not having robust mobilisation and communications systems to support operational crews and officers or insufficient time to implement its own replacement systems. This would directly impact delivery of services and consequentially public confidence and reputation.	<ul style="list-style-type: none"> Programme Management structures for SC Region Communication of service and regional concerns through Fire Customer Group and NFCC lead. Gateway review of fire sector approach to ESMCP led by NFCC team. 	<ul style="list-style-type: none"> 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. 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. DCFO attended interview with gateway reviewers in Jan 2018. Report and recommendations expected towards end of March 2018. 	18	18	

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
Fire Service College (Capita) (Risk: 479) Risk Owner: Head of HR and L&D Inherent Score: 13					
If the Fire Service College fails to deliver its services, which may become more likely given the financial health of the parent company (Capita PLC), then we can expect to see a cessation or reduction in the availability of training courses for new firefighters and existing staff (covering a range of areas), which will be significant in relation to our need to develop and maintain a safe and competent workforce.	<ul style="list-style-type: none"> Monitor training needs and bookings with the FSC to ensure courses are to be delivered as planned Identify other providers of training Confirm that the online platform supporting Firefighter recruitment can be supported by the third party in the event the FSC step away from supporting arrangements 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. Reorganise commitments internally as necessary to accommodate any changing circumstances 	<ul style="list-style-type: none"> Reviewed against need. Training Plan for 2018/19 being devised and outsourced training considered Provider options considered in relation to training need, availability and cost. Alternative providers for most training known to organisation Confirmed that the test provider is not the FSC. Provision in system enable the export of data. To be built into recruitment process commencing Feb 2018 Assess requirements as circumstances dictate. Would consider outsource of other training to enable recruit training to be delivered in house if necessary. 	n/a	10	New risk
Ongoing viability of Capita Communications and Control Solutions (Risk: 480) Risk Owner: Head of Business Information Systems Inherent Score: 20					
If Capita Communications and Control Solutions ceases trading, is sold or divested, or stops providing services to RFBRS, which is an increased possibility given Capita Systems recent profit warning, then we can expect software and hardware support for the Vision Mobilisation and control	<ul style="list-style-type: none"> Investigate and cost out alternate support service provider capabilities Monitor corporate and financial health of Capita Communications and Control Solutions Establish BCM plan to specifically cater for Capita insolvency Investigate, cost and recommend alternate mobilisation and control solutions, including transition and control staff training requirements 	New Risk	n/a	20	New risk

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
systems to be disrupted, degraded, or cease altogether, which is significant in respect of our Service delivery response, and Collaboration objectives					
Impact of GDPR Non-compliance (Risk: 481) Risk Owner: Head of Business Information Systems Inherent Score: 18					
If we do not manage the service's compliance to GDPR requirements, which is increasingly likely due to impending legislative enforcement, then we can expect increased likelihood of negative reputational impact and significant financial penalties in the event of a personal data breach.	<ul style="list-style-type: none"> Complete Personal Data Information Mapping with each functional department Complete Risk Assessment and action plan prioritisation for each personal data map Central Policy updates to reflect GDPR 	<ul style="list-style-type: none"> Most departments have completed at least one pass of identifying personal data that they are responsible for. 10 groups have completed the mapping process. A further 16 are in progress. 4 have been risk assessed, 6 are due for risk assessment w/c 5th March. Once assessed, DPO review will precede HoS Action Plan meetings. In-scope policies have been identified and 1 update is in final draft. 	n/a	18	New risk
Management of Corporate Data, Information and Knowledge (Risk: 482) Risk Owner: Head of Business Information Systems Inherent Score: 18					
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	<ul style="list-style-type: none"> Review, revise and implement a set of processes to manage corporate information coming into RBFRS from external agencies Create a process designed to ensure that Information asset ownership is kept up to date 	<ul style="list-style-type: none"> Data Sharing agreements under ad-hoc review. No real progress in formalising a framework for information dissemination due to pressure of other work Review of information asses ownership occurs on trigger events, but no real progress made in defining the process to automatically keep this up to date going forward 	n/a	18	New risk

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
significant change in organisational structure and personnel, then we can expect mishandling and loss of critical information as well as reduced efficiency in getting the right information to the right individuals for the right action to be taken, which is significant in respect to achieving all of our strategic objectives	<ul style="list-style-type: none"> Create a data classification framework to ensure that appropriate departments and individuals are sighted on the data classes their role(s) demand) 	<ul style="list-style-type: none"> New treatment 			
Data reliability, validity and analysis (Risk: 483) Risk Owner: Director of Support Services Inherent Score: 21					
If we fail to maintain reliable systems and accurate data that supports effective and timely analysis and continuing improvement of knowledge about our activities and their impacts, then we will not be able to make informed, evidence based decisions, manage and improve performance of services, report effectively on this performance to the Fire Authority and the public and respond to audit needs - such as HMICFRS. This would	<ul style="list-style-type: none"> Commission work to scope longer-term data resolution and development. Maintain capacity within the data and performance team to deal with all organisational intelligence requirements Develop skills and capabilities of data and performance team to enhance analytical capability of the organisation. Ensure close liaison and effective working relationships with BIS to ensure data assurance and reporting methodology, as well as ensuring D&P team have access to data required to perform role, and SQL reporting controls Ensure clear, documented and agreed definitions of performance measures, starting with corporate measures 	<ul style="list-style-type: none"> A shared Cadcorp post has been appointed. Data sharing agreement between the three services is now in place. Governance for project being established. DPAM role now filled until December 2018. 0.5FTE g4 post vacant. Short-term (agency) data input support for HFSC to free up capacity for data integrity work and support for HMICFRS. Training requirement submitted for 2018/19 with some flexibility for developing requirements. Objective setting to follow service plan sign off. Ongoing identification of training needs. To start from March/April as part of data integrity work 	n/a	21	New risk

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Quadrant Four - Risk

Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
substantially undermine our financial and resource efficiency, operational effectiveness and our political and public reputation.	<ul style="list-style-type: none"> • Ensure accuracy of reporting systems and processes, ensure smooth scorecard retirement • Improve data entry processes across the organisation to ensure data integrity • Developing performance department to actively support other teams in using performance management tools, data and information and knowledge to define delivery plans • Ensure performance management framework and processes are aligned to HMICFRS requirements, where this is appropriate and helpful. 	<ul style="list-style-type: none"> • Significant progress made as part of development of 18/19 Corporate measures. Work to finalise and continue to communicate into Q1 of 2018/19 • Audit and verification of feeds ongoing. • Some progress in individual areas so far e.g. HFSC processes. Further, more systematic work to be picked up using BPI resources, and to tie into Service Delivery work. • New team manager is developing relationships and communication channels with hub managers. In Q1, to develop more systematic approach to providing advice and support. • To assess when further details about HMICFRS data requirement emerge. 			
Response to Home Office Reform Programme (Risk: 484) Risk Owner: Director of Support Services					
Inherent Score: 21					
If RBFRS fails to meet the expectations of the Home Office Fire Reform Programme and fails to deliver against the revised national framework as monitored by the HMICFRS Inspection Programme, which may become increasingly likely given absence of clarity on the details of the inspection programme, then we can expect	<ul style="list-style-type: none"> • 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. • Ensure that the new People Strategy is aligned to the people element of the National Framework and HMICFRS methodology. • Engagement with HMICFRS through NFCC, national and regional consultations and events, to ensure ability to plan against emerging programme. 	<ul style="list-style-type: none"> • Gap analysis assessment underway against HMICFRS diagnostic set. Owners for each diagnostic and sub diagnostic being identified as a first step. • People Strategy is due for sign off at 06/03 SLT. Brings together elements of work already underway (EDI, Mental Health) with new areas. Action plans for six overarching objectives to be developed. • Responses to HMICFRS and National Framework consultations have been submitted. Attended events in Durham, London and Hants, and due to meet one of 	n/a	18	New risk



Risk	Key Controls and Mitigations	Risk Movement	Q2 Risk Score	Current Risk Score	Direction of Travel
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.	<ul style="list-style-type: none"> • Ensure that we have adequate resource to manage and direct the preparation for and process of the inspection. • Ensure that we have adequate capacity across the organisation to meet the practical requirements of the HMICFRS Inspection. • Identify stakeholder and develop a communication plan to ensure all stakeholders are fully informed in relation to the Inspection Programme plans and RBFRS preparation. 	<p>the pilot FRS in March. Initial visit from Service Liaison Lead planned for late March.</p> <ul style="list-style-type: none"> • Project group has been set up to manage the HMICFRS planning and prep. The group has wide membership from across Corp Services to ensure resilience and a broad skill set. • A standard service plan objective for HMICFRS involvement has been developed and agreed for use across the organisation for 2018/19. • A communication plan for staff and FA members is one of the first elements the project team will be putting in place. 			

Accident Investigations

Measure	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2017/18 Y.T.D.
Accidents Requiring Investigation	11	10	8		29
*Accident Reports Completed	11	9	7		27
**Recommendations not acknowledged / accepted	0	0	0		0

Q2: Of the ten incidents requiring investigation in Q2, one incident report (17/23312) is still to be produced. The AI will have this completed by COB 25th January.
 Q3: Of the 8 investigations requiring investigation in Q3 7 have been received, incident 34898 occurred on the 22nd December and is currently being investigated and within the allocated time frame.

The current process for completing investigations within the lengthy two-month period is not working well. Hub Manager level have been utilised to add pressure on the Accident Investigators to ensure completion as per policy. Further considerations to improve the investigation process is being considered by the Head of Service.

In Summary for Q3:

Total Injury Incidents = 7 of which 4 require investigating

Total Near Miss Incidents = 10 of which 4 require investigating

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

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

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

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

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

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

Audit Recommendations

The audits shown have been undertaken and recommendations agreed. The information provides a progress on those open recommendations as of 01/02/2018

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open/ Closed	Date of Audit	Allocated to
Cyber Security (or Cyber Risk Management)	Management should look to eradicate all weak passwords which are currently in use.	15/12/2017	-	Medium	There are still a small number of weak passwords in use for the watch logins. A policy is to be agreed for the management of shared station/watch mailboxes, which is in development	A	Open	06-Dec-17	Head of Business and Information Systems (HBIS)
Cyber Security (or Cyber Risk Management)	Management should look to replace VNC with an alternative remote desktop application such as TeamViewer.	28/02/2018	-	Low	Currently exploring options for replacement of VNC in order to generate a cost/risk/benefit analysis.	G	Open	06-Dec-17	Head of Business and Information Systems (HBIS)
Cyber Security (or Cyber Risk Management)	Management should enable a local firewall on all local devices to prevent incoming cyber-attacks.	31/01/2018	-	Medium	We are testing a group policy to apply the Windows firewall to client machines. There is significant effort required before it will be possible to enable firewalls on servers, as this is likely to have a major impact.	G	Open	06-Dec-17	Head of Business and Information Systems (HBIS)

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Quadrant Four - Risk

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open/ Closed	Date of Audit	Allocated to
Cyber Security (or Cyber Risk Management)	Management should follow a reputable guide for their security logs. Furthermore, the CIS security guide also provides a great way to harden the workstations.	31/03/2018	-	Low	Exploring options to purchase additional log management software to satisfy this recommendation.	G	Open	06-Dec-17	Head of Business and Information Systems (HBIS)
Cyber Security (or Cyber Risk Management)	Management should restrict the internet permissions for the administrator accounts to reduce the risk of attack surface.	28/02/2018	-	Medium	Exploring options for indicated restrictions, including a comprehensive review of working practices	G	Open	06-Dec-17	Head of Business and Information Systems (HBIS)
Cyber Security (or Cyber Risk Management)	Management should prevent regular users from being able to run executable programs from media to which they also have write access to.	31/01/2018	-	High	Mitigation in progress, but complexity is an issue (a blanket policy change will render most applications on RBFRS desktops unusable). A combination of antivirus applications, email filtering services and user permissions will prevent the majority of rogue executables from impacting RBFRS devices.	G	Open	06-Dec-17	Head of Business and Information Systems (HBIS)

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open/ Closed	Date of Audit	Allocated to
Cyber Security (or Cyber Risk Management)	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	-	Medium	In progress. Software asset management tool is in active use and a software inventory is being built.	G	Open	06-Dec-17	Head of Business and Information Systems (HBIS)
Cyber Security (or Cyber Risk Management)	Management should remove all legacy software from their computers as the manufacturers no longer release security patches for them.	31/03/2017	-	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.	G	Open	06-Dec-17	Head of Business and Information Systems (HBIS)

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open/ Closed	Date of Audit	Allocated to
Procurement Advisory Review	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.	31/03/2018	-	n/a	This is already set out in the Contract Regulations and will be supplemented by a new contract management guidance document. This will be supported with the new contract management training course planned to start in April 2018 as set out in 2.4 of this report. The new course will form part of the Core Skills continuing development programme. The course will be designed to ensure the contract is managed according to risk, cost and criticality to the service as well as supplier development. In addition, quarterly financial health checks and annual checks on insurance and compliance with other standards is already carried out. UPDATE Jan 18 - The new course is currently being drafted and will be signed off ready for use in late February 2018.	G	Open	07-Dec-17	Procurement Manager

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open/ Closed	Date of Audit	Allocated to
Procurement Advisory Review	Recommend that RBFRS consider 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.	30/04/2018	-	n/a	The new course is currently being drafted and will be signed off ready for use in late February 2018.	G	Open	07-Dec-17	Procurement Manager
Procurement Advisory Review	Recommends RBFRS considers investing in contract management software which may serve as a repository of documents alongside providing other information such as key trigger dates within contracts.	31/12/2018	-	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.	G	Open	07-Dec-17	Procurement Manager
Procurement Advisory Review	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	-	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	G	Open	07-Dec-17	Procurement Manager

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open/ Closed	Date of Audit	Allocated to
Procurement Advisory Review	Recommends that RBFRS ensures that the post-award contract management responsibilities are agreed at the outset. This should include what protocols are to be followed should one or more of the parties has a change in strategy that requires a change to the contract or exit prior to contract completion.	31/03/2018	.	n/a	This is set out in the Contract Regulations and there is a documented process to deal with any contract variation and approval. This will also be added to the internal contract management guidance and training. UPDATE Jan 18 - To be included in the new Contract Management Guidance to be completed for sign off end of February 18	G	Open	07-Dec-17	Procurement Manager

Audit Recommendations Closed during Q3

Audit title	Audit Action	Date by	Revised completion Date	Priority	Progress	Date of Audit Report	Allocated to
Key Financial Controls	Management will look into creating a report for the receipt dates of opened and closed purchase orders. All goods receipted on SAGE 1000 will have an invoice attached on the system, to confirm amount receipted and the invoice that is to be paid.	Apr-17	Nov-17	Low	Report with receipt dates has now been created. Work on linking receipt date to invoice is ongoing. UPDATE OCTOBER 17 - Progress has been made and will be completed in November 2017	17-Mar-17	Exchequer and systems manager
Key Financial Controls	Management will look into creating a report for the receipt dates of opened and closed purchase orders. All goods receipted on SAGE 1000 will have an invoice attached on the system, to confirm amount receipted and the invoice that is to be paid.	Apr-17	Nov-17	Low	Report with receipt dates has now been created. Work on linking receipt date to invoice is ongoing. UPDATE OCTOBER 17 - Progress has been made and will be completed in November 2017 UPDATE JAN 18 - Report showing receipt dates was created in August 2017. Additional work to enhance this has been ongoing since, adding in further detail to show the value of what has been receipted and the actual invoices paid, and this has been completed in January 2018.	17-Mar-17	Exchequer and systems manager
Risk Management & Governance	A defined remit will be put into place highlighting the purpose of the Development Task and Finish Group, this should include minimum meeting requirements	31/12/2017		Low	The Member Development Task and Finish Group approved their Terms of Reference on 13 November 2017. A Member Development annual report will be submitted to A&GC on 26 March, which will append their Terms of Reference.	08-Nov-17	Democratic Services Officer

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Quadrant Four - Risk

Audit title	Audit Action	Date by	Revised completion Date	Priority	Progress	Date of Audit Report	Allocated to
Risk Management & Governance	Management will ensure the risk register database script producing the risk register excel documents is updated to enable the treatment assurance level to be included in the final registers.	Nov-17		Low	complete - now contained within report	08-Nov-17	Planning and Performance Officer
Risk Management and Governance	Management will ensure that all risk owners are reminded of the need to regularly assess the risk treatments and owners, but in particular during periods of known staff change.	Nov-17		Low	The risk register is presented on a fortnightly basis to SLT. The annual service planning also incorporates identifying and reviewing risks.	08-Nov-17	Planning and Performance Officer
Risk Management and Governance	Should the proposed format be accepted (For quarterly report), management will amend the new corporate risk register summary - the previous risk score, as well as new risk score, a visual reference to whether the movement is positive or negative, the document changed to landscape format, the columns will be rearranged in the following order 1) risk, 2) Key controls and Mitigations, 3) risk movement.	Nov-17		Low	Draft proposed format was presented to SLT and Cllr McCracken in December. Following feedback the format will be reviewed and a further proposal will be presented to SLT in Feb 18.	08-Nov-17	Planning and Performance Officer

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Quadrant Four - Risk

Audit title	Audit Action	Date by	Revised completion Date	Priority	Progress	Date of Audit Report	Allocated to
Risk Management and Governance	Management will ensure the risk database is updated to include a quick link to the Risk Management Database - Quick Guide, in the same way the current risk Management Policy is available.	Nov-17		Low	Complete - there is now an icon, which contains a link to the risk register quick guide on the database.	08-Nov-17	Planning and Performance Officer
Cyber Security (or Cyber Risk)	A policy should be developed that states that unneeded firewall rules should get decommissioned	31/01/2018		Medium	Closed. Firewall rules are now reviewed on a monthly basis to confirm whether there are any that are no longer required	06-Dec-17	Head of Business and Information Systems (HBIS)
Cyber Security (or Cyber Risk)	Management should disable AutoPlay on both domains to protect from running malicious code automatically from removable devices.	08/12/2017		Low	Closed. Group policy implemented	06-Dec-17	Head of Business and Information Systems (HBIS)
Cyber Security (or Cyber Risk)	Management should upgrade the storage capacity of their back up servers.	01/12/2017		High	this has been completed	06-Dec-17	Head of Business and Information Systems (HBIS)
Cyber Security (or Cyber Risk)	Management should create a policy that states that special privilege accounts need to be reviewed regularly to control which users have special rights.	31/01/2018		Medium	Closed. All privileged accounts have been set to expire after 3 months, which will force a review process to be completed.	06-Dec-17	Head of Business and Information Systems (HBIS)

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Quadrant Four - Risk

Audit title	Audit Action	Date by	Revised completion Date	Priority	Progress	Date of Audit Report	Allocated to
Cyber Security (or Cyber Risk)	Management should configure the anti-virus to run scans at least daily to prevent malware staying on devices.	03/11/2017		Medium	Closed. Trend desktop antivirus set to scan daily, with automatic signature file updates.	06-Dec-17	Head of Business and Information Systems (HBIS)
Cyber Security (or Cyber Risk)	Management should control the application patches to ensure that they are all updated within 14 days of release.	04/12/2017		Medium	this has been completed	06-Dec-17	Head of Business and Information Systems (HBIS)

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 year 2 of the action plan and reflects the period October to December 2017.

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.	A
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.	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).	G
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.	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 still being adjusted to improve the services supplied by ICT. Out of hours (duty comms) SLA is still to be reviewed & an up to date agreed SLA implemented.	G

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Task	Progress	RAG
ICT work plan of BAU activities and prioritised development implemented	Annual work plan agreed and currently on schedule.	G
Applications portfolio (a list of all our systems) will be realigned to remove unnecessary applications	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.	G
Flexible working framework is developed to support new ways of working as part of the OD programme	This will be picked up later in 17/18.	
ITIL best practice standards in place embedded across whole of ICT	The 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. 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.	G
Timelines for re-tendering, aligned to joint and shared tender opportunities	Enhanced working practices in conjunction with procurement, has led to several migrations of contracts to framework suppliers and increase focus on lifecycle contract management has been brought to bear by the new HBIS. 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.	G
A corporate content management solution is in place	Intranet based content management system in place Yr 1 Q4. Some further work required to ensure document control works effectively for information with high-risk implications. Continuing to work with service providers to remediate document control issues, however progress continues to be slow.	A

Appendix B: Update on Progress of the Fleet Strategy

Richard Battley, Temporary Head of Facilities and Assets. This Fleet Strategy is intended to design and embed a reliable, resilient Fleet and Equipment Department, which will enable the implementation and ongoing delivery of the Strategic Commitments and Vision 2019. This is a high level update for items agreed as part of year 1 of the action plan and reflects the period October to December 2017.

Task	Progress	RAG
Fleet and Engineering Management structure designed to meet future needs Fleet Strategy and principles agreed and Partnership with HFRS implemented	The department has gone through some changes, with the removal of some posts. These have been held vacant to facilitate the transition to a new structure with the Partnership with Hampshire. This has created some capacity issues, which have been addressed with temporary staff in some roles. The Partnership is in the final stages with an interim Fleet Manager in post.	G
Agree 4 year Main Pumping Appliance renewal plan - Commence Procurement exercise with TVFRS's	Delivery of the next three main fire appliances is now planned for mid June with all three vehicles being fully on the run by the end of August. The original delivery prediction was a forecast made with the delivery of the first new appliances last year. The builder of the appliances (Emergency One) has since been impacted by availability of vehicle chassis from Volvo. These are now resolved and confidence levels are high with the current delivery timeline. Other aspects such as equipment provision and training of drivers are all planned in to meet the revised timelines.	A
Review Equipment notes and technical information and create appropriate reference database	Equipment notes have been reviewed and redacted where possible to reduce the number of unnecessary documents. A separate access folder has been created in Siren. Further work is reducing and scanning documents to the electronic folders.	G
Fleet Investment plan is created to align to medium term financial plan - Fleet and Equipment Asset Management plans established	A revised equipment investment plan has allowed capital provision to be made in the strategic assets investment framework. This has been facilitated by the development of a 4 and 5-year replacement schedule for all large equipment items. This will allow better programming of replacement and budget management in the future. Asset management tracking through Firewatch and Tranman is being developed. Our Asset register has been brought up to date, identifying each vehicle, location, age, annual mileage and book value.	G
Agree replacement programme for Special Appliances	The replacement of the ALP and refurbishment of the ICU are both commenced, with a project reviewing the feasibility of a multi-use approach.	G

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Appendices

Determine multi-use vehicles requirements, available to provide off road access, flexible and effective back-up vehicles	The redeployment of vehicles and removal of under-used vehicles at stations and team bases has seen a reduction in the White fleet. Since the start of this exercise there has been disposal of 21 white fleet vehicles to auction. Redeployment of some vehicles has ensured more efficient and effective use at station and team level. The Pool fleet has been enhanced by these redeployments and the purchase of 4 new pool fleet cars. Scoping work to review operational support capability and potentially replacing the current Operational Support Unit (OSU) with a pod system has begun and is planned to continue in 2018/19.	A
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Appendix C: Information Governance Report (October 2017 to December 2017)

Information Governance Report (October to December 2017)

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

Information Requests...	Oct 2017	Nov 2017	Dec 2017	Total
New Information Requests Received	11	10	9	30
Total Information Requests Actioned	24	18	18	60
IGT - Hours Spent on Information Requests	34 ½	22	20	76 ½
Others - Hours Spent on Information Requests	10	12 ½	6 ¼	28 ¾
Timeframes not met (figures relate to request due date)	1	0	0	1
Internal Reviews (figures relate to request due date)	0	0	0	0
Complaints made to the Information Commissioner's Office (ICO)	0	0	0	0

Incident Reports

Incident Reports...	Oct 2017	Nov 2017	Dec 2017	Total
New IRS/FI requests received this month	19	13	13	45
IRS/FI requests confirmed (includes not charged for)	9	5	2	16
Total IRS/FI requests actioned (incl. still in progress)	31	16	15	62
Income from requests	£1086.00	£396.00	£0.00	£1482.00
Figure in brackets - total ££ so far this year	(£2559.00)	(£2955.00)	(£2955.00)	(£2955.00)

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

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

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

Appendix D: Service Provision Measure Definitions

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

ID	Service Provision Measure	Definition
Protection		
8	Total Number of Full Fire Safety Audits carried out	This is the total number of full fire safety audits carried out in commercial premises in Berkshire. This is calculated once the service has been closed by RBFRS and only includes the initial full fire safety audit. A Fire Safety Audit is carried out to enforce the Regulatory Reform Order (RRO) 2005, which applies to virtually all non-domestic premises and covers nearly every type of building, structure and open space.
9	Total number of audits and follow-up visits carried out	This reflects the amount of activity and follow up visits which may be required around premises, including and following the initial full fire safety audit.
10	% of audits where the results were satisfactory	This is the percentage of closed fire safety of audits carried out in commercial premises, where the result was satisfactory and no further action was required.
11	% of audits requiring informal activity	This is the percentage of closed fire safety audits carried out which resulted in informal activity. This includes a Deficiency Notice, with or without follow-up or informal education.
12	% of audits requiring formal activity	This is the percentage of closed fire safety audits carried out which result in formal activity. This includes premises requiring an Enforcement Notice, Prohibition Notice, Alterations Notice, or Prosecution Notice.
13	% success rate when cases go to court for non-compliance with the Regulatory Reform Order 2005	This is the percentage of successful prosecutions following fire safety audits on premises not complying with the Regulatory Reform Order 2005.
Response		
14	% of occasions where the first fire engine arrives at an emergency incident within 10 minutes, from time the emergency call was answered	This measure looks at the time taken from when the Fire Control Room Operator answers the phone until the time the first fire engine (appliance) arrives at the scene of the emergency incident, and on how many occasions RBFRS does this in under 10 minutes.
15	% of full shifts where there is adequate crewing on all 'wholetime' frontline fire engines	This is the percentage of shifts (day or night) where there is sufficient minimum qualified fire fighters on all wholetime pumping appliances (fire engines). A wholetime frontline pumping appliance is available 24/7, 365 days a year.
16	% of hours where there is adequate crewing on 'retained' frontline fire engines (based on 24/7 crewing)	This is the percentage of hours where there is sufficient minimum qualified fire fighters on retained pumping appliances (fire engines). Retained frontline pumping appliances are crewed mainly by on-call fire fighters who are based at stations in more rural locations, and

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

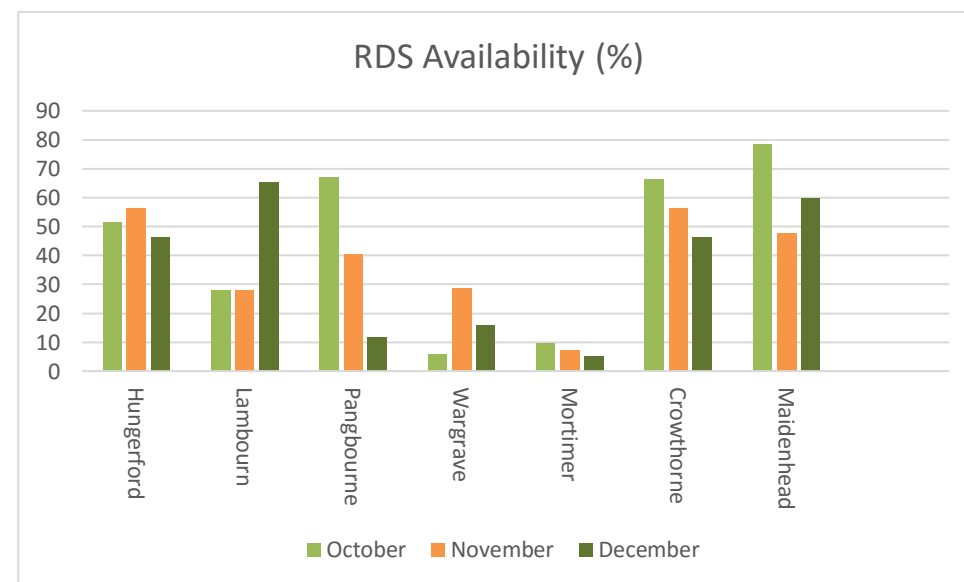
Appendix E: Corporate Health Measure Definitions

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

Appendix F: RDS Establishment and Availability

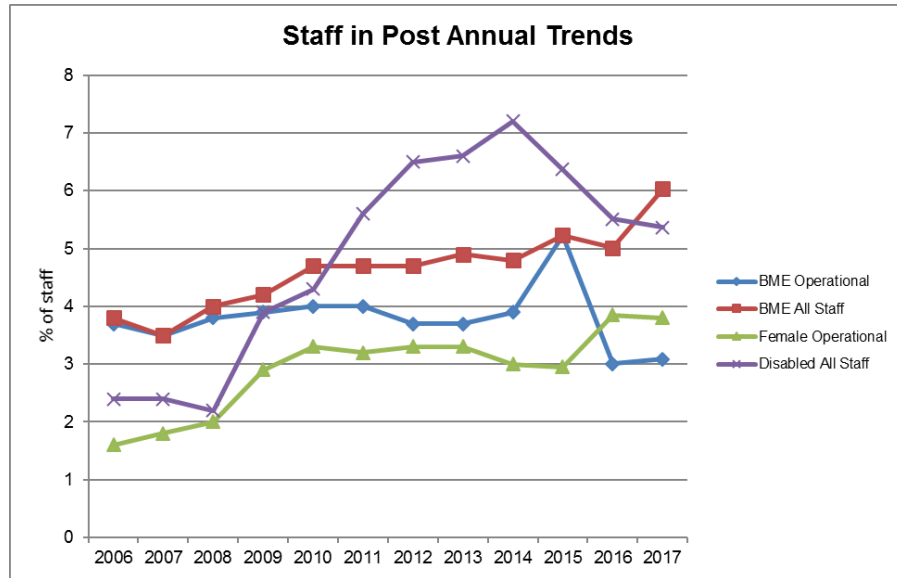
The planned establishment for each RDS station against the actual number of RDS employees.

	Staff in Post	FTE	Establishment	SIP v Est	FTE v Est
05 Hungerford	8	3.59	13	61.54%	27.60%
06 Lambourn	10	4.28	13	76.92%	32.95%
07 Pangbourne	10	5.36	13	76.92%	41.26%
09 Wargrave	9	3.71	13	69.23%	28.50%
11 Mortimer	5	2.79	13	38.46%	21.48%
15 Crowthorne	13	6.99	13	100.00%	53.78%
19 Maidenhead	15	5.99	13	115.38%	46.05%
Total	70	32.71	91	76.92%	35.94%



Appendix G: HR Supporting Charts

(Source: Data calculated and supplied by HR)

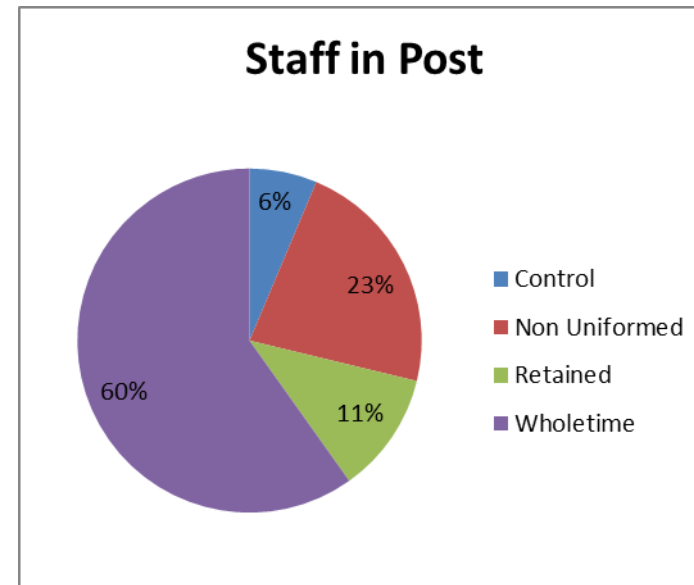


Quarter 3 – 2017/18

Percentage of BME operational 3.09%

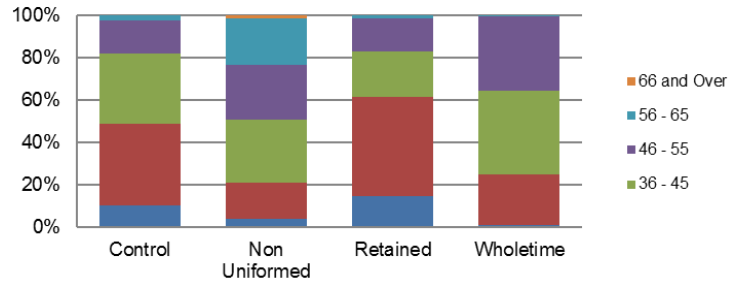
Percentage of BME all Staff 6.02%

Percentage of female Firefighters 3.88%



Staff Age Profile

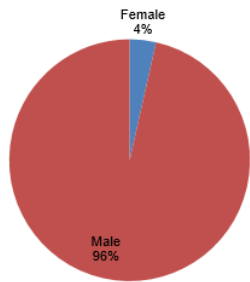
Age Profile of Workforce



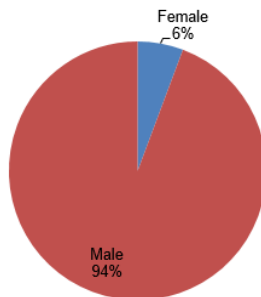
Age Group	Wholetime	Retained	Control	Non Uniformed	Grand Total
25 and Under	3	10	4	5	22
26 - 35	88	33	15	24	160
36 - 45	145	15	13	41	214
46 - 55	131	11	6	36	184
56 - 65	1	1	1	30	33
66 and Over	0	0	0	2	2
Grand Total	368	70	39	138	615

Gender of Staff

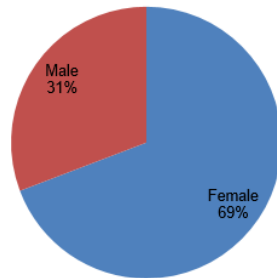
Gender Profile- WT



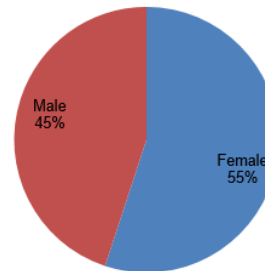
Gender Profile - RDS



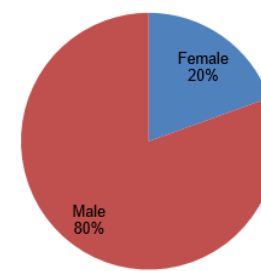
Gender Profile - Control



Gender Profile - Non Uniform

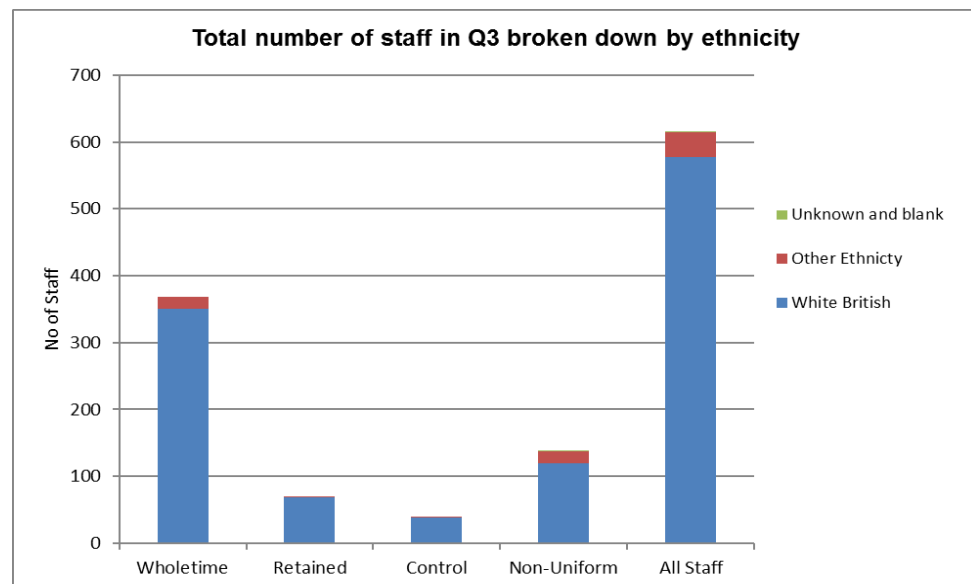


Gender Profile - All Staff



	Wholetime	Retained	Control	Non Uniform	All Staff
Female	13	4	27	76	120
Male	355	66	12	62	495
Total	368	70	39	138	615

Ethnicity of Staff

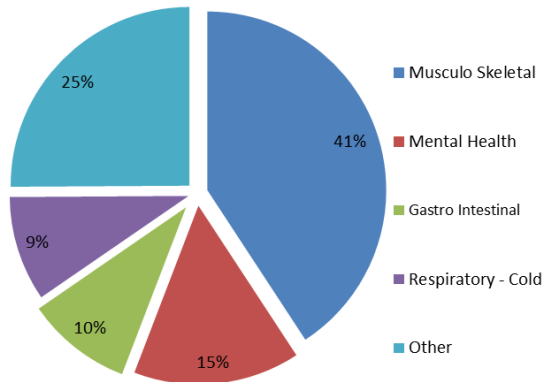


Ethnicity	Wholetime	Retained	Control	Non-Uniform	All Staff
White British	350	69	38	120	577
Other Ethnicity	18	1	1	17	37
Unknown and blank	0	0	0	1	1
Total	368	70	39	138	615

Ethnicity	Number of Staff
Asian or British Asian: Indian	3
Asian or British Asian: Other	2
Black or Black British African	4
Black or Black British Caribbean	4
Black or Black British other	1
Chinese	2
Mixed White and Asian	3
Mixed White and Black Caribbean	2
Other	1
Other Mixed	2
Unknown	1
White British	577
White Irish	4
White Other	8
Asian or British Asian: Pakistani	1
Grand Total	615

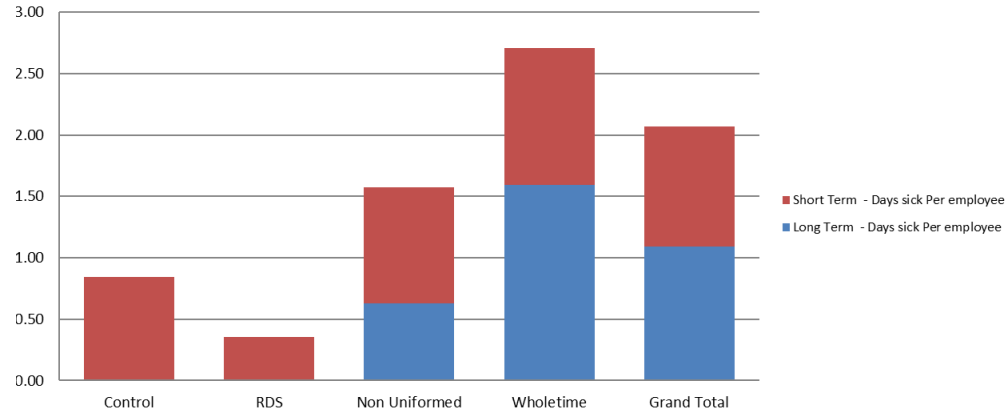
Days Lost to Sickness

Percentage of days lost to key causes for Q3

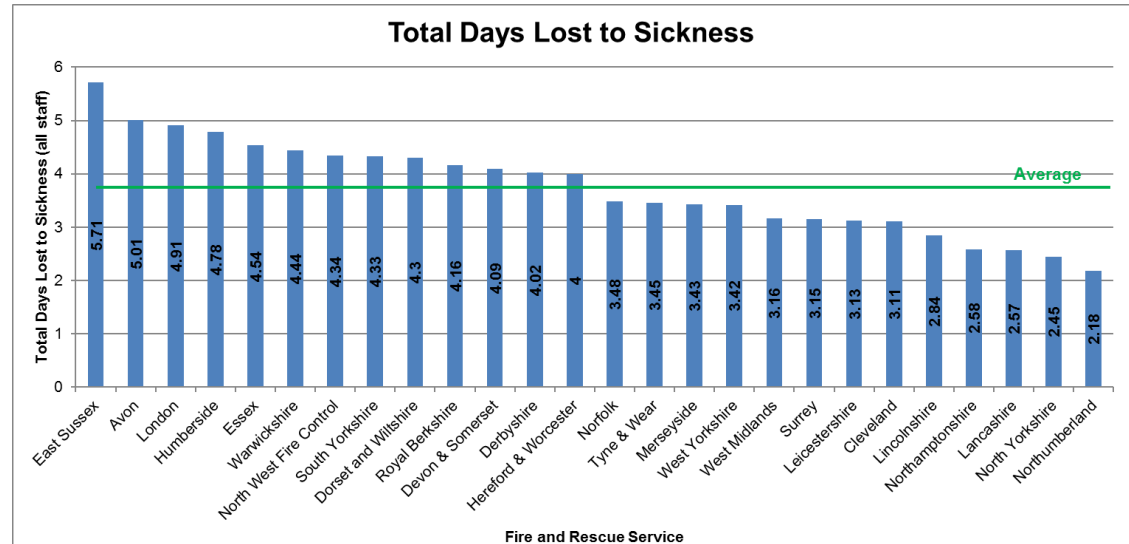


Cause	Days Lost	Occurrences
Musculo Skeletal	528	43
Mental Health	195	13
Gastro Intestinal	124	51
Respiratory - Cold	123	44
Other	325	69

Days Lost to sickness 1 October to 31 December 2017



Total Days Lost to Sickness



This graph (provided by Cleveland FRS) compares the percentage of working days lost to sickness for all staff in each Fire and Rescue Service. The days lost are shown as a per person figure for the period **1 April 2017 to 30 September 2017**.

* *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 Performance Team at

performance@rbfrs.co.uk