Strategic Performance Report

Quarter 3 2018/19

We will ensure appropriate fire safety standards in buildings

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

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

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

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

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

ROYAL BERKSHIRE FIRE AND RESCUE SERVICE
Enabling people to lead safe and fulfilling lives

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RoyalBerksFRS

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This version of the report was last updated on 22/03/2019

* Data for previous quarters may show a revised figure due to data entry lag.
** See appendix D for service provision corporate measure definitions. ***Previously known as Home Fire Safety Checks

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Introduction

This Strategic Performance Board Quarterly Report retrospectively presents information from the Performance Management Framework and Corporate Measures and Targets for 2018-19, with the exception of Corporate Risks, which are current at the time of publishing. The purpose of RBFRS' Performance Management Framework is to provide structure and governance that enables us to measure, monitor and manage outputs and outcomes in a timely manner; allowing us to respond and make informed decisions to ensure that our statutory obligations and the Fire Authority's Strategic Commitments are successfully delivered.

This report contains performance across four Quadrants:

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

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

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

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

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Key to Icons and Colours for Performance Measures

(blue)	Target exceeded by more than 10%
(green)	Target met or exceeded by up to 10%
(amber)	Target missed by up to 10%
(red)	Target missed by more than 10%
(grey)	NA or data accuracy issues affect confidence in reporting
↑	Improvement in performance
↔	Maintenance of performance
↓	Decline in performance

Key to Classification of Risk Scores and Risk Movement

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

↔	No risk movement
↓	Risk decreasing
↑	Risk increasing

Key to Audit Action Movement

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

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Key Highlights

Context

Key Data – October – December 2018

	Quarter 1 2018/19	Quarter 2 2018/19	Quarter 3 2018/19	Year to date 2018/19	Quarter 3 2017/18	Year to date 2017/18
Emergency incidents responded to	2,028	2,430	1,866 ↓	6324↑	1777	5761
Primary Fires	274	282	221 ↓	777↑	220	733
Secondary Fires	307	555	177 ↓	1039↑	178	790
Special Services (RTC)	120	118	160 ↑	398↑	100	313
Special Services (other)	347	377	324 ↓	1048↑	328	1003

Arrows represent change from previous quarter.

IRMP Progress

Prevention Commitment 1: To reduce the number of vulnerable people dying due to accidental fires in the home by conducting 35,000 Safe and Well*** visits over the next 5 years and 14,000 within the first two years.

Since April 2017, we have completed 11,433 Safe and Well* checks to individuals at heightened risk of dying in an accidental dwelling fire. In order to achieve the target set by April 2019 a further 2,567 visits will need to be conducted. We are further developing referral pathways, weekly reporting and sharing resources of Safe and Well Technicians across each of the Hubs.**

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

Since April 2017, we have conducted 5,676 Safe and Well* checks to individuals at increased risk of having a fire in their home and being injured as a result. We are currently exceeding this target and will undertake some further analysis of fires in homes to ensure we keep accurately targeting those most at risk of having a fire.**

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

Since April 2017, we have concluded 1,610 audits. A further 70 full fire safety audits were conducted in Q3 and are awaiting further actions to be completed before closing the service. We have actively targeted more premises within the Risk Based Inspection Programme, which are often more complex and time consuming. Results from these audits should be seen in the coming months.

Data for previous quarters may show a revised figure due to data entry lag.
*** See appendix D for service provision corporate measure definitions. ***Previously known as Home Fire Safety Checks*

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1. **Successes**

   1.1. The annual target for the number of Safe and Well visits to those as risk of having a fire and being injured as a result (2,500) has been already been achieved with 2,636 visits being conducted in the first 9 months of the year.

   1.2. The percentage of fire safety audits resulting in formal actions has exceeded the 5% target for the first time. The same period last year did not see any audits requiring formal action.

   1.3. The quarterly target for responding to incidents within 10minutes moved closer to the 75% target, achieving 74.1%. December saw 79.7% of incidents being attended within 10 minutes.

   1.4. Wholetime appliance availability was 100% for the quarter, with no occurrences of crewing levels affecting availability for a whole shift.

   1.5. The time taken for crews to 'turnout' has improved and exceeded the target set (90.0%) by 2.2 percentage points and is 9.2 percentage points higher than the same period last year (2017/18).

   1.6. Mental health absence has decreased by 6 days this quarter compared with the previous quarter.

   1.7. The number of female firefighters employed in the service has increased to 22 this quarter. This is due to two new female RDS Firefighters joining RBFRS. The percentage of female firefighters has increased from last quarter by 0.50% to 4.88%. We continue to exceed our target of 4% and have done so for the past five quarters.

   1.8. The number of disabled staff employed by RBFRS has increased to 35 (5.4%). On further analysis of the data, one new starter and one leaver have a disability and two existing employees have been registered with a disability this quarter

   1.9. The proportion of employees from a BME background has increased by 0.14 percentage points from last quarter due staff in post figures reducing, two BME employees joining the service and one employee leaving. Compared to this quarter last year we are 1.14% higher. Overall performance stands at 7.14%, exceeding the current target of 5%.

   1.10. There has been a reduction in the number of accidents, including RIDDOR, in Q3. Compared to the same period last year there have been 5 more accidents (12) but there have been no RIDDOR, of which there was one in Q3 2017/18.

   1.11. Percentage of spend subject to competition continues to exceed the 85% target by 9.6 percentage points.

   1.12. Fourteen audit actions were closed during Q3.

   1.13. A Risk Management and Governance Audit was conducted during Q3 finding substantial assurance and no actions were required as a result.

   1.14. The Safeguarding Children training course has raised awareness across the organisation and as a result there has been a steady increase in the number of safeguarding referrals made to Unitary Authorities.

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2. Concerns and plans for improvement

2.1   There were 17 casualties during Q3, taking the total for the year to 44. One incident this quarter resulted in 6 casualties. Ongoing analysis of incidents shows cooking as the main fire cause in these incidents and Hubs are working with the Communications and Engagement team on a media campaign, as well as emphasising the dangers during Safe and Well visits. In addition Fire Safety Inspecting Officers will be targeting retail outlets with sleeping accommodation above as part of their risk based inspection programme.

2.2   The number of Safe and Well Visits to those at risk of dying in an accidental dwelling fire is still not being achieved. However, 1348 more visits have been conducted in the year to date compared to the same period last year.

2.3   One of the four referrals for individuals who had received a threat of arson did not receive a Home Safety visit within 48-hours. Whilst the individual was not available to have a visit conducted in their home within the 48-hours, we have identified a training need internally.

2.4   Compared to last quarter, the number of long term sickness days lost increased by 14% (575 days in Q2,672 days in Q3) and short term increased by 15% (464 days in Q2 and 548 days in Q3).

2.5   Musculoskeletal (MSK) sickness has increased by 0.4% this quarter and remains the top cause of sickness absence equating to 37% of days lost (477 days). The number of episodes remain consistent (49).

2.6   The percentage of eligible operational staff in qualification has shown a slight decrease of 0.3 percentage points compared to last quarter.

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

3.1   Two risks have been reduced and the current score has come down (Capital Investment Strategy and Subject Access Requests).

3.2   Two risks have been reviewed and rewritten (management of assets and fire fighter pensions).

3.3   A new risk regarding a 'no deal EU exit' has been added.

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

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Supporting Performance Information

Quadrant One: Service Provision ** *(Data accurate as of 09/01/2019*)*

ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Dwelling Fire Deaths and Safeguarding											
1	Number of Fire Deaths in Accidental Dwelling fires	0	0	0	1 ↓		1	0	0	2	↑
	(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >) (*awaiting verdict of Coroner's inquest*) A fire death occurred at the beginning of Q3 and a response was established via CEMT (Critical Event Management Team). A joint Fire and Police investigation is currently underway to determine the cause of the fire and all relevant facts in relation to the case. Reducing fire deaths continues to be a high priority for RBFRS. In the calendar years 2011-15 there were an average of 4 fire deaths per year. In the last three calendar years this average has dropped to 1 per year, a 75% reduction. We continue to deliver Safe and Well visits to those at risk of dying, as outlined in measure six, to proactively contribute to the prevention of fire deaths in accidental dwelling fires										
2	Number of Fire Casualties in Accidental Dwelling Fires	20 MAX	*16	11	17 ↓		44	15 MAX	4	12	↓
	(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >) In the last four consecutive quarters casualty numbers have remained in double figures and this has resulted in exceeding the target maximum for the year at the end of Q3. Specifically in relation to the Q3 figure, the majority of casualties were in the West hub (15) with only 1 in the East and Central hub respectively. One incident resulted in 6 casualties due to inadequate fire detection within the sleeping accommodation above a shop. This is being followed up by Protection officers who will seek to take formal action against the Responsible Person. Locating and auditing these type of premises is an ongoing part of the work of Protection teams across the county. As described in previous performance reports casualties are persons who have been directly affected by the effects of a fire but are unlikely to suffer long term health impacts. In the context of Q3 the majority (16) were recorded as slight (meaning attending hospital as an outpatient) and were primarily related to smoke inhalation and breathing difficulties. Only 1 casualty (from the incident with 6 discussed above) was recorded as serious (meaning attending at least an overnight stay in hospital as an in-patient).										

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ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		Following analysis and investigation in the hubs a common theme is emerging, with the majority casualties being a result of cooking activities and primarily within the 'chaotic lifestyles' category. Hub Prevention teams are working with the Communications and engagement team to devise and deliver a county-wide media campaign, across all media platforms, to highlight the dangers of unattended cooking and this will be followed up and further supported by targeted local community safety activity and will link with our work delivering safe and well visits to those at risk of injury.									
3	% of safeguarding referrals made to Local Authorities within 24 hours	100%	100%	100%	100%			100%			
4	The number of deliberate primary fires	Monitor	40	35	49 ↓		124	Monitor	48	140	↑

Row 3 details:

(Source: Manual calculation by Safeguarding Coordinator)

There were 46 safeguarding referrals made during Q1, 49 in Q2 and 60 in Q3.

Within Q3, we have signposted 60 safeguarding referrals through to the Local Authorities. 62% of all staff have received the Safeguarding Children Training. To date 54% of all operational staff have attended and 73% of all non-operational staff (including Control) have attended this training. We are also in discussions with Bracknell Safeguarding Adults Board to put together the adult training package which will be agreed by their L & D Safeguarding Adult Board Subgroup.

Hub Total		Local Authority Totals	
East 24		Slough - 19	
		RBWM - 5	
West 28		Reading - 23	
		West Berks - 5	
Central 8		Wokingham 4	
		Bracknell - 4	
Total Referrals		60	

Row 4 details:

(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >)

This figure has risen in Q3 but is comparable to the previous year and overall we have experienced fewer deliberate primary fires than at this time in 2017/18. This figure represents 2.6% of the total number of incidents in Berkshire for Q3. Hub managers analyse the fires to look for trends in incident type, location and potential underlying cause. Over 50% of these incidents involve vehicles, mainly cars, and these are occurring largely in residential locations although several were also located in remote areas. Deliberate vehicle fires are often related to crime (other than arson). Patterns in vehicle fire setting have been identified and this resulted in West Hub Managers and Fire Investigation Officers (FIOs) working with colleagues in Thames Valley Police (TVP) during a spate of vehicle fires in the Newbury area. An arrest has been made in connection with 7 deliberate vehicle fires.

East Hub	17 incidents
Central Hub	9 incidents
West Hub	23 incidents

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ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		A number of fires also occurred in derelict premises. There were two such incidents in the Central hub that took place at the same address where it transpired that a member of the public was living in reduced circumstances. Fire crews submitted Safeguarding referrals which resulted in coordinated multi agency activity with partners from TVP, South Central Ambulance Service (SCAS) and the local authority. The individual was subsequently sectioned under the Mental Health Act. Other incidents concerned misuse of fireworks and bonfires out of control that subsequently caused property to be involved in fire. In the case of the latter, an incident in the Central hub has again resulted in an FIO working with TVP with a report being sent to the Crown Prosecution Service for consideration. This demonstrates the ongoing work of hub teams in engaging with partners to identify and resolve issue relating to deliberate fire setting and crime reduction.									

		Monitor	*75	*99	56↑		230	Monitor	55	250	↑

(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >)

5	The number of deliberate secondary fires	The level of deliberate secondary fires has returned to seasonally expected levels in Q3. The majority this quarter were refuse/bin fires. This is in contrast to Q2 where, during the fine weather and school holidays, they were mostly 'fires in the open.' These types of incidents place minimal demand on the service representing 3% of the total number of incidents in Berkshire for Q3.				

East hub – Q3	13 incidents
Central Hub – Q3	15 incidents
West Hub – Q3	28 incidents

Hub Managers and stations maintain links with neighbourhood policing teams to look at anti-social behaviour in their local areas.

Prevention

ID	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
6	Risk of Death	8,200	*2006	*1856	1569 ↓		5431	6,150	1697	4083	↑
7	Risk of Injury	2,500	*739	*872	1025 ↑		2636	1,875	684	2165	↑
	TOTAL	10,700	*2745	*2728	2594 ↓		8067	8,025	2381	6248	↑

Number of Safe and Well visits delivered to those who are at heightened risk of dying/being injured in the event of an accidental dwelling fire	*(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >)* We continue to maintain our focus on achieving the increased targets from 2017/18. The results in this quarter are moving in a positive direction. We will continue to target our resources towards CM6 risk of death as a priority. There was an expected fall in number of Safe and Well visits due to Q3 being over the Christmas and New Year festivities. We have already completed the

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ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		target for CM 7 risk of injury and based on progress to date we predict that we will almost certainly achieve our total target of 10,700 visits. In Q3 we completed our transition from Home Fire Safety Checks to Safe and Well visits and, in line with this name change, an amended policy guidance note was produced to support and reflect the activities of a Safe and Well visit. Contained within these guidance notes is expected timescales for visits to those falling within the CM6 group – (e.g. those at heightened risk of death in the event of an accidental dwelling fire). The completion timescales are based upon 16 vulnerability statements i.e. age/impairment/lifestyle/mobility etc. which produce weighted scorings. The total of these scorings sets the expected completion timescales for Safe and Well visits targeted at the CM6 group as follows: • P1 = 48 hours (score of 80+) • P2 = 21 days (score of 50-79) • P3 = 42 days (score of 15-49) • P4 = (score of 0-14) Does not meet criteria – direct people towards self-help guides on website As we move towards the final quarter every effort will be made to address CM6 – risk of dying - within the scope of our Safe and Well delivery model. The dialogue within CM2 details the identified increase of fire casualties in dwellings and in particular injuries involving kitchen fires. Linked to our County wide media campaign and in line with our activity to reach those that fall within the CM7 group – (e.g. those at a heightened risk of being injured in a dwelling fire) Hub teams will be ensuring the theme of cooking and fire risk is a primary focus during Safe and Well visits.										
8	% of priority home safety referrals, where there has been a threat or incidence of arson, completed within 48 hours	100%	100%	*45.5%	75% ↑		70.8%	100%	100%	57.1%	↑
		Q1 – 9 referrals Q2 – 11 referrals (5 within target) Q3 – 4 referrals (3 within target) There were four Threat Of Arson (TOA) referrals during Q3 and on one occasion the 48hr target was not met. Referrals are made by Thames Valley Police (TVP) using an agreed procedure, however further work is needed across TVP teams to embed understanding of the referral process. We are in communication with TVP colleagues to achieve this. Additional internal measures have been put in place utilising the Duty Officer team to provide a 24/7/365 response that supports addressing of out of hours misrouted referrals.										

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									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		This quarter, the referral where the target was not met was not made using the agreed channels, however RBFRS staff identified it was not made using the agreed channels well within the target time. Despite our efforts to complete the visit within 48 hours, records show that the occupant was not available until the third day following the receipt of referral. Consequently the 100% target was not met. We have identified that some staff within RBFRS were not fully aware of the TOA process and Hub managers are conducting training within their teams to ensure this is rectified.									
9	% of priority category 1 home safety referrals, where there is a significant heightened risk of an individual having a fire in their property, completed within 48 hours	Monitor	n/a	n/a	n/a		n/a	Monitor			
		(Source:) *The updated policy guidance note was published in Q3 (see measure 6/7 commentary). Work now needs to be undertaken with IT to develop how this is recoded on IBIS and the SQL reporting function. Historical information will not be available for reporting purposes.*									
	Protection										
10	Full Audits	1400	*244	*236	257 ↑		737	1050	223	683	↑
	Total Number of Full Fire Safety Audits carried out	*(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19 >)* In Q3 we completed and closed 257 Fire Safety Audits, an increase on the previous month despite part of the reporting period being over the festive period. This reflects the growing capacity associated with our new Fire Safety Inspecting Officers and shows our continued attention to our Risk Based Inspection Programme. This programme of activity balances audit of high risk buildings, identified through our data systems, with the audit of high risk premises identified through local risk intelligence that may not be identified through data systems. E.g. restaurants with sleeping accommodation above, where our professional experience, knowledge and judgement tells us protection measures in such premises can be very poor. As highlighted in our quarter 2 report a significant proportion of our Protection work is reactive and, in addition to our proactive risk based inspections we undertook statutory consultations that accounted for a further 388 activities, meaning our Protection team delivered 645 activities in total over quarter 3 Further to this Protection staff within hubs have continued to manage issues relating to identified High Risk High Rise Buildings (ACM Cladding) and as part of the services four phase response to Grenfell are well positioned to respond to future findings stemming from the public enquiry.									

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									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		The new Fire Safety Inspecting Officers have now completed their Level 3 Certificates in Fire Safety and are now moving forward with Level 4 qualifications. It is anticipated we are unlikely to reach our corporate target of 1400 full fire safety audits this year. We have given an undertaking to achieve this midway through the reporting period Q1 2019. Our commitment to achieve this will be supported by an increase in our capacity from the Level 3 Certificate inspectors becoming independent and requiring less supervision. This developing capacity will inform our targets for the 2019/20 year. The commentary within CM 2 has identified through trend analysis the increase of fire casualties in dwellings and in particular injuries involving kitchen fires. In some cases the increase of fire casualties has occurred in buildings where fire safety legislation applies. Crews at the time of the incident have identified that not all fire safety standards have been met and requested Post Fire Inspections. As a result a number of these have been referred for legal action. Hub fire safety teams will continue to target retail outlets (shops/takeaways) with sleeping accommodation (flats) above as part of their risk based inspection programme/methodology to support reduction of fires and fire related injuries.									
11	Satisfactory	50% max	*56.2%	*67.4%	61.9% ↑		61.7%	50% max	62.3%	63.8%	↑
12	Informal Activity	45% min	*26.6%	*23.3%	23.7% ↑		24.6%	45% min	27.8%	27.4%	↓
13	Formal Activity	5% min	*2.4%	*2.9%	5.6% ↑		3.7%	5% min	0%	0.3%	↑
14	Success Rate at Court	4:1		0	1:1		1:1	4:1			
	Outcomes of Full Fire Safety Audits (above)	(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19>) Success Rate: Manual input from Area Manager Service Delivery (Prevention and Protection) Note – one successful prosecution in August, service closed on IBIS in December 2018 therefore in Q3 data. Whilst our protection teams continue to support the businesses of Berkshire by delivering Better Business For All our focus has continued to change to reduce the number of satisfactory inspections. We will continue to identify those businesses and buildings who do not meet the minimum legal requirements of the Fire Safety Order 2005, resulting in informal/formal action being taken. As reported in Q2, the 10 new FSIO's are being supported and coached by experienced inspectors and we recognise that this has short-term impacts on resource deployment and consequently protection outcomes as they have been focusing on premises									

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ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD

which are most likely to be satisfactory. As our FSIO's develop the next phase will see them transition to work as peer pairings throughout Q4 on more complex premises, which should have a positive impact on the performance measures.

There has been a marked in improvement in the percentage of formal activity compared to the same period last year, as ongoing activities are concluded.

One successful Prosecution (*Note – one successful prosecution in August, service closed on IBIS in December 2018, therefore in Q3 data.*)

Our good working relationship with West Berkshire Legal Service continues to grow and sees our Legal Action Referral Process develop. This has led to increased efficiency in the collection of admissible evidence. Our own teams are taking part and being developed/exposed in interviewing Responsible Persons. The interviews are conducted in different locations around the County and are completed under caution using Police and Criminal Evidence Act (PACE).

We are currently scheduling a further three PACE interviews with a view to taking a further legal action. It is important to note that all files referred for legal action may not result in a prosecution, however, an admission of guilt by the Responsible Person may lead to a 'caution' being issued by Royal Berkshire Fire Authority. Alternatively no further action may be taken following consultation with West Berkshire Legal Services.

Response

ID	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
15	% of occasions where the first fire engine arrives at an emergency incident within 10 minutes, from time the emergency call was answered	75%	73.4%	69.3% *(73.5% excluding all outdoor fires)*	74.1%↑		72%	75%	74.2%	72.7%	↓

(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19>)

Following the spate calls in relation to outdoor fires experienced during the summer months, call rates have now returned to anticipated levels for the time of year (1866 calls for the quarter compared to 1777 for the same quarter in 2017-18). The call rate has further dropped through the quarter (October – 679 calls, November 612 calls, December – 575 calls). The breakdown of incident types into the 3 main categories of fires, false alarms and special services has remained consistent through the 3 months of Q3 (fires 20%, false alarms 50%, special services 30%).

Performance against the target is an improvement over the Q2 figure (corrected for outdoor fires) and is consistent with Q3 2017/18. The performance in December saw the Service exceed the target, reaching 79.7% of incidents within 10 minutes.

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ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
	To improve performance further hub managers are currently focusing on an analysis of the factors that influence the effectiveness and efficiency of mobilisation. In previous SPB reports we have outlined the progressive work of hubs and TVFCS colleagues to influence call handling times and mobilisation times. We have seen steady improvements on the latter with crews exceeding the target of turning out within 90 seconds on 92.2% of occasions in quarter 3. During quarter 3 we undertook analysis of the amount of time appliances were utilising pre-determined and authorised delay in response (known as second and third line availability). This means that the appliances are still available but with a 20 minute delay on second line and a 60 minute delay on third line. There are restrictions on how many appliances can utilise these arrangements and very specific reasons for using them, such as specific types of training where an instantaneous response to a fire call is not realistic. Through renewed monitoring and co-ordination to minimise the use of delayed availability we may see an improvement in response performance. It is possible, though not yet clear that this refocusing may have contributed to the exceeding of the response standard in December. We will continue to monitor performance and will look for further factors that can provide marginal gains in performance.										
16	Whole Time(shifts)	100%	100%	98.4%	100%		99.5%	100%	97.8%	99.1%	
17	RDS (hours)	60%	32.4%	27.7%	32.1% ↑		30.7%	60%	40.4%	37.6%	
	% of shifts/ hours where there is adequate crewing on frontline fire engines (above)	*WT Source: Stats > Corporate and Service Measures > SC_Appliance Availability (from Vision) and a manual check of FireWatch.* The Service aims to maintain 14 wholetime crewed appliances (pumps) and a number of specialist vehicles to be available 24/7, 365 days a year. A range of IRMP decisions underpinned this operating model. As a result of these decisions the Service now operates 14 Wholetime appliances with 328 personnel - as opposed to 13 Wholetime appliances with 354 personnel. In a period of significant financial constraint the Authority has created a very efficient and lean wholetime crewing model. In Q3, wholetime appliance availability achieved 100% with no occurrences of appliances being unavailable due to crewing issues. We continue to drive improvements in our management information systems, such as Firewatch and data from the Thames Valley Fire Control's Vision mobilising system. This is to inform understanding of factors affecting appliance availability in a timely manner. In turn, it informs managers at all levels in managing establishment, crewing and appliance availability.										

* Data for previous quarters may show a revised figure due to data entry lag.
** See appendix D for service provision corporate measure definitions. ***Previously known as Home Fire Safety Checks

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ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		(RDS Source: Download direct from Firewatch)									

	Q3 Total
Hungerford	49.6%
Lambourn	12.3%
Pangbourne	17%
Wargrave	13.5%
Mortimer	11.2%
Crowthorne	76.8%
Maidenhead	44.7%
Total	**32.1%**

The variations across each station are an indication of their very different establishment profiles (this being number of people at each station, the skills and qualifications they hold and the level of cover each individual can provide). We see greater consistency of sustained availability at Crowthorne, Hungerford and Maidenhead with good progress at Mortimer. Conversely, we recognise significant challenges at Lambourn and Pangbourne and, in both numbers in the team and particular skills (such as the number of personnel eligible to ride as appliance commanders at each station).

RDS recruitment continues to deliver an increase to the establishment from 72 in Q1 to 74 in Q2, rising again to 78 at the end of Q3. This increased again at the start of Quarter 4 with a further 4 new entrants bringing our RDS establishment to 82. These positive figures are largely due to the sustained work of the RDS project board. The project has now closed and identified good practice now forms part of business as usual and is managed through a new performance structure that also enables RDS managers to feed into decision making processes.

Managers forecast predicted increases in crewing based on a number of factors such as leave, sickness and personnel attaining the relevant level of qualification. It was predicted that Wargrave would reach 60% at the end of Q3 based on completion of BA assessments, however this was not achieved. Personnel have now successfully reached the required standard and availability at this station is forecast to reach 55-60% by the end of Q4.

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

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ID	Measure **	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
	Crowthorne is expected to maintain availability levels in excess of the target. Hungerford and Maidenhead perform well but are currently still short of the target. However both stations are predicted to maintain current levels and attain the standard by Q2 2019/20. Mortimer is progressing well and planned targets of 45% in March and 60% by July 2019 are expected. Progress at Lambourn has been slower but planned assessments in Incident Command and Breathing Apparatus in Q1 2019/20 should see this rise to approximately 35% by the summer.											

RDS Availability Q3

Customer Service											
18	Domestic Respondents	100%	100%	100%	100% ↔		100%	100%	100%	99.4%	↑
19	Commercial Respondents	95%	100%	100%	100% ↔		100%	95%	100%	100%	↔
20	Fire Safety Audit Respondents	90%	100%	98.3%	98% ↓		98.4%	90%	100%	100%	↔
	% of Questionnaire respondents satisfied with the overall service (above)*	*(Source: Owned by Data & Performance - manual calculation from results of postal surveys returned)* During Q3: 81 surveys were sent out following domestic fires. 22 responses were returned and 100% were satisfied. 20 surveys were sent out following fires in commercial premises. 6 responses were returned and 100% were satisfied. 135 surveys were sent out following fire safety audits. 51 responses were returned and 98% were satisfied.										

* Data for previous quarters may show a revised figure due to data entry lag.
** See appendix D for service provision corporate measure definitions. ***Previously known as Home Fire Safety Checks

Service Provision - Service Measures

(Data accurate as of 09/01/2019)

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
	Response Service Measures										
1	Dwelling Fire	Monitor	60.7%	50%	49.5% ↓		53.6%		62.6%	56.5%	↓
2	Road Traffic Collision	Monitor	54.2%	44.3%	52.5% ↑		50.7%		47.8%	52.3%	↓
	% of occasions a second fire appliance attending arrives within 2 minutes of the first appliance to arrive	*(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19>)* The time taken for a second appliance to arrive at an RTC or dwelling fire will be influenced by the same factors as those affecting the overall response time. The significant increase in incident numbers experienced through the summer corresponded with a drop in performance in both these measures. On average our second pump arrival times to incidents is within two minutes of the first pump, providing good early support to the initial attending crew. The service responded to 105 dwelling fires and 120 RTCs in Q3. The RTC performance has improved in comparison with Q2 following the reduction in overall incident numbers since the summer. The dwelling fire response remains lower than in Q1. An analysis of the data indicates that of the 52 incidents where the second appliance took longer than two minutes to arrive after the first, on 7 occasions it arrived within the subsequent 30 seconds and on a further 4 occasions within a total of 3 minutes (therefore on 61% of occasions a second pump arrived within 3 minutes). Service Delivery managers will continue to monitor this area to ensure that the work being done to improve performance against CM15 is also resulting in an improvement across these two service measures.										

* Data for previous quarters may show a revised figure due to data entry lag.
** See appendix D for service provision corporate measure definitions. ***Previously known as Home Fire Safety Checks

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ID	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
3	5 seconds	92%	89.9%	89.7%	93.4% ↑		90.9%	92%	91.2%	89.8%	↑
4	10 seconds	97%	97.8%	96.4%	99% ↑		97.6%	97%	98.5%	97.9%	↑
	% of occasions where time to answer emergency calls is within (above)	*(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19>)* *Issue with Call Logger, did not record all calls during May/June.* Performance against these measures has improved during Quarter 3 and now exceeds the target levels. This is reflective of the reduction in the levels of incoming calls being received compared with activity during Quarter 1 and Quarter 2, where the unusual weather conditions created unusually high demand.									
5	Within 90 seconds	80%	73.8%	71.3%	69.8% ↓		71.7%	80%	72%	75.3%	↓
6	Within 120 seconds	95%	85.2%	83.5%	81.7% ↓		83.5%	95%	83.8%	86%	↓
	% of occasions where time to mobilise (above)	*(Source: Reports > Stats > CorporateMeasuresAndReportableServiceMeasures_18-19>)* Performance against these measures has declined, both during the year and against historical values. Analysis of Quarter 3 data has taken place to attempt to identify causal factors and potential mitigations. RBFRS, in common within many other FRS including OFRS within the Thames Valley, operate a policy of challenging calls reporting automatic fire alarms operating within premises categorised as 'Commercial, Industrial, Retail and Public Assembly'. Call challenge is implemented during hours where premises would normally be expected to be open and occupied. Call challenging is an important component of RBFRS' emergency call management arrangements as it prevents the mobilisation of operational resources to premises where they are not required, reduces consequential road risk and preserves the availability of appliances to respond to genuine incidents. Call challenging requires significant additional questioning of callers by TVFCS staff to establish whether the mobilisation of operational resources is appropriate. It has been identified that alarms in premises within Royal Berkshire which meet the criteria for call challenging, but where an appliance mobilisation is ultimately deemed appropriate, account for 26.6% of all failures by TVFCS to meet the 90 second call handling time. Of all calls to alarms in these premises where a mobilisation is required, TVFCS failed to achieve the 90 second standard on 51.0% of occasions, with the call handling time only being achieved on 20.4% of occasions when a call									

* Data for previous quarters may show a revised figure due to data entry lag.
** See appendix D for service provision corporate measure definitions. ***Previously known as Home Fire Safety Checks

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ID	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD

challenge is applied. The average time to handle a call to these premises where call challenge is applied and a mobilisation is still required is 195 seconds. This has a consequential effect on attendance standards, with failed call handling times leading to a failure to meet attendance times on 22.3% of occasions.

At present, performance measures do not capture the positive impact of call challenging, with only the negative impact on call handling and attendance times when the call challenge fails to prevent a mobilisation being obvious.

Calls to outdoor locations where also identified as an area which causes problems during call handling, with fires in the open and road traffic collisions accounting for 21.0% of failures to achieve the call handling standard of 90 seconds. The Vision command and control system requires an exact 'addressable' gazetteer location to be identified before the required appliances can be selected. These types of calls can be problematic, as a caller will often know their approximate location but extended call handling time is required to determine the exact addressable location. TVFCS systems are now able to utilise Advanced Mobile Location services provided through BT, which aid with the identification of a callers location. More training will be provided to assist operators with making the best use of this feature. Consideration will also be given to the adoption of 'Pre-Alerting' by TVFCS, which allows a supervisor to alert an appliance without having identified an exact addressable location where they are confident that the station concerned will be the first to arrive. Adoption of 'pre-alerting' would involve a change in TVFCS protocols and subjects the FRS to a small degree of risk. The consideration of adopting 'pre-alerting' has been provisionally added to the TVFCS Service Plan for Quarter 1 2019/20 and will be considered by the TVFCS Joint Co-ordinating Group.

To improve standards generally, Watch Managers within TVFCS are being asked to focus on the time taken to handle calls to ensure that mobilisation takes place before details are gathered and recorded which are not key to identifying the appropriate response. To assist with this, call handling data for individual watch members is being provided to allow staff members requiring development to be identified. A TVFCS Call quality assessment procedure is currently going through the initial stages of consultation, which would require calls to be retrospectively reviewed, assessed by Supervisory and Middle Managers and the results recorded.

Data for previous quarters may show a revised figure due to data entry lag.
** See appendix D for service provision corporate measure definitions. ***Previously known as Home Fire Safety Checks

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I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
7	Whole Time under 90 seconds	90%	*89.6%	89.5%	92.2% ↑		90.3%	90%	83%	78.5%	↑
8	RDS within agreed timeframe	100%			See below		See below	100%			

| | % of occasions where crews turnout within the agreed timeframes | (Source: Reports > Stats > CorporateMeasuresAndReportableServic5Measures_18-19 >)

Hub managers and fire crews have worked hard all year to ensure mobilisations times are as efficient and consistent as possible as this contributes to the overall response standard. This measure has been steadily improving and was achieved in all 3 months of Q3 peaking at 93.7% in December 2018.

Hub managers will continue to monitor these times and work with crews to maintain and improve performance.

As described in previous reports RDS turnout times can be affected by a number of factors. Staff that have to drive will be affected by local traffic conditions as they have no dispensation to utilise 'blue lights' to attend the station. The nature of being an on call firefighter means having to drop everything when notified of an incident. Occasionally when this occurs in the home environment there can be valid domestic reasons for a slight delay in proceeding to the call, such attending to cooking or ensuring premises are left secure. Also we periodically experience technical issues with pager equipment which are

rectified by the communications team.

All of the above factors impacted on the turnout times in Q3. Performance indicated as a percentage when dealing with small numbers does not necessarily indicate the real scale of any issues. For example Hungerford missed one call, Maidenhead 3 and Crowthorne 3. Hub managers will continue to investigate and challenge where times are not being met. |

Q3	Number of times mobilised	% within agreed timeframe	Agreed timeframe
05 Hungerford	14	92.9%	360
06 Lambourn	6	100%	480
07 Pangbourne	1	0%	360
09 Wargrave	1	100%	420
11 Mortimer	4	50%	420
15 Crowthorne	41	80.5%	360
19 Maidenhead	16	81.3%	360

* Data for previous quarters may show a revised figure due to data entry lag.
** See appendix D for service provision corporate measure definitions. ***Previously known as Home Fire Safety Checks

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
9	Volume of activity undertaken by Fire Safety Inspecting Officers	*Definition agreed with business and SQL still to be built.*									

* Data for previous quarters may show a revised figure due to data entry lag.
** See appendix D for service provision corporate measure definitions. ***Previously known as Home Fire Safety Checks

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Service Plans

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

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

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

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

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

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

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

Quadrant Two: Corporate Health Performance *

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
Human Resources											
1	% of working time lost to sickness, across all staff groups	3%	3.4%	4.0%	4.3% ↓		3.9%	3%	4.9%	4.9%	↑

*(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, there is an increase in the percentage of working time lost to sickness per employee. This is an increase of 0.31% on the previous quarter, but a 0.59% reduction compared to the same time last year.

The total days lost to sickness this quarter has increased by 15% (1039 in Q2 compared to 1220 in Q3). When compared to the same period last year, the total days lost to sickness is 2.2% lower (1247 days lost in Q3 2017/18).

Long term sickness increased by 14% from 575 days in the previous quarter to 672 days in Q3. Short term sickness increased by 15% from 464 in the previous quarter to 548 days in Q3.

Respiratory absence has increased this quarter by 75% (from 25 days to 99 days). However compared to the same quarter last year respiratory absence is 32% lower (146 days).

Gastro-Intestinal absence remains a high level of absence this quarter and has increased by 16% compared to Q2 (109 days to 130). Analysis of this data has taken place and does not reveal any particular trends. Two cases of long term sick account for 28 days this quarter.

Work continues in HR to provide case management support, guidance to managers, employee welfare meetings, promotion of available support, assistance of Occupational Health and the Health and Fitness Team assist in absence prevention and the support of an early return to work.

Mental Health

There has been a decrease of 6 days (1.8%) on the previous quarter. Mental health absences equated to 26% of the total days lost to sickness this quarter, compared to 28% last quarter. 332 days (18 episodes) were lost in Q2 and 326 days (19 episodes) in Q3.

Three individuals on long term absence have now returned to the workplace, seven individuals (five of which are long term) remain absent at the end of the quarter. Nine individuals on short term sickness within the period have also returned to the workplace. Cases are investigated to ascertain relevant factors and determine how individuals can be supported.

*See appendix E for corporate health measure definitions

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD

Compared to the same quarter last year (195 days in Q3 2017/18), absences due to mental health show an increase of 60%. The Service continues to promote mental health awareness and encourage people to talk and utilise the support mechanisms available, which include online webinars and videos to help employees and managers (provided by Health Assured, the Employee Assistance Programme provider).

Mental Health Awareness training to all staff commenced in July 2018. This covers signs and symptoms of common conditions the importance of supporting colleagues and sources of support. To date, 81% of the workforce have attended the course with a number of employees scheduled to attend the January course. Regular courses will run courses throughout the year to capture new starters and any outstanding existing employees. The training package will be available on Siren for those employees that are unable to attend a course.

A number of individuals will also attend Mental Health First Aider training in January.

Musculoskeletal (MSK) Sickness

Musculoskeletal (MSK) sickness has increased by 0.4% from Q2 and remains the top cause of sickness absence. MSK absences equated to 37% of total days lost to sickness in Q3 in comparison to 39% in Q2. 475 days (49 episodes) were lost in Q2 and 477 days (49 episodes) were lost this quarter. While the number of episodes are consistent, MSK absence is 9.7% lower than the same time last year. Most episodes ranged between 1-20 days lost.

Short term MSK absence has reduced in Q3 - 183 compared to 200 in Q2

Long term MSK absence has increased in Q3 – 295 compared to 275 in Q2

Analysis shows the top three reasons for both Q3 and Q2 MSK total days sick were: Lower Limb (216 days), Upper Limb (103) and Back (76).

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

There was one accident at work resulting in one short term MSK case of 3 days.

The fitness tests in October 2018 included a movement screen for all operational personnel. The movement screen consists of seven movements, which look at joint movement independently and together. A scoring system allows the Movement Specialist to target those who have pain in movement and undertake a more in depth assessment.
Feedback on the new approach has been positive and operational personnel have been interested to learn about their movement patterns and how this approach can help prevent injury.

*See appendix E for corporate health measure definitions

ID	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		Support and Health Promotion **Benenden** At the end of Q3 we had 430 members and 20 cases had been supported, eight of these were for physiotherapy and five for diagnostic services. The October issue of Shout included an article on Benenden's psychological support to link to World Mental Health Day on 10 October. An Invitation to Tender was issued at the end of December for the provision of private healthcare in advance of the end of the current contract on 28 February 2019. **EAP Promotion** Health Assured's monthly newsletter is routinely published on Siren, this covers a range of topics and events in the health calendar. There were 14 calls to the counselling service and one to the legal helpline; the reasons for calling were mental health and relationships. Additionally there were 52 hits on the on-line portal. **Health Promotion** The following promotions took place this quarter: Winter Wellness, the Lifestyle Checkpoint, Movember and Festive Wellbeing.										
2	% of eligible operational staff successfully completing fitness test	100%	99.3%	99.3%	96.1% ↓		96.1%	100%	99.3%	99.3%	↓
		(Source: Data calculated and supplied by HR) Fitness testing is conducted twice per year on all eligible operational personnel. There were 414 staff eligible for testing in October 2018. Of those tested 99% (394) passed the test. 96.1% (398) of eligible staff have been tested – 8 wholetime personnel, 6 on-call personnel and two flexi-duty officers are yet to be tested. The delay in testing all personnel is due to the introduction of a new process for October testing, which now includes a movement screen and can only be administered by eight trained personnel. All outstanding tests are being followed up. Two people not meeting the standard were wholetime personnel. One failed the treadmill test but passed the drill ground assessment the following day. A three-month review has been booked to ensure fitness has improved. One failed the step test but is currently off the run due to health issues. The other two people not meeting the standard were flexi-duty officers. These are being monitored and one has resolved. The 16 people not eligible for testing in October will be tested when they are ready to return to work.										

*See appendix E for corporate health measure definitions

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
3	% of eligible staff with Personal Development Appraisals	100%	54.5%	90.8%	93.0% ↑		93.0%	100%	91.0%	91.0%	↑
		(Source: Data calculated and supplied by HR) 552 staff were eligible to have received a Personal Development Interview (PDI) meeting between April and June 2018. Dual contract employees only require one PDI and therefore have only been counted once. Of this 72 employees were exempt for the following reasons: • 56 new employees • 16 employees who have been away from the workplace for the duration of the period for various reasons including maternity and long term sickness. The figures only account for those PDI meetings recorded on the system up to and including 31 December 2018. 514 staff are recorded as having had their PDI meeting (502 in Q2) which equates to 93%. 38 remain unrecorded on FireWatch (51 in Q2). Of the meetings that have taken place 326 PDI forms have been returned to HR (289 returned in Q2) 188 still to be returned.									
4	% of eligible operational staff in qualification	100%	99.5%	99.4%	99.1% ↓		99.1%	100%	99.1%	99.1%	↔
		(Source: Data calculated and supplied by L&D) This measure provides overall analysis of core operational training. Further detailed analysis and discussion will be undertaken at the Workforce Planning Group, which ensures relevant stakeholders from across the Service consider workforce matters and associated impacts. Locally in the Learning and Development department, detailed analysis is undertaken and liaison with individual managers as necessary to address requirements, competence related matters and issues of attendance. Training and assessment activities in RBFRS are aligned with the Fire Professional Framework, which outlines the operational core skills requirements of Firefighters and Officers. National Occupational Guidance further informs the core skill areas (Water, Working at Height, Road Traffic Collision (RTC), Hazardous Materials, Casualty Care, Breathing Apparatus (BA), Driving, Incident Command and Core Skills). Our performance for Q3 is 99.1% a slight decrease of 0.3% on Q2. Note: Immediate Emergency Care (IEC) is being reported separately as this is a new qualification with initial training being conducted over a two-year period (commenced January 2018). The RTC qualification was included in these figures from Q1 2018/19. Areas of good performance include:									

*See appendix E for corporate health measure definitions

ID	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		17/18 Vs 18/19 YTD
									Q3 17/18	YTD 17/18	

- Breathing apparatus 99.7% (1 person on a development following failure to reach a competent standard during assessment)
- Incident Command- 100%
- Emergency Response Driving- 100%

Areas for improvement:

- IEC (Casualty Care) - 56%. Although we are on target to achieve the 75% target over a two year period, our external suppliers have not been able to provide the number of courses required in the last quarter due to staff shortages. Discussions are being held to address this issue.
- RTC- 98%. 7 individuals' outstanding, due to attend training in Q4.
- Water Rescue Module 2- 97%. Issues surrounding maintaining sufficient crewing for operational response limited the training delivery within Q3, This meant 10 individuals' qualifications expired. Individuals are prioritised to attend the next available courses.

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

The ability to effectively train staff is reliant on the ability to release individuals from duty to central training and provide sufficient Instructors to train and assess these skills. A combination of efforts to ensure there is flexibility to do so, and other factors such as ensuring sickness absence is reduced to facilitate attendance continue to be examined. Staffing in the Learning and Development department is kept under review to ensure as much as possible, there is the ability to plan for and cover turnover.

Health and Safety

ID	Measure	2018/19 Target	Q1 Actual		Q2 Actual		Q3 Actual		Q4 Actual		Y.T.D. Actual		YTD Target	Q3 17/18		YTD 17/18		17/18 Vs 18/19 YTD
5	All injury accidents including RIDDOR (RIDDOR & Total)	10% reduction (= 4**/72)	1**	18	2**	16	0** ↑	12↑			3**	46	10% reduction (= 3**/54)	1**	7	5*	33	↑↓

(Source: Data calculated and supplied by H&S)

During Q3, there were 12 injuries. This is a reduction of 6 and 4 when compared with Q1 and Q2 which is a 33% and 25% reduction respectively.

There were no RIDDOR accidents during Q3.

*See appendix E for corporate health measure definitions

ID	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		Of the 12 injuries, ten were minor, two were moderate. The two moderate injuries were a twisted ankle leading to 6 days absence from work, and a laceration.									

Of the rest, the minor injuries sustained were strains/sprains, bruises, and a burn.

- 6 injuries were caused by slips or trips (50%)
- 4 injuries were caused by the injured party being struck by a moving object (33%)
- 2 injuries were caused by the injured party striking a fixed object (17%)

As in Q2, there were no manual handling accidents in Q3.

Examination of trends is carried out and follow up action is taken in all cases and is reported through the Health Safety and Well-being Committee, which includes the Member champion and Representative Bodies.

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

					Spend						
6	% of spend subject to competition	85%	93.1%	89.3%	94.6% ↑		92.9%	85%	89.3%	88.7%	↑
7	Compliant spend as % of overall spend	100%	100%	100%	100% ↔		100%	100%	100%	99.8%	↑

(Source: SQL report from SAGE)

Spend subject to competition- RBFRS now has 224 contracts in place, of which 64 contracts are with our Thames Valley partners. 41 of the joint contracts have been put in place by RBFRS Procurement team.

The work of the team is underpinned by the new RBFA 3Cs Procurement Strategy based on Compliance, Collaboration and Commerciality. This now sets out the focus for the team. The team currently have a team member who works for RBFRS and TVP. This has led to an increase in collaboration for procurement and stores management. This offers the potential to undertake more joint purchasing of equipment. Five new tenders are currently being jointly delivered with the police.

 This broader collaboration work is enabling the Thames Valley FRS' to benefit from access to new equipment such as body worn video cameras through joint working , enabling the service to obtain better pricing and support through the leverage the police are able to obtain due to scale.

*See appendix E for corporate health measure definitions

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
		The procurement team has a pipeline of joint contract renewals and re tenders for the next five years reducing the risk of any future non-compliant spend and enabling the service to fully understand the market before seeking requirements through competition. With better knowledge and expertise of the requirements and what the market can offer we can avoid expensive unnecessary spend and better manage our supply contracts. The Contract Management Framework is now also in place and staff are currently doing the online training course developed in-house. Other large emergency services (including the Met police) are seeking to purchase the new tool which will result in RBFRS receiving a percentage of the sales. The team plan and deliver their work in a structured way with the team being given opportunities to develop broader skills through collaborative working. All FRS' are now required to submit a report of annual procurement savings. To date (Q3) the team have made £245,000 savings to the end of this year, additional savings are expected in Q4. The expected procurement savings target for this year is £300k which is about 4.5% savings based on addressable spend. **Compliant spend** - The buyer gateway process enables the procurement team to monitor potential requisitions, temporarily halt any non-compliant spend and subject it to competition. Currently all requisitions are subject to review by Procurement. It is intended that the new Purchase to Pay(P2P) solution which is about to be tendered will enable the service to link supplier contracts to requisitions so that only expenditure not subject to competition will need to be subject to this gateway. The new P2P process should enable the whole transactional end of purchasing to be streamlined making it easier for users and significantly reducing the administration related to this process. The team continue to achieve 100% compliance, meeting this target									

*See appendix E for corporate health measure definitions

I D	Measure	2018/19 Target	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	Y.T.D. Actual	YTD Target	2017/18 Performance		
									Q3 17/18	YTD 17/18	17/18 Vs 18/19 YTD
	Freedom of Information										
8	Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act and Environmental Information Regulations).	0	0	0	0 ↔		0	0			New for 2018/19
	(Source: Manual Input from Information Governance)										
9	Number of Information Commissioner assessments finding that the Service has breached Data Protection Legislation (Data Protection Act and forthcoming legislation)	0	0	0	1 ↓		0	0			New for 2018/19
	(Source: Manual Input from Information Governance)										

In this quarter we reported 1 data breach to the Information Commissioner's Office. As required by the legislation, the decision to report was based on an assessment of the possible harm. The notification was made within the required 72 hour time frame. The ICO advised they would take no further action as the data involved was of low sensitivity, and because we had already taken action to remove the risk and address the cause. The ICO recommended that we review our training to prevent recurrence. A full investigation of the data breach has been carried out.

*See appendix E for corporate health measure definitions

Budget Update

RBFRS Revenue Expenditure Quarter 3 2018/19

	Annual Budget £'000	Apr - Dec18 Outturn £'000	Forecast to YE £'000	Fcast - Budget Variance £'000
EMPLOYEES				
UNIFORMED	18,774	13,877	18,386	(388)
NON-UNIFORMED	6,427	4,744	6,368	(59)
TRAINING	659	532	813	154
OTHER	280	233	261	(19)
	26,140	**19,386**	**25,828**	**(312)**
PREMISES				
REPAIRS & MAINTENANCE	681	348	648	(33)
RATES	880	748	800	(80)
CLEANING	223	140	227	4
UTILITIES	380	205	377	(3)
	2,164	**1,441**	**2,052**	**(112)**
SUPPLIES				
INSURANCE	310	297	310	0
EQUIPMENT	465	290	483	18
IS EQUIPMENT & LICENCES	597	505	613	16
CLOTHING/PPE	365	321	362	(3)
COMMUNICATIONS	822	469	845	23
OCCUPATIONAL HEALTH	152	157	195	43
PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTIONS	138	97	133	(5)
HYDRANT REPAIRS	25	4	25	0
COMMUNITY FIRE SAFETY SUPPLIES	136	142	195	59
SUPPLIES OTHER	165	127	195	30
	3,175	**2,409**	**3,356**	**181**
CONTRACTS				
CONTRIBUTION TO TVFCS & COLLABORATION	801	569	795	(6)
LEGAL & LEVIES	280	194	291	11
CONTRACTS OTHER (incl. Professional Services)	267	182	472	205
	1,348	**945**	**1,558**	**210**
TRANSPORT				
VEHICLE RUNNING COSTS	744	408	804	60
TRAVEL	251	196	247	(4)
	995	**604**	**1,051**	**56**
PENSIONS				
PENSIONS	419	259	423	4
	419	**259**	**423**	**4**

INCOME

GRANTS	(387)	(393)	(393)	(6)
RENTAL INCOME	(107)	(19)	(105)	2
TVFCS RECHARGE INCOME	(278)	(139)	(278)	0
INCOME OTHER	(309)	(168)	(294)	15
	(1,081)	**(719)**	**(1,070)**	**11**
NET COST OF SERVICES	**33,160**	**24,325**	**33,198**	**38**
DEBT CHARGES INTEREST	390	214	390	0
INVESTMENT INTEREST	(75)	(50)	(97)	(22)
NET OPERATING EXPENDITURE	**33,475**	**24,489**	**33,491**	**16**
REVENUE FUNDING OF CAPITAL	500	0	500	0
CAPITAL CONTRIBUTIONS TO STAFFING COSTS	(60)	0	(60)	0
APPROPRIATION TO/(FROM) RESERVES	(754)	0	(754)	0
MINIMUM REVENUE PROVISION	318	0	318	0
NET EXPENDITURE	**33,479**	**24,489**	**33,495**	**16**

Q3 Revenue Budget 2018/19

Building on the hard work of the 2017/18 our budget monitoring processes and devolved budgets have been further embedded into the organisation.

This improvement in budget monitoring and forecasting is evidenced by our projected final outturn, which is showing a variance of 0.05% equal to £16,000 on a budget of £33.5 million. Regular budget management has enabled re-profiling and realignment of budgets, to ensure the effective delivery of organisational objectives, and response to in year organisational developments.

Collectively, positive and negative variations in relation to the budgets for RDS, flexi-duty officers, support staff, training and occupational health have resulted in a net surplus of £250,000. This includes £123,000 of the total anticipated £550,000 savings from the Remotely Managed Stations / Flexi-Duty Officer (RMS/FDO) project. It is positive to note that the continued improvement in RDS recruitment has brought this budget to within £205,000 of profile. When the necessary portion of the £168,000 of savings required from Pangbourne are realised, and the additional RDS recruits come on stream, this budget will balance, for the first time ever.

The delivery of the £123,000 RMS/FDO savings has enabled the project team to provide additional high-quality realistic incident command training at the Fire Service College. This practical fire ground training will ensure that the new station based station managers, have the right skills and competencies, to safely and effectively command incidents at level 2.

All of the additional recruitment and promotion activity, linked to these IRMP projects, combined with an ongoing drive to minimise sickness, through our occupational health scheme has resulted in non-recurring costs of £43,000.

Further improved contract management, invoice challenge and business rates revaluations have resulted in additional in-year savings of £113,000. This has been offset against the £205,000 professional service costs relating to development of Whitley Wood business case and other capital project professional fees. Funding these pressures in year means that the costs will no longer be met from the Development Fund.

Fuel costs have increased, mainly due to increased operational activity in the summer period, leading to an additional pressure of £35,000. There has also been significant defects and unscheduled work to some of our older vehicles adding a further £25,000 of pressure. This further emphasises the importance of the Authority's continued investment in new vehicles to ensure revenue costs do not continue to rise.

On a positive note, proactive treasury management and increasing interest rates will result in additional forecast investment interest of £22,000.

In summary, due to the prudent management of the Service's budget and various in-year realignments as set out above, the total projected expenditure for 2018/19 is £33,495,000 against the budgeted figure of £33,479,000, which as stated in the opening paragraph is a variance of just 0.05% or £16,000.

Financial Position as at December 2018 (Capital)

CAPITAL SCHEMES	Total Project Budget £'000	Actual Spend in Prior Years £'000	Actual Spend to Q3 2018/19 £'000	Est. Project Spend to completion £'000	Total Est. Project Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. Project Completion Date	Notes
Fire Station Build - Theale Fire Station	6,200	684	28	5,488	6,200	0	0%	Qtr 3 2020/21	Following extensive engagement with specialist remediation contractors using the public sector procurement 'Prior Indication Notice' procedure, a tender was released to the market in January 2019, with the outcome due on 25th February 2019. This along with known utilities costs will be used to negotiate the final purchase agreement with the land owner, Network Rail. The outcome of this work, along with intensive VE work to provide estimated build costs will be presented to Members of Management Committee in April 2019.
Whitley Wood Fire Station Firehouse	350	15	299	27	341	-9	-3%	Qtr 2 2018/19	Both off site and on site works were completed according to the programme in September 2018. Projects delivered £9k below budget.
Fire Station Re-build - Crowthorne	1,500	21	151	1,328	1,500	0	0%	Qtr 2 2020/21	This project is continuing to progress to programme timelines. The tender for the demolition and construction of a new tri service retained community fire station will be completed in Q4 with a recommendation to appoint the main contractor being presented to Members of Management Committee in April 2019.
Fire Station Refurbishments - minor works	650	260	0	390	650	0	0%	Qtr 4 2020/21	Initial planning work for the refurbishment at Ascot has commenced with indicative prices being received. Similar plans are now being developed for Wokingham, with options to join the two projects from a procurement perspective. Associated capital costs for the RMS / FDO project are being established.
Fleet & Equipment - Fire Appliances	2,599	1,221	104	1,274	2,599	0	0%	Qtr 4 2019/20	Shared exercise with Thames Valley partners which will see RBFRS procure a total of 11 new vehicles over a 3 year period. 7 have been delivered with plans now being developed for the delivery of the final 4 in Qtr 3 2019/20.

CAPITAL SCHEMES	Total Project Budget £'000	Actual Spend in Prior Years £'000	Actual Spend to Q3 2018/19 £'000	Est. Project Spend to completion £'000	Total Est. Project Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. Project Completion Date	Notes
Fleet & Equipment - Special Appliances - Operational Support Unit	384	19	40	325	384	0	0%	Qtr 4 2019/20	Work is underway to identify operational support unit vehicle requirements and how these will integrate with other compatible systems.
Fleet & Equipment - Special Appliances - Aerial Ladder Platform	850	0	0	750	750	-100	-12%	Qtr 4 2019/20	The collaborative Aerial Ladder Platform project is progressing with the vehicle now ordered. Forecast cost includes initial build cost and additional equipment that will be required.
Fleet & Equipment - Other Ancillary Vehicles & Equipment	800	112	115	573	800	0	0%	Qtr 4 2020/21	The fleet replacement strategy is currently being reviewed but a number of vehicles are expected to be beyond serviceable use over the next 3 years and will be replaced as necessary.
ICT - IBIS redevelopment	131	55	29	15	99	-32	-24%	Qtr 4 2018/19	Project has now been extended to incorporate additional work and therefore the estimated completion date has been amended to Qtr 4 18/19 (previously IQtr 3). Forecast expenditure is less than budget due to a reduced requirement for additional licences as a result of better software management.
ICT - Helpdesk System	45	29	0	16	45	0	0%	Qtr 4 2018/19	System is being upgraded and developed with new functionality being rolled out across the Service on a phase-by-phase basis.
ICT - Sage 1000 upgrade	65	17	0	48	65	0	0%	Qtr 3 2019/20	Phase 1 of the upgrade to Sage 1000 was successfully implemented in Qtr 4 2016/17. Tender for phase 2 of the project issued in January 2019. Costs & timescales will become clearer upon contract award, but implementation and testing will commence in Qtr 2 2019/20.

CAPITAL SCHEMES	Total Project Budget £'000	Actual Spend in Prior Years £'000	Actual Spend to Q3 2018/19 £'000	Est. Project Spend to completion £'000	Total Est. Project Spend £'000	Variance From Budget £'000	% Variance From Budget	Est. Project Completion Date	Notes
ICT - Learning Management System (LMS)	45	0	0	45	45	0	0%	Qtr 2 2019/20	Options have been assessed taking into consideration the operational competence review. System specification and tender will be issued in quarter 4 2018/19. Once system has been purchased there will be an ongoing requirement to develop content on the platform. Estimated completion date reflects when the system will be operational.
ICT - Firewatch Development	60	30	11	10	51	-9	-15%	Qtr 4 2018/19	Implementation is still on target for completion in Qtr 4 2018/19, although possibility this may need to be extended to cater for additional work that has been identified. The forecast saving is due to reduced scope of the upgrade following strategic decisions.
ICT - Cyber Security	60	0	35	25	60	0	0%	Qtr 4 2018/19	Options to ensure the Authority achieves the new Cyber Security accreditation and additional network and system improvements are being considered. Costs incurred to date are for software and monitors.
ICT - Asset Replacement / Licenses	236	113	60	63	236	0	0%	Qtr 4 2018/19	Annual asset replacement which forms part of the 3 year plan. PCs, ICT hardware and laptops which were provided at the beginning of this rolling plan are now due for replacement in 2018/19.
Total (Under)/Over	**13,975**	**2,576**	**872**	**10,377**	**13,825**	**-150**			

Transition Bids Spend Summary

(As of 25/01/2019)

TOTAL BUDGET AVAILABLE	**2,000,000**
TOTAL BUDGET ALLOCATED	**1,617,485**
TOTAL BUDGET AVAILABLE FOR ALLOCATION	**382,515**

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K29-601	**Comms and Engagement Resource** Effective staff engagement is critical to the delivery of the Organisational Development Programme. The capacity to deliver the level and breadth of intervention required does not currently exist within the organisation. This resource will lead on developing/deploying a range of communication and engagement interventions to increase the likelihood of successful delivery of the key projects in the programme and the desired cultural, structural and process changes.	Katie Mills	28/04/2015	32,993	25,643	01/04/2018	28/02/2019	Successful candidate selected and started post from March 18 **Delivered to date:** • Communication strategy written and approved to support the organisational development programme - completed 2016 • Improvements made in the frequency and quality of communications • Cascade started in March 17 • The Shout re-designed 18 by an external company in March and is in distribution. • Ongoing support provided to the OD and IRMP programme boards to ensure key messages are communicated • The website and intranet has been improved to ensure relevant and up to date content is available and found quickly • Corporate branding was refreshed and continues to evolve • Successful candidate started post from March 18 focussing on engagement of workforce and the community via internal and external communications • Social media content calendar in place • Additional resource has allowed for key projects to have a more focused comms plan, covering internal and external stakeholders • The EDI forum has a dedicated communications resource • Lead the communications elements of the RBFRS awards. **To be delivered:** • EDI objectives to be evolved and filtered into the brand of the organisation - ongoing • Processes to be implemented for effective ways of working across the team to ensure consistency of communications and engagement - ongoing

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	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	103,634	01/09/2015	31/12/2018	**PROJECT COMPETED** Additional monies identified to support the delivery of new core skills training to support behavioural and cultural change. **Delivered to date:** • Appraisal – 72 people attended to date (+5) • Coaching course - 48 people attended to date • Crucial Conversations course – 96 people attended to date (+8) • Managing High Performance – 33 people attended to date (+7) • Managing Sickness course – 74 people attended to date • Mentoring course – 52 people attended to date (+9) • Mindfulness course – 126 (+10) • Procurement framework skills – 12 people attended to date • Procurement overview – 20 people attended to date • Resilience – 84 people attended to date (+9) • Time management course - 65 people attended to date (+15) • Understanding the Fire Authority (previously Working with Members) - 78 people attended to date (+9) • Managing Disciplinary Investigations - 26 people attended to date (+10) • Recruitment and Selection: Interview Skills - 34 people attended to date (+19) • Writing effective Reports - 55 people attended to date (+26) • Mental Health Awareness Training – 507 total completed, 259 of these completed in Q3 • Media Interview Training – 65 total completed, all of which completed in Q3 **To be delivered:** • Wash up sessions and review of training requirements against training budget due to transition fund allocation being spent. • Procurement eLearning - extended to end of Q4

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K12-601	**HR Advisor Support** To ensure an HR resource with appropriate skills and knowledge is available to support Managers to execute necessary staffing restructures and re-organisation to effect organisation change.	Becci Jefferies	02/02/2016	162,500	137,618	02/02/2016	29/05/2019	Following the restructure of the HR and Learning and Development function, which saw a reduction in HR staff, funding for temporary HR resources was sought from the Transition Fund in support the delivery of various change projects. These resources can be flexed to meet needs and project timelines. Support is provided by 1 fixed term member of staff. **Delivered to date:** • Work with Heads of Service and departmental managers to assist with restructure activity including planning, reports design and consultation - Complete • Reviewed the operational leave policy • 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 • Armed Forces Covenant development • Two tier entry feasibility report • Additional HR support in place on temporary basis to respond to key projects • Development of PDI pilot to include behaviours - for pilot in Q1 • Contract, discipline Review • Recruitment Attraction Review - initial review • Equality Diversity and Inclusivity action plan development for consideration by the EDI forum • Positive action plan drafted • EDI intranet pages developed **To be delivered:** • Job profile review - Q4 • Commence implementation of actions from positive action plan by 31 January 2019 • Agree behavioural competency framework and action plan and roll out revised PDI process by 31.3.19 • Interview support for Remotely Managed Stations project by 28.2.19

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	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	Tony Vincent	07/06/2016	76,720	53,568	29/08/2016	31/08/2019	**Delivered to date:** • 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 whole-time 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 • Training and Go-Live on new Availability Service for Retained • Key member of the FireWatch Senior members forum • Liaising with Finance to ensure Station level Cost centre reporting is in place and correct • Acting Up payments in FireWatch • Testing of Mobilisation interface with TVFCS Vision Reference system (test environment only) • Assisting in setup of asset project at Station 2 • OTP reporting **To be delivered:** • Officer overtime payments in Firewatch (originally due to be delivered in Nov 2018, but delayed due to changes in Cost Centre requirements – estimated delivery in Feb 2019). • General FireWatch 7.6 ongoing support and training - ongoing • Setup and testing of new Self Service module - Setup/testing Mar/Apr 2019 – estimated live Apr/May 2019 • Setup and testing of Mobilisation interface with TVFCS Vision Live system (live environment) - Feb 2019 (delayed due to RBFRS change Freeze) • Testing and release of major Firewatch release version 7.7 (now in our test environment) - Initial testing started – UAT testing to start in April 2019 • Testing and release of major Firewatch release version 7.8 (when Beta version released by Infographics) - Aug 2019 (tbc)

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K17-602	**Data & Performance Analysis Manager** Resource for a 24 month period to rectify issues with data assurance emerging because of linkages and feeds between systems	Katie Mills	05/07/2016	92,000	40,096	24/10/2016	29/03/2019	**Delivered to date: -** • Original recruitment completed and resource started 24/10/2016, in post until Autumn 2017. • Restructure of team complete Autumn 2017. • New resource appointed 1st December 2017 • Improvements to quarterly performance reporting • Preparation for HMICFRS (first two data collections submitted on time) • Development of and preparation for new Corporate Measures for 18/19 • New SQL reports to reflect 18/19 Corporate Measures developed, released and communicated across the organisation. • Assessment of data integrity issues and development of plan to further review data flows and system development. • Investigation of issues associated with legacy methodologies and replacement with automatic processes with less room for error. • Scorecard decommissioned for cross organisational performance management use. • Development of shared methodology across TVFCS data teams for definition and assessment of OTB incidents. Resolution of multiple issues with RDS availability calculation. **To be delivered:** • Response to third HMICFRS data collection. • Continue data integrity work to further review data flows and system development to support effective performance monitoring, and migrate to business as usual • Decommissioning of scorecard for residual purposes • Annual Plan and Corporate Measure review and setting for 19/20. •Support to hubs in development of local plans.

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K19-601	**Development and Assessment pathway** Funding for a resource for 6 months to complete a full review of the current methodology used when assessing competence at operational ranks through understanding the "as is" situation, research on potential alternative models with and final recommendation for consideration provided	Becci Jefferies	05/07/2016	30,000	3,182	01/06/2018	29/06/2019	To assist in a full review of the NVQ methodology of determining competency is required. A bid against the Transitional Fund was made to undertake research and make recommendations on how RBFRS should deliver a competency framework for the future. **Delivered to date** • Scope of work agreed and PID written and approved • Phase 1 work – research undertaken • Equality Impact Assessment and communication plan development project group established. • Research provisions in other FRS • Questionnaire to stakeholders • Stakeholder workshops took place - 30.11.18 • Developing interim Station Manager (SMA) solution to support the Remotely Managed Stations / Flexi Duty Officer project **To be developed:** • Analysis of research to inform recommendations to SLT in Q4 - research completed by 31.1.19 • Progress to be monitored via Programme Board • Review resource requirements to be supported from transition fund - in line with Q4 decisions

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K22-602	**Temporary accounts officer** Funding for a temporary accounts officer for two years starting April 2017. This is the continuation of a post in the old structure that will be required while new ways of working are embedded within the department and the wider organisation.	Conor Byrne	02/08/2016	74,000	56,502	03/04/2017	29/03/2019	Prior to the Finance department restructure this post was financed from base budget. Currently, it is being funded by Transition Fund for a 2 year period whilst business process re-engineering takes place to streamline processes and improve efficiency. **Delivered to date:** • Resource recruited to start from April 2017 • Undertaking activities related to invoicing, accounts payable and receivable, cash management and credit control for the Fire Authority • Support to Trading company and dealing with invoices, carrying out credit control and cash management • Post to be required until the successful delivery of the P2P process • Tendering process commenced for P2P module which will be evaluated in Q4 **To be delivered:** • Support implementation of efficient P2P processes
K24-602	**Temporary procurement officer** Funding for an additional Procurement Officer for two years starting April 2017. This resource will assist in the change of how procurement will be delivered going forward over the next 24 months, as well as assist in the delivery of the Procurement service plan ensuring compliance, knowledge and advice	Conor Byrne	02/08/2016	90,000	51,452	14/08/2017	31/08/2019	This post is required while collaborative procurement options are being investigated. •**Post filled in August 17** • Contract register and work plan now being updated weekly • Contract repository review completed • Set up contract award process • Delivered range of new contracts including ALP contract, training, commodities, medical supplies as part of allocation of work within the team. • Supported the achievement of 90% of spend now in a formal contract. **To be delivered** • Monitor low level repeat spend remains compliant with RBFRS Contract Regulations • Ongoing achievement of annual Procurement work plan and service plan • Deliver procurement savings as reported to the Home Office • Support the delivery of new collaborative contracts across the Thames Valley

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	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	31/12/2018	30/06/2019	Introduction of a e-learning platform required to facilitate achieving the organisational development objectives **Delivered to date:** • 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 • Unsuccessful attempts to secure an individual to date with alternative recruitment options being evaluated **To be delivered:** • Learning from Development Assessment Pathways (DAPs) review required to further inform need. Requirements to be refined to inform specification and tender process. Exploring opportunities for potential joint procurement with OFRS and BMKFRS - await outcomes of project before finalising. • Draft job profile developed • Recruit temporary resource to develop learning resources and support progress with DAPs - Q4

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K27-601	**Dedicated mental health support post** A dedicated resource, to provide Mental Health Support in line with the Health, Safety and Wellbeing Strategy	Becci Jefferies	16/05/2017	29,195	26,208	30/08/2017	29/03/2019	Post created to support the RBFRS Health, Safety and Wellbeing Strategy and the Governments' focus on mental health and to assist with various initiatives to engage the Service. **Delivered to date:** • Mental Health and Wellbeing Adviser recruited in August however left in April • Recruitment of additional Blue Light Champions • Leadership session designed for Middle Managers - held on 1 Feb • Mental Health Strategy and Action Plan designed and approved via SLT • Training requirements identified • Training on mental health designed and piloted and mental health as mandatory training now being delivered • Training package on mental health to be delivered commencing Q2 **To be delivered:** • Wash up mental health sessions. Link to other training being delivered on mental health from training budget. To be funded separately due to transition fund being spent by end of Q4. • Continuation of mental health training to managers - continuous in to Q4 • Identify further initiatives in line with Health, safety and wellbeing - action plan (business as usual)

Cost Centre	Description	Owner	Date bid approved	Latest budget £k	Total Spend end Q2 19 (£k)	Start Date	Forecast End Date	Update
K28-601	**Asset Management project** Effective asset management is critical to ensure that RBFRS has effective control and governance of its assets to realise value through managing risk and opportunity, in order to achieve the desired balance of cost, risk and performance. The regulatory and legislative environment in which RBFRS operates is increasingly challenging and the inherent risks that many assets present are constantly evolving. Good asset management will translate the RBFRS objectives into asset-related decisions, plans and activities, using a risk based approach and so it is imperative that an organisation wide asset management policy is agreed and published and that all assets are identified, recorded and tracked.	Andrew Mclenahan	01/07/2018	79,629	45,869	01/07/2018	29/03/2019	**Delivered to date:** • Two staff recruited, in July 18, on agency basis to undertake asset identification, tagging and recording exercise • Pilot station (Wokingham Road) audit completed • Dee Road station audit started • Working Group established with regular meetings. • Statement of Requirements for asset management system written • Process flows and procedures written for asset identification, recording and tagging. • Overall policy drafted • Stations audits completed • Supplies and Asset manager appointed in Dec 18 **To be delivered:** • Future process for on-going asset management to be agreed • HQ asset audit to be completed by end of Feb '19 • Focus on management of Operational equipment, work to be rolled in to BAU
Total ongoing (open) projects				840,553	543,772			
Closing total for completed projects				776,932	776,932			
Grand Total				**1,617,485**	**1,320,704**			
Total budget allocated				1,617,485				
Total budget available for allocation				382,515				

Total spend:

Year:

15/16	£410,811.03
16/17	£515,435.12
17/18	£176,091.15
18/19 (To date)	£218,366.49
	£1,320,703.79

Procurement

(Data accurate as of 24/01/2019)

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

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

Project Number	Service	Contract Detail	Supply Type	Contract Status	Procurement Process	Collaboration	Contract Awarded Date	Contract Value (£)	CAP/REV	Awarded
511	HR	E Portfolio Qualification Software	Supply	Renewal	Tender	N	01/10/2018	49,000	Revenue	Awarded to Smart Assessor
512	Facilities/Fleet	Crowthorne Decant / Modular building for Crowthorne	Supply	New	Framework	Y	08/11/2018	21,000	Revenue	Awarded to Portakabin Ltd
520	Facilities/Fleet	Driving Licence Verification	Service	Renewal	Tender	Y	11/10/2018	28,000	Revenue	Awarded to Intelligent Data Systems (UK) Ltd
533	Finance	Treasury Consultancy Services	Service	Renewal	Tender	Y	31/10/2018	23,000	Revenue	Awarded to Link Treasury Services Ltd
538	Finance	Tax Consultancy	Service	Renewal	Tender	Y	29/10/2018	30,000	Revenue	Awarded to PSTAX (Lavat Consulting)
541	Facilities/Fleet	Drill Dummies (Manikins)	Supply	Renewal	Tender	Y	13/12/2018	50,000	Revenue	Awarded to Ruth Lee Ltd
554	BIS	Network and Server Resilience Services	Service	Renewal	Tender	N	22/11/2018	175,000	Revenue	Awarded to PLR Networks Ltd
563	HR	Staff Helpline - Workplace Concern	Service	Renewal	Waiver	N	22/10/2018	10,000	Revenue	Awarded to SaySo Ltd
574	Corporate Services	Lot 1 Communications, Media Campaigns and Lot 2 Crisis Management Support	Service	New	Tender	N	12/12/2018	100,000	Revenue	Awarded to Grayling Communications Ltd
580	Facilities/Fleet	Dry suit spares & repairs	Service	Waiver	Waiver	N	26/10/2018	20,000	Revenue	Awarded to Reed Chillcheater Ltd

Project Number	Service	Contract Detail	Supply Type	Contract Status	Procurement Process	Collaboration	Contract Awarded Date	Contract Value (£)	CAP/REV	Awarded
611	HR	Emerging Strategic Leaders Programme	Service	Waiver	Waiver	N	05/10/2018	20,000	Revenue	Awarded to The Windsor Leadership Trust
612	HR	Executive Leadership Programme - ELP	Service	Waiver	Waiver	N	05/10/2018	48,000	Revenue	Awarded to Fire Service College Ltd
614	BIS	MDT Airbus suite of Software / Airbus Suite of Software - Officer Radios Gateway Resilience Hydra DIS Hydra GIS	Service	Renewal	Waiver	Y	22/10/2018	10,000	Revenue	Awarded to Airbus Defence & Space
622	Corporate Services	Leadership Forum Venue hire	Service	New	Quotes	N	19/12/2018	20,000	Revenue	Awarded to Cumberland Lodge

Human Resources Performance

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

	Measure	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 YTD	Q3 17/18	Authorised establishment
STAFF IN POST	Wholetime	389	383	373		373	368	388
	Retained	74	74	78		78	70	91
	Control	41	40	40		40	39	39
	Green Book	149	149	153		153	138	179
	Total Number of Staff in Post	**653**	**646**	**644**		**644**	**615**	**698**
							Q3 17/18	
STAFF TURNOVER	Wholetime	6	8	10		24	5	
	Retained	4	5	5		14	5	
	Control	1	1	2		4	3	
	Green Book	10	9	3		22	7	
	Total Number of Leavers (Heads)	21	23	20		64	21	
	Staff in Post (SIP)	653	646	644		648	615	
	Percentage of Leavers vs. SIP	**3.2%**	**3.6%**	**3.1%**		**9.9%**	**3.4%**	
							Target	**YTD 17/18**
FEMALE STAFF	Wholetime	4.1%	4.2%	4.3%		4.3%	4%	3.5%
	Retained	5.4%	5.4%	7.7%		7.7%		5.7%
	Control	68.3%	70%	72.5%		72.5%		69.2%
	Green Book	57.0%	58.4%	59.5%		59.5%		55.0%
	Total	**20.4%**	**20.9%**	**22.0%**		**22.0%**		**19.5%**
							Target	**YTD 2017/18**
ETHNICITY FIGURES	Wholetime	4.9%	5%	5.1%		5.1%	5%	4.8%
	Retained	0%	1.35%	2.6%		2.6%		1.4%
	Control	2.4%	2.5%	2.5%		2.5%		2.5%
	Green Book	16.8%	16.11%	15.7%		15.7%		12.3%
	Total	**6.9%**	**7.0%**	**7.14%**		**7.14%**		**6.0%**

NB. 28 individuals hold more than one role (Dual Contract). This quarter there were 20 leavers and 16 new starters. No major trends have been identified following examination of the reason for leaving as the majority of staff that have left have retired or left for personal betterment.

Staffing figures have reduced this quarter even though we have recruited an additional 16 new members of staff.

Annual turnover, year to date, equates to 9.9%, if similar levels occur for the rest of the year this will suggest we will outturn at around 13%.

The number of employees from a BME background have increased by 0.14% from last quarter due to the staff in post figures reducing, two BME employees joining the service and one employee leaving. Compared to this quarter last year we are 1.14% higher. Overall performance stands at 7.14%, exceeding the current target of 5%.

The number of female firefighters employed in the Service has increased to 22 this quarter. This is due to two new female RDS Firefighters joining RBFRS. The percentage of female firefighters has increased from last quarter by 0.50% to 4.88%. We continue to exceed our target of 4%.

Of the 16 people recruited this quarter, two were from an ethnic minority group (1 Green Book and 1 RDS). Seven females were employed (four Green Book, one Control and two RDS).

The number of disabled staff employed by RBFRS has increased to 35 (5.4%). On further analysis of the data, one new starter and one leaver have a disability and two existing employees have been registered with a disability this quarter.

A positive action plan is in place and the recruitment project focuses on attraction as key objectives, aiming to identify and implement ways to attract individuals from a wider range of backgrounds.

	Measure	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 YTD	2017/18 Performance Q3 17/18	2017/18 Performance YTD 17/18
AGE PROFILE	25 and Under	35	31	37		37	22	22
	26-35	182	181	168		168	160	160
	36-45	223	219	220		220	214	214
	46-55	179	180	185		185	184	184
	56-65	32	34	33		33	33	33
	66 and Over	2	1	1		1	2	2
	Total	**653**	**646**	**644**		644	615	615
DAYS LOST TO SICKNESS	Short	383	464	548		1395	574	1371
	Long	532	575	672		1779	673	2311
	Total	**915**	**1039**	**1220**		**3174**	**1247**	**3682**

(RDS figures are not included as figures are calculated based on the average shift length and these vary considerably as many sickness episodes are recorded as unavailable).

Disciplinary Cases, Grievances and Complaints

	Number commenced in Q1	Number commenced in Q2	Number commenced in Q3	Number commenced in Year to Date 18/19	Number commenced Year to Date 17/18
Misconducts (including gross misconducts)	5	10	2	17	7
Grievances	5	4	5	14	4
Whistle Blowing	0	0	0	0	1
Use of RIPA	0	0	0	0	0

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

	Number commenced in Q1	Number commenced in Q2	Number commenced in Q3	Number commenced in Year to Date 18/19	Number commenced Year to Date 17/18
Complaints (External)	7	10	14	31	17

During Q3 we received 14 complaints where by 1 we failed to hit the 7-day response time. 9 of these were in relation to Service Delivery and the remaining 5 were from Prevention & Protection, Fleet or not aligned to a particular area.

Quadrant Three - Priority Programmes

(Summary as of 25/01/2019)

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Operational Maintenance of Competence Review	Dom Manton	• Training specification analysis progressed • Operational Competence policy published • Meeting with OFRS GM L&D to ensure alignment across the two services is consistent regarding the gap analysis of NOG training specifications. • Modules created and frequency periods identified and consulted with Rep bodies. • Completion of learning outcome documents • Firewatch elements built and tested • Paper to SLT October 2018 • Launched OTP for FF to WM 3 December 2018 • Communications message via OPS Bulletin, Videos on Siren and Cascade to support launch TRI removed for officers	• Officer OTP underway building on training specification analysis • Learning outcome documents for Officer OTP being developed • Requirements considered in line with FDO/RMS project introduction of new SMA positions Launch of Officer OTP to align to FDO/RMS project phase 1 implementation	G ↑	• Continual review of requirements in line with FDO/RMS project - need to ensure Officer OTP in place for new SMA staff appointments.

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Recruitment Project	Jacky Manning	• PDI Behavioral Framework pilot outcomes have been reviewed and project plan drafted to progress the Framework subject to SLT approval • A review of the Job Descriptions (JD) template has commenced (to include behaviours). Required to meet phase 2 RMS/FDO This is in advance of the full JD review scheduled for Feb-March 2019 • Attraction work stream has commenced with the development of positive action plan in line with EDI action plan. A task and finish group has been set up to plan and progress the "Positive Action Have a Go" events for the next Wholetime recruitment campaign and beyond. • The on-line recruitment portal is in full operation for support roles, feedback is positive to date. • New Intranet pages have been trialed through internal focus groups	• HR Intranet pages to go live 4 Feb 2019 • Confirm schedule of Positive Action Have a Go events and contents • Extend the use of the recruitment portal to include elements of the onboarding process • Recruitment portal contract meeting scheduled Jan 19 regarding completion of enhancement activity as per contract • Refinement of recruitment portal reporting function to develop standard quarterly MI reports. • JD review (Feb 19-Mar 19) • Report to SLT (Feb 19) – to agree Behavioural Framework and revised PDI form following pilot. • Complete project plan on how to integrate the Behavioural Framework into aspects of the career journey e.g. recruitment/promotion/ assessment	A =	• Impact of very high levels of HR work and support to other HR projects has impacted timescales – New HR Adviser recruited on a fixed term basis commencing 4 Feb 2019

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Continuous Improvement	Katie Mills	• Focus on the Protection Process reviews continue with Libreea • As-is processes now mapped out for the Procurement to pay processes and tender now live for end to end Purchase to Pay System for accounts and procurement • Scoping meeting held to help plan out the stages to process map out our crewing process • Prevention Project Manager now started with focus on the completion of the as-is process mapping • Attendance at a process mapping seminar facilitated by Libreea	• Continued mapping work on the protection processes to highlight quick wins • Continued focus on the prevention processes with support from the Programme Office • Crewing process mapping sessions to take place in January facilitated by Libreea • Monitoring for further opportunities	G =	• No project issues at this time

| Corporate Communications and Staff Engagement | Katie Mills | • Staff survey launched on the 17 September and ran for 4 weeks. The survey closed on the 15 October with a 59% response rate
• Initial results published in The Shout with further updates to be distributed regularly in Q4
• Continued engagement with the public and internal staff through updates to the website and intranet to ensure relevant content and news stories.
• 65 staff (Watch Managers, Group Managers, Station Managers, SLT and key green book staff) completed media training in Q3.
• Aide memoires and case studies prepared on key subjects (e.g. Finance, IRMP, Protection etc.) for publication on internal communication channels
• Intranet improvement action plan underway including work underway with Service Delivery to improve the search returns
• Support to the Strategic briefing and creation of the Strategic Briefing Pack for HMICFRS
• Key communications support on internal communications for HMICFRS
• Work underway to appoint a Communications agency to support with campaign work, crisis comms and reputation | • A further week of media training was planned for Q4 but has been postponed due to SMA assessments and crewing availability. It will be rescheduled for Q1
• Continued focus on intranet improvements
• Communications agency to be appointed | A
↓ | • Focus on the HMICFRS inspection and associated work has impacted the timescales for delivery of planned work |

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
HMICFRS Inspection Programme	Katie Mills	• HMICFRS survey available and communicated to the organisation to encourage completion • Communications continue with regular updates on progress and publication of key documents on Siren • Service Liaison Lead visited the service in November for a further engagement visit • Discovery week took place in December with four inspectors on site for a week • Visits to retained stations and various interviews with staff took place • Reports from the tranche 1 inspections published by HMICFRS • Pre-briefings organised for potential interviewees and focus group practice sessions to help improve confidence to participants • Resource support aligned to support the organisation of the inspection process within RBFRS	• Preparation for the strategic briefing in January • Preparation continues for inspection week w/c 28 January with continued communications and briefings to people directly involved in being interviewed by HMICFRS • Attendance by the CFO and Chairman at an HMICFRS event to share learning from tranche 1 and an outline of the proposed corporate governance inspection • Hot debrief planned for the 7th Feb for initial observations from the HMICFRS • Await publication of report in the summer •	G =	• No project issues at this time

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Reward and Recognition	Katie Mills/ Becci Jefferies	• New venue being sought for the annual awards ceremony which is planned for Q2 • Award criteria being reviewed to streamline and provide consistency for review • Bursary window opened providing staff the opportunity to apply for financial support across a range of training and courses	• Further opportunity to apply for bursary funding	G =	• No project issues at this time

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Development and Assessment pathways	Lorraine Sullivan	• Four stage project. Stage one timescales have been agreed for November delivery following review on capacity. Project meetings ongoing as per project plan. • Initial process mapping completed on 26/06/2018 • Questionnaire design completed and after a pilot was made available to target stakeholders for completion. The finalised questionnaire completion deadline has now closed. • Meetings with other FRSs completed and feedback is being reviewed and used to inform design • Initial review on policies and procedures has been undertaken • Stakeholder workshops have been arranged to seek views regarding future design • Stakeholder workshops completed	• Collation of all research / data continuing • Work on the alternate model high level design for all operational commenced • Design of SM A pathway underway – this includes content, delivery method, assessment, assurance, recording, timeframes etc. Proposal due for review 31/01/2019. • Roll out of SM A pathway ready for 30/04/2019	G	• Project recommendations due end of stage one have been deferred (date tbc) following requirement to focus on development and design of SM A pathway linked to RMS / FDO project.

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Leadership Development Programme	Nikki Richards	• Feasibility planning underway for a pilot of two cohorts for a supervisory course. Planning to start during Q4 but awaiting outcome of the RMS FDO project for potential attendees once the SMA process has completed • Design and content of the supervisory course to be planned • Leadership forum was held for people from across the organisation	• Course content for the supervisory course to be reviewed. Attendees will progress following completion of RMS FDO SMA process • Planning in progress to understand if further cohorts of the middle manager development programme can be completed. Taking into consideration further collaboration opportunities.	A ↓	• Focus on the HMICFRS inspection and associated work has impacted the timescales for delivery of planned work
Combined Remotely Managed Stations and FDO Project	Doug Buchanan	• PID • FBU secondment to project • Phase one implementation proposals designed and agreed by SLT/FBU • Phase one staff consultation 24 September to 23 October • SLT workshop to consider phase two proposals • SMA selection process complete to interview stage • Work commenced with SD managers ref implementation	• L2 courses and assessment (Feb/mar) • Preference exercises • Implementation of phase one 01 May 2019. • Agree phase two implementation plan – consultation April/May to include structures, roles, ways of working	G =	• Workforce planning to account for reduction in FDO prior to May

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Retained Support Unit	Doug Buchanan	• Gap analysis report presented to SLT • SLT agreement on final disestablishment plan (effective 01 January 2019) • Consultation exercise / placement exercise complete • RSU now fully disbanded	• Final report to conclude project	G =	No issues
IRMP 2019 to 2023	Doug Buchanan	• FA agreed draft for public consultation • Public consultation delivered • FA agreed 2019-23 IMRP and outcomes published		G =	No issues
New Fire Station at Theale	Alex Brown	• Remediation tender documents developed ready for release to market early January.	• Outcome of remediation tender will be known by early March 2019 in order to report to SLT on 19th March 2019 and Fire Authority at Management Committee on 8th April 2019. • VE process continuing in order to present revised estimated build costs to same timeframes as per above. • Revised programme timelines currently under development but are subject to the completion of the VE work.	A	• Once remediation tender process is complete, SLT and Fire Authority will be asked to approve the purchase of the site, subject to amendment to planning and with estimated build costs only. • VE work is now progressing in order to meet tight delivery timelines and to provide estimated build costs.

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Whitley Wood Project	Alex Brown	• SLT & Fire Authority approved recommendation to cease progressing with collaborative scheme at this site as it was not considered to provide value for money. A standalone scheme is now being developed to meet requirements of Training Centre and Fire Station.	• Project team working on concept design that meets complex and extensive needs of all site users.	**G**	• This project has changed significantly and will now look to deliver a standalone scheme that meets the Service requirements.
Firehouse Facility	Alex Brown	• Project now complete with practical completion issued on 25th September 2019.	• All outstanding snagging items are being completed. Project has entered 12 month defects rectification period.	C	• Project completed on time and on budget.
Crowthorne Refurbishment	Alex Brown	• Main contractor tender process continuing on schedule with all tender documents out with the market. • Station will be decanting to an alternative location during the build and a separate project plan is in place to manage this process.	• Outcome of main contractor tender process will be presented to SLT on 19th March 2019 and to Fire Authority at Management Committee on 8th April 2019. • Decant scheduled to take place during the Wellington College Easter holidays.	**G**	• On track, no issues raised

Project	Project Manager	Deliverables to date	To be delivered	RAG	Issues for Action
Caversham Road Refurbishment	Alex Brown	• Next 12 – 18 months will be devoted to design development with end users and key stakeholders. Once concept design is completed, more accurate build estimates and project timescales can be put forward however, these must be balanced with other key projects also under development. • Concerns were raised over the potential for extensive ground contamination under the site due to historic leakage from the underground diesel tanks.	• As agreed by SLT, the option that best meets operational and financial considerations is a complete re-build of the fire station on the existing site. • Initial ground surveys would suggest contamination is contained within a small area and is therefore not expected to have a substantial impact on site development. As the contamination has now been identified, the Service has a duty of care to rectify the contamination and make good the surrounding ground to avoid any cross contamination with neighbouring properties. • The future location of the Occupational Health unit will need consideration and a decision at SLT level, as that will have an impact on the design development process on this site.	G	• Early engagement with Historic England will ascertain any design constraints that will need to be taken into consideration. That engagement is currently taking place.

Quadrant Four - Risk

Corporate Risks (As of 20/02/2019)

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 money and ensure fire stations are at the heart of communities	• 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 • Ensure additional flexibility in project plans where planning consent is required	• Being developed. In service plan as work package for completion for April 2019 release. Progress is being made now fit for purpose project has been completed. This work will need to align closely with revised IRMP to ensure operational alignment. • Good progress with TVP on all projects and with other partners. All collaborative opportunities explored at outset of each project and engagement documented. Now part of TV Collaboration Board work stream and Collaboration Estates Operational Group • Professional services team working closely with Property Capital Projects team to bring the schemes forward through the planning process. Highlight reports and project updates to Programme Board and Fire Authority. • Property Capital Projects team needs to remain scalable to provide resources necessary to deliver Property Capital programme as per SAIF. Due to	13	10	

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
	• Ensure good and effective communication on progress • Establish a ten year asset plan through the Strategic Asset Investment Framework. • Establish clear processes for the development of each projects business case with gateway review at key stages	spread of projects now live, team is being restructured to ensure resilience. Paper to SLT. • PCP team working in collaboration with Finance team to produce revision of SAIF for February 2019. • Continued engagement with stakeholders at Berkshire OPE and wider collaboration conversations. • Forward Planner sets out entire programme of works across entire property portfolio to identify key milestones, ensure sufficient time is allocated to the planning process ahead of tenders and to avoid pinch points across the programme. • Communication through SLT and Programme Board with updates to staff through Cascade. Lead member, property development working group and management committee as well as regular Group Manager level meetings across all departments. • The plan will be reviewed on an annual basis in line with the medium term financial plan. • Strict project governance now in place with approved gateway process and change management process adhered to for every project. PCP team all progressing with relevant professional qualifications to ensure in-house team is competent and capable.			

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 Risk Score: 22**					
If collaboration, partnership working and shared service opportunities are not considered, developed and embedded which may become increasingly likely with the complexity and volatility in the current political and financial landscape. Then we can expect impacts on the effectiveness of our service provision and on our financial position which would then affect the delivery of our legal duties and the Authority's strategic objectives	• Actively drive and engage with the Thames Valley strategic collaboration board • Continue to manage projects through programme office processes and report on updates.	• Governance arrangements now in place to lead and oversee collaborative projects. Development of collaboration document including terms of reference for sign off by constituent authorities by end of Aug 2018. • Regular highlight reports to Steering Group, Executive Board and RBFRS Programme Board to ensure progress and scrutiny	12	12	⟷
Firefighter Safety (Risk: 417) Risk Owner: Deputy Chief Fire Officer **Inherent Risk 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.	• Monitoring experience levels on RDS stations • Operational assurance framework processes, ensuring firefighter risk management, are being monitored for effectiveness and changes implemented as necessary. • Monitor operational competency • Monitor operational refresher training • Alignment of RBFRS Operational Policy and Guidance with the National Operational Guidance (NOG)	• Further review to be undertaken early in Q4 to look at impact of new RDS personnel becoming qualified • OA policy due to re-publication end of Feb, additional guidance and process for Ops discretion will be in place. • Percentage of eligible staff in qualification monitored through SPB, SLT and Audit and Governance. Performance measured against core areas of the Fire Professional Framework • OTP live, SD working with L&D through RSG to identify issues in implementation. Majority of watches OK, working through performance issues with outliers • This work is being delivered through the Thames Valley Delivery Group as part of TV Collaboration. OFRS officer leading with officers from across all 3 services supporting. Policies and procedures being monitored/maintained during transition.	19	19	⟷

ESMCP (Risk: 418) Risk Owner: Deputy Chief Fire Officer
Inherent Risk Score: 18

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
If we do not make sufficient provision of resources to support the development, transformation to and implementation of ESMCP products and capabilities at a Service level, then we will not be a part of the proposed Emergency Services Network and we will be out of step with national and regional partners across the three emergency services. This could significantly impact on the effectiveness of our operational mobilization and response and limit access and use of operational technology to support incident command and joint emergency services interoperability. Consequently this could impact negatively on our collaborative and partnership working and our public and political reputation.	• Service level project board to oversee RBFRS delivery across national programme 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 • RBFRS review of implications of National Programme move to an incremental approach to ESN delivery. To be completed with a 75% of assurance and fed back to National Programme by September 2018. Interim positions of 25% and 50% in June and August. • Development of delivery options and plan to support ESMCP take on by ESMCP indicative date of Dec 2022	• Head of BIS internal sponsor. Appointed PM in place. RBFRS project Board in place. Board tasked with developing RBFRS options under new ESN incremental delivery model subject to FBC publication. • Current commitments remain sufficient. Monitoring commitment to work streams in context of developing narrative National Programme of a move to an 'incremental approach to ESN'. Reviewing current Prog Mgt provision with SC partners. • Continue to attend FCG for updates and input to National Programme. Attendance impacted during Dec/Jan due to HMICFRS Inspection commitments • Contact maintained through SC Board. Police and SCAS relationships maintained. Unclear how incremental approach will impact collaboration opportunities though regular discussion maintained. Current consideration for joining up on assurance testing. • Work continues within TVFCS. Vodafone putting in place DNSP connection. Some delay in ICCS upgrade. No concerns over progress given move to incremental approach and no identified funding issue in this area. • Update to A&G made 01 Nov 2018. Permanent Sec written to in line with A&G request inviting attendance to future A&G meeting. • National Programme confirmed incremental approach Sept 2018. Programme still subject to Full Bus Case review, now due March/April 2019. Work streams continue to progress where they can making necessary business assumptions. • Return on 06.06.18 on RBFRS approach - 25% assurance. NP sought further returns made. RBFRS	14	14	↔

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
		developing options for delivery based on incremental delivery. A&G Inf 01 Nov 18. • Work in progress through project board but subject to FBC by national programme			
Operational Availability, Crewing and Capabilities (Risk: 419) Risk Owner: Deputy Chief Fire Officer **Inherent Risk Score: 21**					
If we fail to maintain appropriate numbers of personnel and associated skills and knowledge requirements, in line with our planned establishment and current or future demands, then we can expect this to affect our ability to provide an efficient and effective level of service delivery that matches our commitments and stakeholder expectations. This could significantly impact community safety and organizational reputation.	• Focus on RDS recruitment, training, succession planning and retention • RDS management and training support • Watch management accountable for management of leave policy, maintaining an accurate crewing forecast and ensuring appropriate level of qualifications on watches • Hub managers accountable for ensuring leave policy adhered to, watch levels are managed across stations and vacancies are managed. • OPAS accountable for monitoring and reporting on crewing levels across the service (WDS, RDS and FDO) • On-going proactive management of service delivery workforce planning needs through the Workforce Planning Group • RDS Working Group and RDS User Group established post RDS project to maintain focus on recruitment, retention, training and succession to build and maintain sustainable RDS capability • Completion of process mapping and improvement planning of systems and processes supporting availability, crewing and succession planning.	• RDS establishment at 78 at end Q3 compared to 61 Q4 2017/17. Identification of personnel for L1 underway with candidates passing assessments early Jan 2019 • Ongoing and increased support from WDS hub stations. Review of assessor support underway with R&D • Improved reporting on use of PAOT will be used to identify key issues affecting crewing. Hub level processes in place to capture performance issues • Restructured and refocused SDMT to scrutinise crewing, PAOT, corporate performance etc. • Improved reporting using state 25 report gives increased scrutiny and oversight of availability. T&F group to look at reporting into workforce planning. New recruits on stations Q3 18/19 • Group meeting regularly with long term forecasting in place and promotion/recruitment requirements planned forward and linking with developing OPAS work. recruitment for 2019 agreed through SLT • RDSWG draft business plan to be in place for 19/20 • Librea work underway expected to report in Q4	14	14	⬌

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
Capacity, Capability and resilience (Risk: 422) Risk Owner: Director of Support Services **Inherent Risk Score: 21**					
If RBFRS fail to increase the capability, capacity and resilience of our workforce which may become increasing likely as we lose knowledge through retirement of experienced staff, and require new skills and additional capacity to help us responds to the changing demands of the workforce reform programme and vision 2019, then we can expect to fail to deliver against our statutory requirements and broader organisational development objectives	• Revise the RBFRS people strategy, taking in feedback from the recent peer review and National CFOA 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 • Increase flexibility of recruitment policies to enable RBFRS to attract and retain the best staff • Review reward and recognition arrangements for all staff • in terms of resilience we have a number of grey book staff who have been in temporary positions for a considerable then of time and through the workforce planning group we need to determine a plan to substantiate position where possible • Intelligence shows that over the next 6-12 months we will need to develop a plan to run selection and recruitment programmes for all grey book posts from FF to ACFO to enable us to have sufficient capacity, capability to deliver the service	• Strategy has been agreed and through consultation. Work is now starting on developing the detailed action plans. A number of related project plans agreed and monitored through PB. • Workforce planning now incorporates ODPLG elements. Standard rpt workforce info. IRMP project impacts identified, promotion schedule agreed, monitoring activity & pools for succession, specific Task & Finish group set up. WT FF no.rec identified • Middle Manager development programme embedded with majority of MM now completed. Full evaluation of programme to come to SLT. • Recruitment PID agreed PB March/ updated May. Work leads assigned, priorities identified, regular review on progress via project meetings in between PB meetings. Portal secured. Focus positive action and recruitment • This action forms part of the People Strategy and will also be picked up in the recruitment project. Meeting with HCS scheduled in New Year for further review • This is a new treatment designed to respond to a growing concern around temporary roles. Temporary chains considered as part of the Workforce Planning Group last 17/12 - impacts of IRMP projects considered • We are at the early stages of the treatment and will be seeking external support where possible. Promotion process for GMs, SMs etc. identified. WT recruitment/funding agreed via SLT	18	18	↔

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
Failure in delivery of ESMCP National Programme (Risk: 425) Risk Owner: Deputy Chief Fire Officer **Inherent Risk Score: 22**					
If the ESMCP National Programme fails to deliver a new Emergency Services Network (ESN) or key component parts of ESN that properly enable FRS mobile communications, then the service risks not having robust mobilisation and communications systems to support operational crews and officers or insufficient time to implement its own replacement systems. This would directly impact delivery of services and consequentially public confidence and reputation.	• Programme Management structures for SC Region • Communication of service and regional concerns through Fire Customer Group and NFCC lead. • ESN National Programme change to an incremental approach to ESN delivery - Review of impacts to be completed June - Sept 2018 - incl extension of airwave implications and appetite for phased product adoption. • Informing of FRS position to National Programme through the NFCC.	• 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. • June return made to ESN National Programme re incremental approach (see risk 418). Project Board developing options for take on of ESN subject to FBC completed by National Prog early 2019. To go to SLT and TVFCS. • CFO providing input through NFCC council. NFCC chair and LGA chair wrote to Perm Sec Aug 2018 with response received November 2018.	18	18	↔
Fire Service College (Capita) (Risk: 479) Risk Owner: Head of HR and L&D **Inherent Risk Score: 13**					
If the Fire Service College fails to deliver its services, which may become more likely given the financial health of the parent company (Capita PLC), then we can expect to see a cessation or reduction in the availability of training courses for new firefighters and existing staff (covering a range of areas), which will be significant in relation to our need to develop and	• Monitor training needs and bookings with the FSC to ensure courses are to be delivered as planned • Identify other providers of training • Reorganise commitments internally as necessary to accommodate any changing circumstances • Regular financial health monitoring	• Training Plan for 2018/19 outsourced training considered - No difficulties identified in accessing training to date, monitoring continues. Training requirements for 19/20 in train leading to procurement as appropriate • Provider options considered in relation to training need, availability and cost. Alternative providers for most training known to organisation. To be reviewed in line with 19/20 training plan • Assess requirements as circumstances dictate. Procurement of 19/20 and ongoing FF recruitment to be considered.	10	10	↔

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
maintain a safe and competent workforce.		• Monitoring of the financial health of capita provided via procurement for awareness			
Ongoing viability of Capita Communications and Control Solutions (Risk: 480) Risk Owner: Head of Business Information Systems **Inherent Risk Score: 20**					
If Capita Communications and Control Solutions ceases trading, is sold or divested, or stops providing services to RFBRS, which is an increased possibility given Capita Systems recent profit warning, then we can expect software and hardware support for the Vision Mobilisation and control systems to be disrupted, degraded, or cease altogether, which is significant in respect of our Service delivery response, and Collaboration objectives	• Monitor corporate and financial health of Capita Communications and Control Solutions	• Ongoing monitoring continues - no major issues or alarming trends developing. Update - no significant change in credit position but some additional negative press coverage has recently come to light	13	13	↔
Impact of GDPR Non-compliance (Risk: 481) Risk Owner: Head of Business Information Systems **Inherent Risk Score: 18**					
If we do not manage the service's compliance to GDPR requirements, which is increasingly likely due to impending legislative enforcement, then we can expect increased likelihood of negative reputational impact and significant financial penalties in the event of a personal data breach.	• Central Policy updates to reflect GDPR • IG Team resourcing • GDPR compliance tracking • Investigate/implement Subject Access search and rights application system to reduce organisational overhead and time to respond to SARs	• Update: Information Sharing policy published. GDPR based audit Completed. Results expected imminently. • Additional resource is being sought to alleviate routine workload from key existing resources. Update: Candidate no longer available. Ongoing discussions on organisational change to ease recruitment issues • ongoing tracking of progress against action plans - 88% complete as of 14th February, with an estimated completion date of Mid-April 2019 based on current rate of progress • Initial research into potential solutions started - utilising Gartner magic quadrant for research. Update: Onsite demo arranged for February	13	13	↔

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
Management of Corporate Data, Information and Knowledge (Risk: 482) Risk Owner: Head of Business Information Systems **Inherent Risk Score: 17**					
If RBFRS fails to effectively manage the sharing, control and distribution of corporate data, information and knowledge, which is increasingly likely due to the increasing complexity of data flows into, out of and within the organisation, as well as 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 out strategic objectives	• Create a data classification framework to ensure that appropriate departments and individuals are sighted on the data classes their role(s) demand, and which defines the management and handling of specific record types. • Create an Information Sharing policy to ensure that consistent handling of critical information is defined • Review and update email distribution lists to reduce unnecessary exposure to information • Create a document management policy to clarify the lifecycle management of information types and permissible modes of storage/transmission • Create Process and Standard Operating Procedure documentation for business critical information flow management to cover inbound, outbound and intra-service information flow • Establish learning/comms Vehicles to ensure consistent familiarisation and awareness of information management processes and procedures	• Draft framework accepted. Work has begun to draft the business case for necessary resourcing to progress. Update: Scope and deliverables in refinement prior to SLT review • Treatment Completed: Information Sharing Policy published • Initial scope identified and tangible deliverables documented. Ongoing examination on lists in action • Document Management policy in draft revised target date March 2019 • Initial scope identified and tangible deliverables documented. Further effort will come out of the draft classification framework document set. • Initial scope identified and tangible deliverables documented. Further effort will come out of the draft classification framework document set.	16	16	↔

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
Data reliability, validity and analysis (Risk: 483) Risk Owner: Director of Support Services **Inherent Risk Score: 21**					
If we fail to maintain reliable systems and accurate data that supports effective and timely analysis and continuing improvement of knowledge about our activities and their impacts, then we will not be able to make informed, evidence based decisions, manage and improve performance of services, report effectively on this performance to the Fire Authority and the public and respond to audit needs - such as HMICFRS. This would substantially undermine our financial and resource efficiency, operational effectiveness and our political and public reputation.	• 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, ensure scope of responsibility is clear and use of analytical capacity efficient. • 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 • 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. • Build links with analysts and data managers in partner FRSs, Home Office and HMICFRS to ensure any issues and efficiencies are identified.	• TV mapping and modelling steering group now reports into TV collaboration board. PID for development of mapping to be brought to SLT. Reviewing data systems and development projects will continue following review of the data function. • DPAM secondment extended until end March 2019 to allow review of data and performance team to ensure this function is able to meet new and emerging organisational requirements. • Training requirement submitted for 2019/20 with some flexibility for developing requirements. Ongoing identification of training needs alongside development of skills. Investigating Cadcorp training for whole team for resilience and future proofing. • Agreed an approval process with BIS for commissioning and approval process of data reporting to ensure data integrity. Fortnightly meetings in place to monitor progress on development work. • Significant progress made as part of development of 18/19 Corporate measures. Review of RDS Avail complete, automated, and added to SQL report. Process for 19/20 Corp Measures underway, to include evidence input from D&P team. • Scorecard no longer used as performance tool. Residual use in modelling to be addressed. SQL reports in place since start 18/19, fortnightly meetings with BIS to address issues emerging. • Continue to engage where possible with BPI programme re prevention and protection data entry and quality. Identification of immediate issues made on an ongoing basis. • Developing communication channels with hub managers. Support provided for use of sql reports.	15	15	↔

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
		Advice offered for development of station plans and performance. Data input and process focus continues to have an impact on value added here. • Completion of two data requests. Assessment of data requested and national picture in progress. Development of protection element of IBIS to improve and allow reporting on premises in progress. • Continue to build contact with HO analysts. Key role in developing new TVFCS performance data group, and attendance at data systems meetings. Shared definition for OTB developed collaboratively using RBFRS definition template.			

Response to Home Office Reform Programme (Risk: 484) Risk Owner: Director of Support Services
Inherent Risk Score: 21

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
If RBFRS fails to meet the expectations of the Home Office Fire Reform Programme and fails to deliver against the revised national framework as monitored by the HMICFRS Inspection Programme, which may become increasingly likely given absence of clarity on the details of the inspection programme, then we can expect to receive a lower than desired inspection assessment, reputational damage and loss of public confidence which will be significant in our ability to meet our strategic objectives.	• 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, directly and through national and regional consultations and events, to ensure ability to plan against emerging programme. • 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.	• Corporate Plan and IRMP 2019-23 aligned to National Framework (including HMICFRS), has concluded its consultation phase for report to Fire Authority. Reporting to quarterly SPB and bi-monthly Programme Board on project progress in place. • People Strategy published. Projects have been started on key focus areas and long term plan being developed to understand timescales for the delivery of the remaining activities. Project tracker in place. • Responses to consultations and attendance at events. SLL engagement visits completed. Attendance by CFO and Chairman of FA at HMICFRS event to discuss progress and emerging themes and share thinking about the corporate governance inspection • Core project group set up with additional resource available if required. Two data submissions, document request, self-assessment and discovery week completed. Engagement Visits continue for SLL. Inspection week planning underway	15	15	↔

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
	• Identify stakeholders and develop a communication plan to ensure all stakeholders are fully informed in relation to the Inspection Programme plans and RBFRS preparation.	• A standard service plan objective for HMICFRS involvement has been developed and agreed for use across the organisation for 2018/19. Following completion of inspection, requirement actions to be incorporated into 2019/20 corporate planning. • A communication plan for staff and FA members has been developed and continues to be rolled out with updates as required. Work ongoing around organisational awareness of inspection processes, including workshops and 1:1 meetings.			
Volatility of funding (Risk: 506) Risk Owner: Chief Fire Officer **Inherent Risk Score: 24**					
If RBFRS fails to receive sufficient funding, which is becoming more likely given the level of national debt, the Government's fiscal policy, increasing volatility in local funding and increasing budget pressures, we can expect to face further reductions in service delivery and a loss of public trust, which will severely impact on our ability to deliver our statutory duties and strategic objectives.	• 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 • Engagement with fire minister and Home Office Officials to explain and clarify RBFRS pressures and risk/ demand methodology. • Write to all Berkshire MPs to gain support for our return to Government for the Local Finance Technical Consultation	• Responded to Central Government on 2019/20 Local Finance Technical Consultation. Engagement with Berkshire MPs has been encouraging and engagement continues. • Responded to Central Government on 2019/20 Local Finance Technical Consultation. Engagement with Berkshire MPs has been encouraging and engagement continues. • Will respond to the consultations on business rates and the fair funding formula. • Correspondence has been exchanged between minister and officials and a conference call has taken place on 11 May. • Chairman has written to all local MPs to canvas support for flexibility in precept funding.	18	18	↔

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
Management of Resources (Risk: 507) Risk Owner: Assistant Chief Fire Officer **Inherent Risk Score: 24**					
If we fail to manage resources tightly which is more likely in the short term given that the organisation has undergone substantial restructuring then we can expect that resource utilisation will be sub-optimal which will negatively impact on our ability to deliver an efficient and effective service to the public.	• Robust internal budget monitoring and management processes • Initiate budget setting process for 2019/20 in September • Agility in internal planning processes to ensure delivery plans are matched to Medium Term Financial Plan • Effective and flexible Treasury and Reserves management • Established relationships with 3ES partners across region to ensure sharing of information and collaboration opportunities identified.	• Q3 revenue and capital budget monitoring will be presented to Management Committee. • Detailed budget setting is progressing well and individual cost centre budgets for 2019/20 will be available in March • Planning for IRMP projects delivery is in place. • 10 year capital strategy presented to Fire Authority in July • On-going treatment. Work with Police, regional FRS's and SCAS through range of forums (ESMCP, SEORRG, LRF, BRG TV Collaboration and Partnership etc.).	13	13	⬌
Property Capital Projects - Theale (Risk: 516) Risk Owner: Head of Property Capital Projects and Estates **Inherent Risk Score: 22**					
If the site remediation works are more extensive than surveys indicate, which is possible on this site, then we could see an increase in the costs to carry out the remediation works.	• Site remediation will form part of a separate tender to the main build contract in order to work more closely with the specialist contractors to identify the works and strategy to remediate this site in line with requirements for build contract. • Negotiation with site owners to ensure they are fully informed of state of remediation and impact on purchase negotiations.	• Responses to the contractor engagement has indicated that the site is viable and the team will now progress with full tender process to return an outcome by March 2019. • Network Rail are regularly updated and will have sight of the remediation tender results on an open book process.	22	22	⬌

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
Capacity to respond to Subject Access Requests (Risk: 556) Risk Owner: Head of Business Information Systems **Inherent Risk Score: 18**					
If we receive a significant volume of Subject Access Requests, which is increasingly likely due to recent introduction of new rights under GDPR/the data protection act 2018, we may be unable to respond within legislative timescales due to the complexity of subject data searches within RBFRS.	• Increase Capacity of Information Governance team to process and manage Subject Access Requests • Investigation of tools and processes to reduce overall information search effort	• Update: Candidate now unavailable - alternative strategies under examination • Discussions with IG team and ICT team regarding process improvement options in progress. Update: Onsite tools demo now arranged for February 2019	18	15	⬇
Employer Pension Contribution Increases (Risk: 559) Risk Owner: Assistant Chief Fire Officer **Inherent Risk Score: 24**					
If RBFRS fails to receive sufficient government funding to pay for increases in the employer contribution rates of firefighter pension schemes, which is likely given the squeeze on public finances, we can expect to face further reductions in service delivery and a loss of public trust, which will severely impact on our ability to deliver our statutory duties and strategic objectives.	• Political engagement with Central Government to ensure new pension burdens are matched with new funding • Political engagement with Government to remove precept cap and referendum requirements which will allow additional flexibility in local funding to meet pension burdens • Engagement with Central Government, through Political lobbying, Fire Finance Network and NFCC, on new Fire Funding proposals to take account of pension burdens • Write to all Berkshire MPs to explain pension pressure	• NFCC has written to the Chief Secretary to the Treasury to lobby for additional funding to cover the pension increases	24	24	↔

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
No deal EU exit (Risk: 561) Risk Owner: Deputy Chief Fire Officer **Inherent Risk Score: 21**					
If a 'no deal' EU exit happens, which is becoming more likely given the political uncertainty surrounding the governments proposed deal the we can expect potential disruption to goods, services and finance and personnel which is significant in managing and delivery our core services	• Produce action plan to address mitigation/treatments for sign off at SLT • Escalate significant risks through LRF EU response structure	• HoS meetings in place to review progress against action plan. progress currently on track for completion ahead on 29 March • Through TVPAT liaise with EA over potential issues with waste sites and stockpiling of chemicals	n/a new risk	18	n/a new risk
Firefighter Pensions (Risk: 563) Risk Owner: Head of HR and L&D **Inherent Risk Score: 21**					
If we do not comply with the various pension regulations and keep up to date with pension arrangements; which is becoming increasingly likely given the complexity, frequency of changes and limited pensions expertise and capacity within the HR department, then we can expect to be in breach of the regulations, subject to scrutiny from The Pensions Regulator, potential enforcement and penalty notices and adversely impact employees and pensioners, which are significant in respect to our financial security, employer duties and our reputation.	• Pension Audit -Audit activity by the Pension Administrators and RSM to ensure application of regulations and accurate records exist • Pension Board - Pension Board to ensure the Employer is responding to legislative changes and requirements e.g. various survey • Technical Expertise - Engage in Pensions forums and workshops to access up to date information and share learning • Scrutiny - Provide six monthly performance reports to Audit and Governance Committee from the Pension Board • Administrator - Ensure Pension Administrator provides regular monitoring reports indicating performance against SLAs and legislative changes and other administration requirements • HR team - Regular review of bulletins and communications to ensure action is directed to the correct place and timelines can be met. Regular engagement with Finance department. • Finance Team - Monthly reconciliation of Pension Account	• Next audit scheduled week commencing 18 Feb 2019 • Pension Board are reviewing communication and are allocated actions to ensure both the employer and Administrator complete activities to deadlines • Engagement in regional pensions meetings and via WYPF. Finance and HR reps attend LGA conferences as appropriate • Six monthly reports now provided to A&G - last December 2018 • Monthly reports provided and updates on specific actions arising from Pension Bulletins confirmed and shared with Pension Board for scrutiny. • Review of bulletins issued each month - actions and progress recorded on HR pensions action plan. • Monthly reconciliations completed by Accounting Manager, any discrepancies raised with HR, payroll provider and made known to WYPF as necessary	n/a new risk	18	n/a new risk

Risk	Key Controls and Mitigations	Risk Movement	Q2 risk score	Current Risk Score	Direction of travel
Asset Management (Risk: 565) Risk Owner: Deputy Chief Fire Officer **Inherent Risk Score: 21**					
RBFRS needs clear visibility of assets and equipment through records, maintenance regimes and management systems to ensure effective use, efficiency and safety throughout their lifecycle. Failure to do this could led to assets and equipment that are not fit for purpose remaining in service, higher than necessary costs and a potential increase in the likelihood of equipment failure.	• We are maintaining existing mechanisms for recording assets and equipment to support maintenance regimes. • Established maintenance schedules for vehicles and equipment and PPM for Buildings. • Roles in place for operational management and improvement of assets and equipment (vehicles, equipment and buildings). • New ways of working and revised policy and processes to improve visibility and on-going lifecycle management of assets. • Consideration of existing and potential alternative management systems and tools to underpin and improve any renewed ways of working, policies and practices.	• Tranman in place for vehicles; Firewatch in place for equipment requiring on-going maintenance or managed lifecycle; Kier maintain records of electrical and mechanical building assets for service and maintenance. • Fleet and equipment being managed to planned schedule. Statutory compliance near 100% for buildings. • Fleet manager and Team ensuring compliance with servicing schedules; REO, Supplies and Assets mgr. and equip. techs ensuring Ops. Equip. recorded, managed and serviced. Facilities Mgr. & team managing facilities and overseeing compliance. • Asset information has been gathered during Q3/4 2018/19 of assets across all buildings. New Supplies and Assets Manager appointed 02 Jan 2019. Work now underway to develop business case • No new systems will be considered until further work has been completed on improving ways of working and processes for management of assets.	n/a new risk	18	n/a new risk

Accident Investigations

Measure			Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2018/19 Y.T.D.
Accidents Requiring Investigation		Minor	12	9	10		31
		Moderate	6	7	2		15
		Major	0	0	0		0
Near Misses Requiring Investigation		Minor	5	4	0		9
		Moderate	4	10	8		22
		Major	0	2	0		2
*Accident Investigations Outstanding		Minor	0	0	0		0
		Moderate	1	0	0		1
		Major	0	0	0		0
*Near Miss Investigations Outstanding		Minor	0	0	0		0
		Moderate	3	0	0		3
		Major	0	2	0		2

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

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

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

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

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

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

Near miss definition: An unplanned event including damage to equipment and property that had the potential to cause death, injury or ill health.

Accident categories may be re-categorised at any point before or during the investigation, which can retrospectively affect the numbers.

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

Audit Recommendations

The audits shown have been undertaken and recommendations agreed. The information provides a progress on those open recommendations as of 31/01/2019.

Ref:	Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Date of Audit Report	Allocated to
156	**Procurement Advisory Review**	Recommends RBFRS considers investing in contract management software which may serve as a repository of documents alongside providing other information such as key trigger dates within contracts.	31/12/2018	31/12/2019	n/a	The Authority is currently planning to purchase an additional Sage module that will encompass this information and link this to the scanned copies of live contracts on the S drive. This work will commence in July 2018. UPDATE June 18: Current Sage supplier has been asked to provide P2P module options that will work with Sage but is not limited to Sage only so portable to any new software the Authority might move to in future. Update July 18. Libreea are mapping current P2P manual processes August 18. Project brief to commence full review and identify options and business case for a new P2P solution to be considered by SLT 7th Aug 18 UPDATE October 2018: Delayed due to other priorities P2P tender ready for issue to potential suppliers November 18 UPDATE Jan 19 : Tender issued to the market and incorporates a requirement for contract management software. The P2P implementation is then due to commence in quarter 2 18/19 following completion of the year-end accounts process, and is expected to complete within 6 months	AMBER	07/12/2017	Procurement Manager

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

Audit Recommendations Closed during Q3

Ref:	Audit Title	Audit Action	Date by:	Revised Completion	Priority	Progress	Date of Audit Report	Allocated to:
151	**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	31/12/2018	Medium	Software inventory portal is now fully populated with all software licensing and contractual information and we have a comprehensive view of our licensing disposition. The largest exposure area (Microsoft) is now fully compliant from a licensing perspective. We are now shifting to business as usual in terms of ensuring where a licensing compliance issue is highlighted, actions are put in place to remediate (license purchase, local license reconciliation or software removal, as appropriate). This action is therefore complete. The tools have highlighted a number of areas where we are over-licensed and so in time this capability will reduce RBFRS software licensing costs as well as ensuring ongoing full compliance across the software estate. Additionally we now have automated alerting of upcoming contractual renewals, reducing the risk of unplanned emergency contract renewals and unnecessary workload for both the ICT and Procurement departments.	06/12/2017	Head of Business and Information Systems (HBIS)

Ref:	Audit Title	Audit Action	Date by:	Revised Completion	Priority	Progress	Date of Audit Report	Allocated to:
153	**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.	31/03/2018	31/12/2018	Medium	Snow Automation module has been successfully implemented, and we now have a complete view of all versions of all software installed on RBFRS computer systems Configuration to automate the installation and removal of software has been completed, and the first target application for automatic removal has been done. We now move to business as usual in terms of removal of legacy software when detected, Therefore this action is closed. Additional capabilities to be introduced in Q4 over and above action compliance include links to our service catalogue to allow self-request, automatic approval routing and automatic installation of software by the client, as well as automated usage monitoring and software removal or license recycling for current software not being used by a client. This should begin to show software licensing cost savings in the future.	06/12/2017	Head of Business and Information Systems (HBIS)
157	**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	31/07/2018	n/a	Report went to the Thames Valley Collaboration Executive Board in November 18	07/12/2017	Procurement Manager

Ref:	Audit Title	Audit Action	Date by:	Revised Completion	Priority	Progress	Date of Audit Report	Allocated to:
159	**Timesheets and Timekeeping**	Management will streamline the policies where possible into fewer documents, enabling more swift updating and review of policies	01/09/2018	31/03/2019	Low	Policies have been considered to identify where amalgamation can be undertaken. At current time it has been identified that the WT , RDS and Green book Annual leave policies need to be separate	01/03/2018	HHR & LD
160	**Timesheets and Timekeeping**	Guidance relating to the parameters for completing the timesheets in practice will be included in the Flexible Working Hours Policy. Once completed this will be communicated to all current and future non-uniformed staff and those who manage non-uniformed staff.	01/09/2018	31/03/2019	Low	Guidance on how to complete annual leave on FireWatch time sheets has been published within the Firewatch guidance section on Siren. Drop in sessions for staff have been held to demo the new timesheet/ annual leave authorisation process and the recording requirements. The new process is now in operation and the Annual Leave Policy for green book staff published.	01/03/2018	HHR & LD

Ref:	Audit Title	Audit Action	Date by:	Revised Completion	Priority	Progress	Date of Audit Report	Allocated to:
161	**Timesheets and Timekeeping**	Management will implement a reference guide for activities and type of leave to be used within the Firewatch system	01/09/2018	n/a	Low	Complete	01/03/2018	HHR & LD
167	**Timesheets and Timekeeping**	Policies will be amended to state under what circumstances staff may enter their own leave	01/09/2018	31/03/2019	Low	The guidance document regarding leave types for FireWatch has been produced which details when an individual can enter their own leave.	01/03/2018	HHR & LD
181	**Facilities Management**	Details of defects and work required, arising from the planned maintenance visits undertaken by Kier, will be maintained.	Oct-18	n/a	Low	Kier concept system now up to date and cleansed.	29-Nov-18	Facilities Manager
182	**Facilities Management**	Management will consider to either maintain an independent list of these, in an Excel document for example, or to have these recorded against the relevant locations in Fire Watch, taking into consideration the £500 limit.	Oct-18	n/a	Low	Kier concept system now up to date and cleansed.	29-Nov-18	Facilities Manager

Ref:	Audit Title	Audit Action	Date by:	Revised Completion	Priority	Progress	Date of Audit Report	Allocated to:
183	**Facilities Management**	A two way check will be undertaken on open defects per Fire Watch and Kier Concept to ensure that open / closed status are accurately reported and action taken where necessary. Evidence of issues will be documented in the Fire Watch section of the notes.	Oct-18	n/a	Low	Completed	29-Nov-18	Facilities Manager
184	**Facilities Management**	Management will document the key actions agreed from the monthly contract monitoring meeting, and consider if meeting notes are also required to be produced.	Sep-18	n/a	Low	Actions & Decisions Logs taken at monthly contract meetings	29-Nov-18	Facilities Manager
185	**Facilities Management**	Monthly reports from Kier, including the summary on statutory compliance status, will be appropriately retained by management for monitoring purposes.	Sep-18	n/a	Low	Monthly reports received and discussed at contract meeting	29-Nov-18	Facilities Manager

Ref:	Audit Title	Audit Action	Date by:	Revised Completion	Priority	Progress	Date of Audit Report	Allocated to:
186	**Facilities Management**	Finance staff will work closely with the new Head of Facilities, Fleet and Equipment to ensure he has a full understanding of the budget lines, contracts in place and ongoing commitments.	Dec-18	n/a	Low	On-going and monthly monitoring with HoS and Finance	29-Nov-18	Head of Facilities, Fleet and Equipment
187	**Facilities Management**	Devolved budget monitoring and setting is an iterative process and budget virements will be undertaken where appropriate to facilitate the forecasting process and ensure the efficient use of resources.	Dec-18	n/a	Low	On-going and monthly monitoring with HoS and Finance	29-Nov-18	Head of Facilities, Fleet and Equipment

Planned Audits

In Q4, scheduled audits include:

- Fleet disposal – w/c 7 January 2019
- Recruitment Practices – w/c 14 January 2019
- VAT and PAYE – w/c 11 February 2019
- GDPR Compliance – w/c 11 February 2019
- Fire Fighter Pensions – w/c 18 February 2019
- Key Financial Controls – w/c 25 February 2019
- Payroll Provider follow-up - TBC

Appendices

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

Tony Vincent, Head of Business and Information Systems
This ICT strategy is intended to design and embed a reliable, resilient ICT support service that will technically enable the implementation and ongoing delivery of the Strategic Commitments and Vision 2019. This is a high-level update for items agreed as part of the action plan and reflects the period October to December 2018.

Task	Progress	RAG
ICT information governance framework established and approved by IRMP	All information governance framework primary policies have now been created, reviewed, consulted on and published. This Activity is therefore complete.	G
Guiding principles implemented and PSN accreditation achieved	ESN Code of Connection requires both network security and wider IA conditions. National Cyber Security Centre standards chosen as accreditation for IA. Rolled into year 2 due to changing timelines for ESMCP. Plan to achieve Cyber Essentials certification as part of this. Both outstanding audit action items have been completed. An IT health check and Cyber Essentials Plus certification activity is being arranged for Q4 2018/2019.	G
ICT infrastructure is fit for purpose and supports a reliable, robust IT environment	Issues identified through robust problem management discipline with allocated server disk space have led to a comprehensive review and procurement of additional space for both our primary and disaster recovery sites.	G
Software and Hardware Asset management plans established	RBFRS now has 100% visibility of all software and hardware assets, their lifecycle position, refresh dates, and licensing compliance. Automated processes for notification, identification and resolution of software licensing problems are developed and being methodically applied across the estate. The first tranche of standard Laptop replacements are planned for Q4 2018/19, and a standard laptop specification has been agreed, leading to a 25% reduction in cost per client going forward, no reduction in user experience, and reduced support duplication effort. We have moved from a position of no visibility of what we had, or any meaningful way to manage it, to a comprehensive understanding of the hardware and software estate, and the means to use this information to provide efficiencies and improvements to the service.	G
Cross training and up skilling of the ICT team	A set of budget bids have been created to alleviate resourcing pinch points in the organisation and to reduce overall reliance of fixed term or temporary contract positions further.	G
ICT Service SLA and Service catalogue created	The new look and feel for vFire has been created and consulted on with key non-HQ staff groups. We expect this to be fully rolled out in Q4 2018/19.	G
ICT work plan of BAU activities and prioritised development implemented	Annual work plan agreed and currently on schedule. The 2018/18 service plan has been compiled and published.	G
Applications portfolio (a list of all our systems)	The license management capability is fully up and running and is now being used to ensure licensing compliance against actual use. Installed but	G

Task	Progress	RAG
will be realigned to remove unnecessary applications	unused software will begin to be automatically removed (with notifications and opportunities to confirm need) from end user systems following the compliance check being completed. A target of 50% overall reduction in the number of installed applications has been set in the next generation of the ICT strategy, which is due for publication in 2019.	
Flexible working framework is developed to support new ways of working as part of the OD programme	Support for flexible working has been included as a key activity within the next generation of ICT strategy, which is due for publication in 2019.	G
ITIL best practice standards in place embedded across whole of ICT	Robust application of ITIL principles, in particular within the problem and change management disciplines, continues to provide additional stability and capability to react to issues. Recent examples include the decision to implement a change freeze prior to Christmas and the HMICFRS inspection, which resulted in the second year without major ICT Incident in a row, and the decision to implement additional storage capability at Whitley Wood BEFORE HQ in order to resolve space issues more expeditiously without violating the aforementioned change freeze.	G
Timelines for re-tendering, aligned to joint and shared tender opportunities	Automated notifications of impending contractual renewals, and reports that provide forward planning capability are now in place. There was recent agreement within the NFCC ICT manager's group to share ICT strategies in an attempt to surface joint procurement opportunities further ahead than is currently possible.	G
A corporate content management solution is in place	RBFRS continues to work with Ideagen to resolve ongoing issues at all levels within the content management system, the underlying platforms, and the support and escalation arrangements that are currently in place. We have requested the instigation of quarterly service review meetings, more transparency regarding support arrangements, additional support from a release management perspective, and named contacts within Ideagen at each level of escalation. Our intention is to attempt to build a meaningful partnership with Ideagen rather than operate as a "nuisance" customer. The only realistic option should this fail is re-tendering for some or all elements of the current contract for Intranet, external website and content management systems. Given the current renewal date, it is likely that if we are forced to pursue this avenue, we will need to extend our current contact temporarily for at least a year to allow proper preparation and migration to any new partner. In the meantime, the team are managing around system deficiencies, largely by manual intervention.	A

Appendix B: Update on Progress of the Fleet Strategy

Andrew Mclenahan, Head of Facilities, Fleet and Equipment. This Fleet Strategy is intended to design and embed a reliable, resilient Fleet and Equipment Department, which will enable the implementation and ongoing delivery of the Strategic Commitments and Vision 2019. This is a high-level update for items agreed as part of the action plan and reflects the period October to December 2018.

Task	Progress	RAG
Fleet and Engineering Management structure designed to meet future needs Fleet Strategy and principles agreed and Partnership with HFRS implemented	The Partnership is in the final stages of its current lifecycle. Given the success of the partnership, our intention is to recommend its continuation through renewal of the existing agreement. This extension for the forthcoming 2019-2024 term is due to be taken to Management Committee on 05 February 2019 for approval. An updated Vehicle Fleet & Equipment Strategy for 2019-2023 is also due to be taken to Management Committee on 05 February 2019 for approval.	G
Agree 4 year Main Pumping Appliance renewal plan - Commence Procurement exercise with TVFRS's	Further to the delivery of three new pumping appliances this earlier this year and the subsequent technical issues we found with them, the appliances have now been rectified by the manufacturers Emergency One. We have now placed an order for another four appliances which are estimated to be delivered in the later part of 2019. Subject to appropriate approval and a revised Strategic Asset Investment Framework (SAIF) we are planning to order another four main pumping appliances for an estimated delivery in Quarter 1 for 2020/21. If approved, this will mean that all whole-time main pumps will have been replaced to the new modern Volvo. Work has started on our procurement approach for appliance provision for 2021 onwards. We will continue with the principle of doing this in collaboration with our partners in Oxfordshire and Buckinghamshire Fire and Rescue Services.	G
Review Equipment notes and technical information and create appropriate reference database	As part of the Thames Valley Operational Alignment, work a review of the provision of Equipment Notes has been undertaken. To support the operational alignment vision and to blend with the move towards National Operational Guidance for Policy and Procedure documentation a standard Thames Valley Equipment Note format is now in use. As new equipment is introduced, the accompanying equipment note is in the new format. Current notes are being reformatted on a priority basis.	G

Task	Progress	RAG
Fleet Investment plan is created to align to medium term financial plan - Fleet and Equipment Asset Management plans established	With the impending revision of the SAIF for 2019 and the creation for a new Vehicle Fleet & Equipment Strategy, RBFRS will be in a good position to continue the work already achieved within the fleet arena. The acquisition, disposal and achieving better utilisation of fleet assets is always on-going. The financial plans are key to being able to continually improve this area and seek further efficiencies. A high level delivery plan which supports the new fleet strategy shows the planned programme of replacements of fleet and equipment assets. This plan will be under continual review to ensure the SAIF and service delivery requirements are constantly aligned. Further detailed work around our white fleet utilisation will be on-going during the next two quarters. Asset management is in the process of being reviewed to improve effectiveness and governance of all assets. This work will continue through the next two quarters as we look to create a sustainable and robust process that serves the organisation and utilises synergies where possible. We now have a new Supplies & Assets Manager role which has been taken up. The post holder will pick up this work stream and will be working closely with the Research and Equipment Officer in the coming months around our asset management process.	G
Agree replacement programme for Special Appliances	As part of a revised SAIF and the new Vehicle Fleet Strategy the replacement of Special Appliances has been factored in. A number of Special Appliances will be due for replacement in the coming years. Once the SAIF has been approved, work around these vehicles can be planned in further detail.	G
Determine multi-use vehicles requirements, available to provide off road access, flexible and effective back-up vehicles	As mentioned above, work in this area will be on-going into Q4 and beyond. The Vehicle Fleet Strategy addresses looking at vehicle roles and understanding which vehicle types could potentially fulfil multiple functions. There are potential synergies around 4x4 capability, pool vehicles and personnel carriers which need to be explored further to ensure alignment to operational requirements and financial plans.	A

Appendix C: Information Governance Report (October to December 2018)

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

Information Requests…	Oct 2018	Nov 2018	Dec 2018	Total
New Information Requests Received	14	15	5	**34**
Total Information Requests Actioned	20	25	11	**56**
IGT - Hours Spent on Information Requests	37 ¾	37 ½	13 ½	**88 ¾**
Others - Hours Spent on Information Requests	18 ½	40 ¾	8	**67 ¼**
Timeframes not met (figures relate to request due date)	1	2	2	**5**
Internal Reviews (figures relate to request due date)	0	0	0	**0**

Incident Reports

Incident Reports…	Oct 2018	Nov 2918	Dec 2018	Total
New IRS/FI requests received this month	13	18	16	**47**
IRS/FI requests confirmed *(includes not charged for)*	2	4	10	**16**
Total IRS/FI requests actioned *(incl. still in progress)*	19	21	24	**64**
Income from requests Figure in brackets - total ££ so far this year	£306.00 (£2,652.00)	£408.00 (£3,060.00)	£510.00 (£3,570.00)	£1,224.00

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

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

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

Appendix D: Service Provision Measure Definitions

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

ID	Measure	Definition
8	% of priority home safety referrals, where there has been a threat or incidence of arson, completed within 48 hours	When RBFRS are made aware of the threat or incidence of arson against an individual(s) a home safety visit is conducted within 48-hours.
9	% of priority category 1 home safety referrals, where there is a significant heightened risk of an individual having a fire in their property, completed within 48 hours	When RBFRS are made aware of a home or an individual who is at significantly high risk of having a fire, a home safety visit is conducted within 48-hours.
Protection		
10	Total Number of Full Fire Safety Audits carried out	This is the total number of full fire safety audits carried out in premises in Berkshire. This is calculated once the service has been closed by RBFRS and only includes the initial full fire safety audit. A Fire Safety Audit is carried out to enforce the Regulatory Reform Order (RRO) 2005, which applies to virtually all non-domestic premises and covers nearly every type of building, structure and open space.
11	% of audits where the results were satisfactory	This is the number of closed fire safety audits carried out in commercial premises, where the result was satisfactory and no further action or follow-up was required.
12	% of audits requiring informal activity	This is the number of closed fire safety audits carried out which resulted in informal activity. This includes a Deficiency Notice, with or without follow-up or informal education
13	% of audits requiring formal activity	This is the number of closed fire safety audits carried out which result in formal activity. This includes action plans, voluntary restrictions or premises requiring an Enforcement Notice, Prohibition Notice, Alterations Notice, or Prosecution Notice.
14	Success rate when cases go to court	This is the ratio of successful prosecutions following fire safety audits.

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

Appendix E: Corporate Health Measure Definitions

ID	Measure	Definition
Human Resources and Learning & Development		
21	% of working time lost to sickness across all staff groups	This measure looks at sickness across the whole organisation and the percentage of time lost based on the number of working hours available to the organisation.
22	% of Eligible operational staff successfully completing fitness test	The measure reflects the percentage of eligible operational personnel who have successfully completed their fitness test. Individuals who are not eligible include those on long-term sick or light duties.
23	% of eligible staff with Personal Development Appraisals	This measure reflects the percentage of eligible employees who have had a Personal Development Appraisal. Eligible staff are those who have completed their initial probation period before the end of the PDA period and who have not been absent for over 50% of the reporting period. Employees moving within the organisation to new roles on trial or probation periods will still be eligible for a PDA.
24	% of eligible operational staff in qualification	This measure examines performance in the key qualifications, outlined in the 9 core areas of the Fire Professional Framework, required by staff to maintain effective service delivery .
Health and Safety		
25	All injury accidents including RIDDOR (RIDDOR & Total)	RIDDOR(*Reporting of Injuries Diseases and Dangerours Occurrences Regulations*) are more serious injury accidents and the total number of accidents.
Finance and Procurement		
26	% of spend subject to competition	This measure is looking at all items of expenditure over £10k as RBFA must obtain quotes or tenders for all these purchases. This excludes statutory payments such as local authority charges or HMRC.

27	Compliant spend as a % of overall spend	This measure calculates the supplier spend that is in a compliant contract as a % of the total spend to external bodies and suppliers. (as per RBFA contract regulations)
Freedom of Information		
28	Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act and Environmental Information Regulations).	Number of decision notices issued by the ICO that uphold any part of a complaint that we have breached the relevant legislation.
29	Number of Information Commissioner assessments finding that the Service has breached Data Protection Legislation (Data Protection Act and forthcoming legislation)	Number of occasions where the Information Commissioner has informed RBFRS that we have breached the legislation.

Appendix F: RDS Establishment

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

	Staff in Post (SIP)	FTE	Establishment (Est)	SIP v Est	FTE v Est
05 Hungerford	10	4.61	13	76.9%	35.5%
06 Lambourn	9	3.47	13	69.2%	26.7%
07 Pangbourne	6	3.34	13	46.2%	25.7%
09 Wargrave	16	9.02	13	123.1%	69.4%
11 Mortimer	8	4.55	13	61.5%	35.0%
15 Crowthorne	13	7.10	13	100.0%	54.6%
19 Retained	16	5.95	13	123.1%	45.8%
Total	**78**	**38.04**	**91**	**85.7%**	**41.8%**

Appendix G: HR Supporting Charts

(Source: Data calculated and supplied by HR)

Staff in Post

Staff in Post Annual Trends

Staff in Post
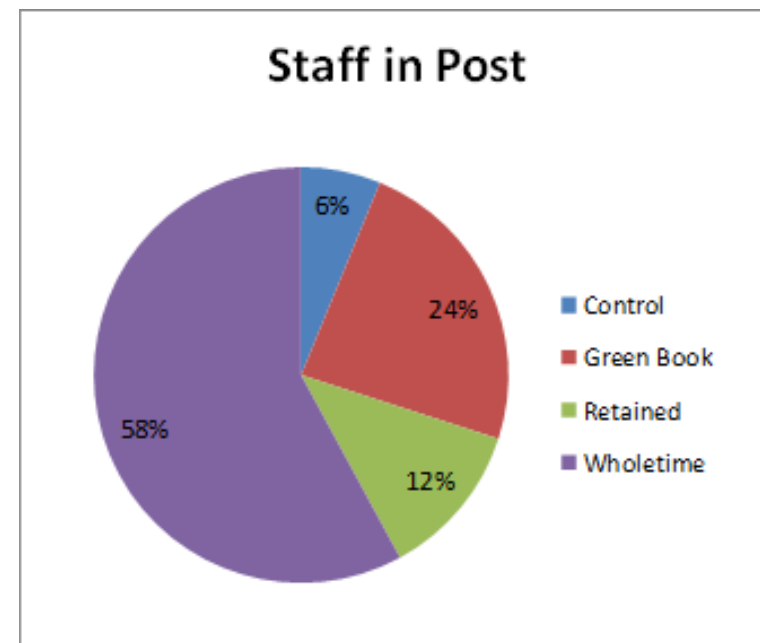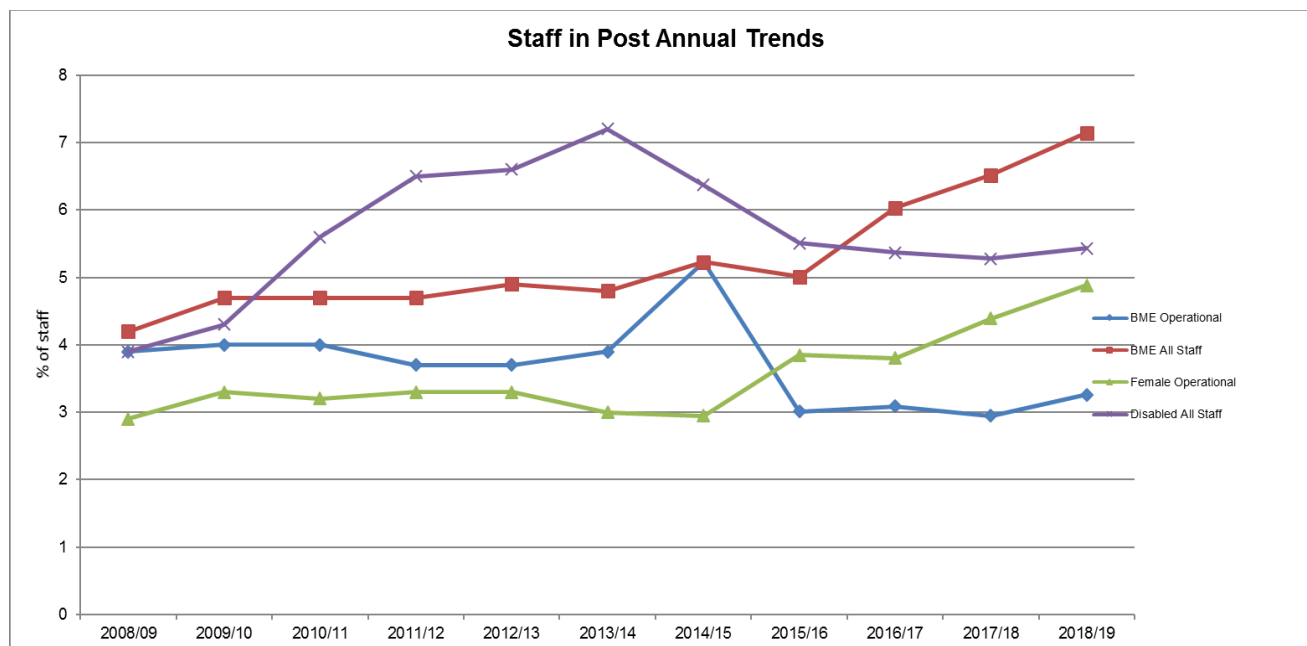
| Quarter 3 – 2018/19	
Percentage of BME operational	3.26%
Percentage of BME all Staff	7.14%
Percentage of female Firefighters	4.88%
Percentage of Disabled staff	5.43%

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Staff Age Profile

Age Profile of Workforce for Quarter 3
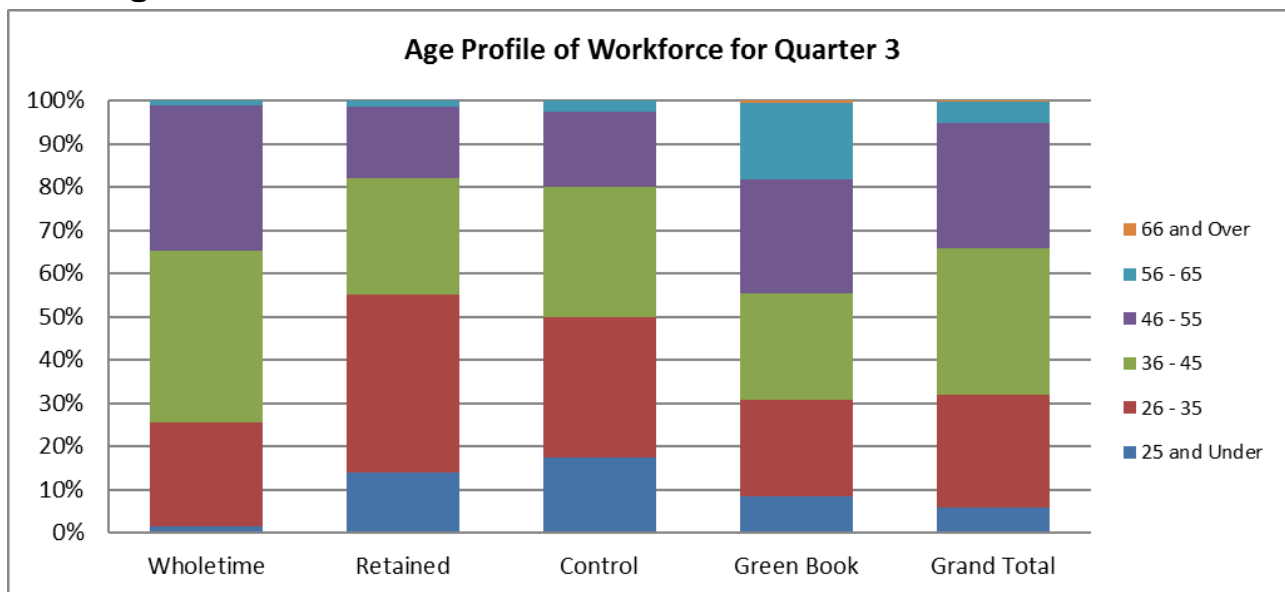
Age Group	Wholetime	Retained	Control	Green Book	Grand Total
25 and Under	6	11	7	13	37
26 - 35	89	32	13	34	168
36 - 45	149	21	12	38	220
46 - 55	125	13	7	40	185
56 - 65	4	1	1	27	33
66 and Over	0	0	0	1	1
Grand Total	**373**	**78**	**40**	**153**	**644**

Gender of Staff
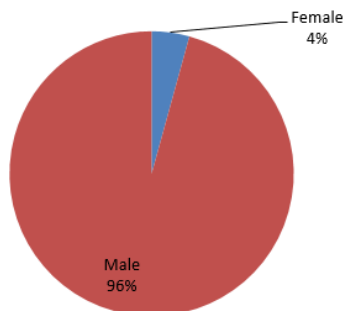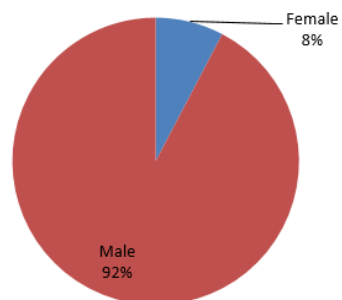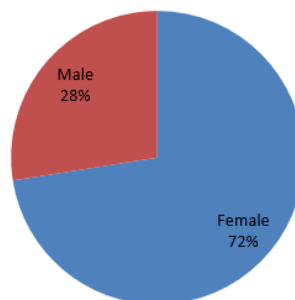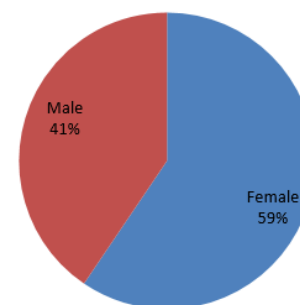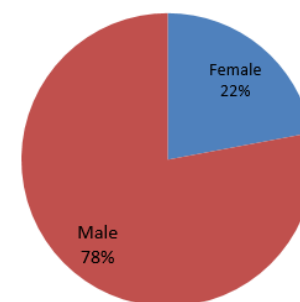
Gender	Wholetime	Retained	Control	Green Book	All Staff
Female	16	6	29	91	142
Male	357	72	11	62	502
Total	**373**	**78**	**40**	**153**	**644**

Ethnicity of Staff

Total number of staff in Q3 broken down by ethnicity

Ethnicity	Number of staff
Asian or British Asian: Indian	5
Asian or British Asian: Other	2
Black or Black British African	5
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	5
Unknown	5
White British	593
White Irish	4
White Other	12
Asian or British Asian: Pakistani	0
Mixed White	0
Total	**644**

Ethnicity	Wholetime	Retained	Control	Green Book	All Staff
White British	353	76	39	125	593
Other Ethnicity	19	2	1	24	46
Unknown and blank	1	0	0	4	5
Total	**373**	**78**	**40**	**153**	**644**

Days Lost to Sickness

Percentage of days lost to key causes for Q2

Percentage of days lost to key causes for Q3
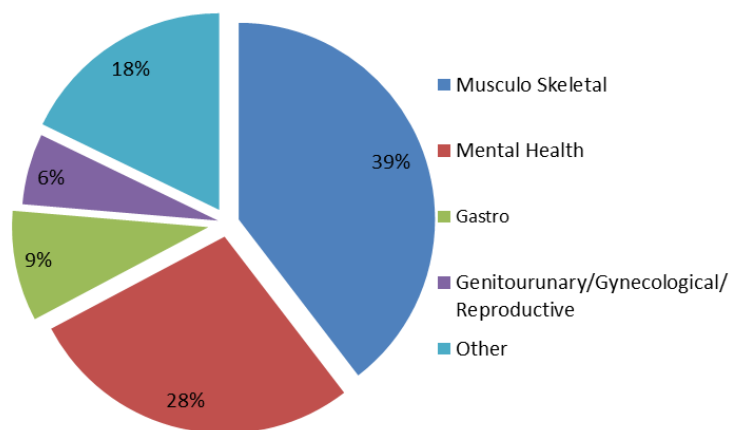
Q2 18/19

Cause	Days Lost	Occurrences
Musculo Skeletal	475	49
Mental Health	332	18
Gastro	109	38
Genitourinary/Gynaecological/Reproductive	70	4
Other	214	52
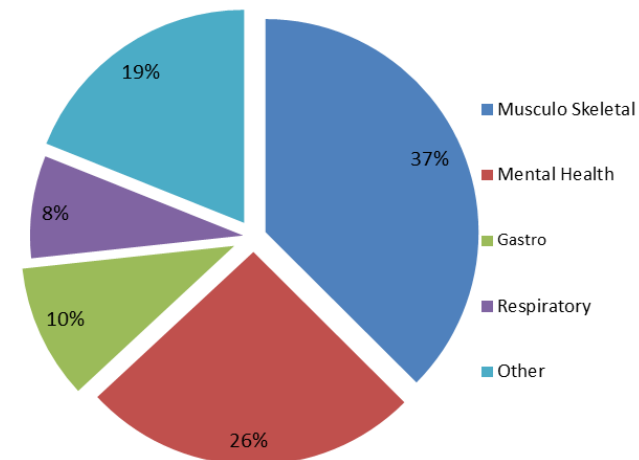
Q3 18/19

Cause	Days Lost	Occurrences
Musculo Skeletal	477	49
Mental Health	326	19
Gastro	130	44
Respiratory	99	38
Other	241	43

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

Sickness across other FRS
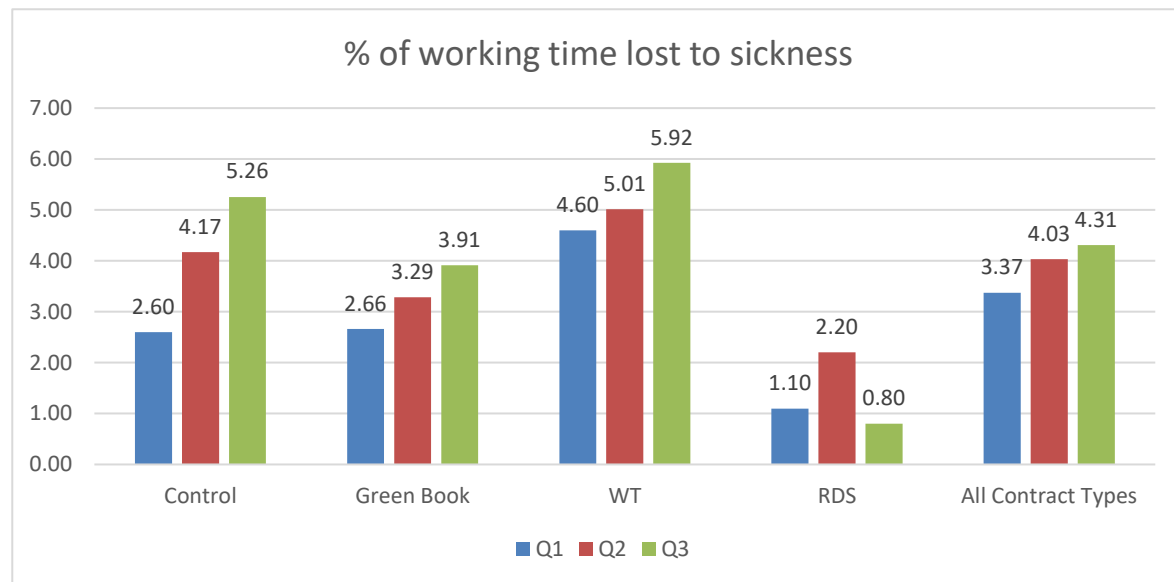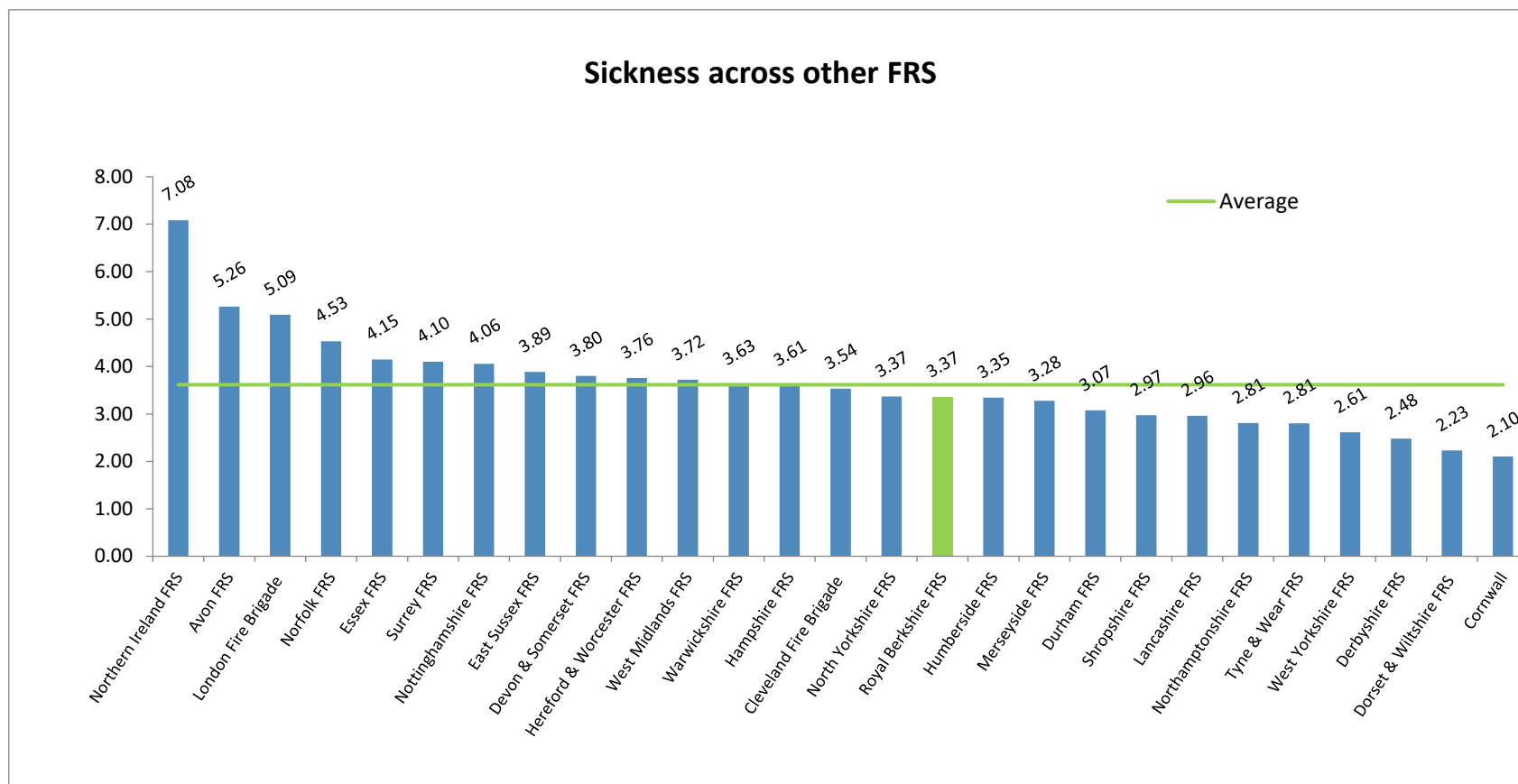
This graph (provided by Cleveland FRS) compares the percentage of working days lost to sickness for all staff in each Fire and Rescue Service. The days lost are shown as a per person figure for the period **1 April 2018 to 30 September 2018 – Note the table provided in Q2 return was for April to July 2018 not to September as reported.**

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

If you require any further information relating to this report,

please contact the Data and Performance Team at

performance@rbfrs.co.uk