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## **Contact Us**

# **Accessibility**

If you require any of the information contained within this document in a more accessible format, please contact us. Please advise us which information you would like to access and provide your name and email address.

## In an emergency

In an emergency, dial 999 and ask for the fire service.

If you are inside a building when a fire starts, remember to get out, stay out and call 999. Never try and put out a fire unless you have received sufficient training.

# Contacting us when it's not an emergency

Visit our website: rbfrs.co.uk

@ Email us at: performance@rbfrs.co.uk

Call us on: 0118 945 2888

Write to us at: Newsham Court, Pincents Kiln, Calcot, Reading, Berkshire, RG31 7SD





## Introduction

This is the Quarter Four Performance Report, summarising our progress across the Service.

In our Annual Plan for 2022-23, we set 10 Annual Objectives for the year, which can be found at Appendix B. The Objectives are delivered through our Service Plans and Local Safety Plans and our projects and programmes. Ongoing analysis of performance data and information supports decision-making across the organisation. We monitor performance across four quadrants:

**Service Provision**: Monitoring the delivery of our statutory obligations and the services provided by RBFRS.

**Corporate Health**: Monitoring how key resources are managed, which includes measures relating to staff, finance and health and safety.

**Priority Programmes**: Progress against our key programme activity (our Community Risk Management Plan (CRMP), People Strategy, Strategic Asset Investment Framework and Built Environment Programme.

**Assurance**: Monitoring corporate risk management and other assurance activity including internal audit and our HMICFRS Action Plan.

The Strategic Performance Board monitors performance quarterly, before key data and analysis is provided in this report for the Audit and Governance Committee to scrutinise.





# Key

# **Performance Measures**

	Target exceeded by more than 10%	
	Target met or exceeded by up to 10%	
	Target missed by up to 10%	Comparison with target
	Target missed by more than 10%	Companson with target
	NA or data accuracy issues affect confidence in	
	reporting	
<b>^</b>	Improvement in performance from equivalent period	
I	the previous year	
$\leftrightarrow$	Maintenance of performance from equivalent period	Comparison with actual
	the previous year	the previous year
	Decline in performance from equivalent period the	
<b>\</b>	previous year	

# **Priority Programme Project Status**

С	Project complete
G	Project on Track
А	There are issues with the project but these are being managed
R	Issues are having an impact on delivery
NS	Project not yet due to start

## **Classification of Risk Scores and Risk Movement**

20 - 25	Outside assumed Risk Appetite and requires mitigation to proceed
19	Inside Risk Appetite only because of extremely low probability. Mitigate if necessary and possible, accept only if no further action can be justified
17 & 18	Inside Risk Appetite. Mitigate further if cost effective to do so - discuss with a Director
7-16	Inside Risk Appetite. Mitigate further if cost effective to do so
1-6	Inside Risk Appetite and unlikely to need further mitigation
1	Risk increasing
$\leftrightarrow$	No risk movement
<b>\</b>	Risk decreasing





# **Q4 Summary**





76.3%

% of occasions we responded to emergency incidents within 10 minutes



38.8%

% increase in the number of Referrals for Safe and Well visits received from our partners



69.2%

% of Full Fire Safety Audits with a 'Broadly Compliant' result



1

Number of complaints received



4.6%

% of working time lost to staff sickness across all groups



100%

Compliant spend as a % of overall spend

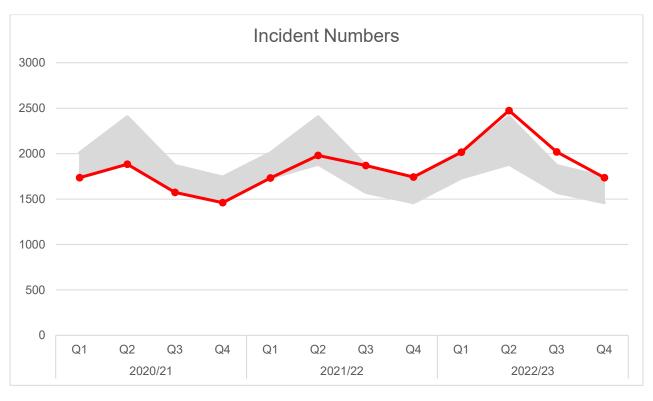




#### **Incident Trends**

The table below illustrates the number of emergency incidents we responded to in Quarter 4 2022-23 in comparison with previous years. This data is also presented in a graph below as a red line, with the previous 5 years minimum and maximum as background shading for context.

Incident Numbers							
	Q1	Q2	Q3	Q4			
2020/21	1735	1883	1574	1460			
2021/22	1732	1980	1869	1742			
2022/23	2016	2474	2018	1736			



All major incident types were at relatively normal levels in Quarter 4, when compared with the same quarter the previous year. Looking at the 2022-23 year as a whole, it is not surprising to see a particularly high number of Secondary Fires, due to the hot, dry summer of 2022. The numbers of False Alarm incidents and Special Service incidents show some increase over the past few years, although it is difficult to determine the full impact of the pandemic in these categories. This year we saw a high number of flooding incidents in Quarter 3 when we experienced heavy rain in December.





## Quadrant One - Service Provision

#### E-bikes and Scooter Fire Risk

There has been a rapid growth in sales and use of e-bikes and scooters across the UK in recent years. The batteries in these products can catastrophically fail causing explosion, rapid development of fire and toxic gas release. Many products being advertised fall below UK safety standards.

Incidents of fires involving e-bikes and scooters are rising across the UK – a report from ITV in 2022 found incident numbers were at more than five times the levels in 2020. E-bikes and scooters tend to be stored and charged indoors, inside people's homes and generally within their escape routes.

In December 2022 there was a significant incident in Reading caused by an e-bike left on charge overnight, which led to three people suffering smoke inhalation and the evacuation of 18 residents from nearby homes.

We have been working across our service delivery teams to take action to reduce this risk. This has included:

- Production of posters advising of how to minimise risks, these are carried by all Prevention and Protection staff for Safe and Well Visits and Fire Safety Audits.
- Additional training for Safe and Well staff and Fire Safety Inspectors from the Fire Safety Legal, Technical and Enforcement Hub.
- Promoting safety messages at every opportunity such as S&W visits.
- Social media and Radio messages highlighting the risks, alongside advice on our website.

#### Joint working in Reading

Towards the start of Quarter four, Blue Watch Caversham Road identified the need for some targeted work at a block of flats in Reading, which had seen an increase in Automatic Fire Alarm calls, and a recent small fire. The residents are primarily students with a high proportion for whom English is a second language.

Work at the property has included:

- Completion of 34 Safe and Well visits to persons under the age of 25.
- Completion of an Electronic Premises Information Plate (EPIP) and an update of the Site Specific Risk Information to include faulty firefighting lifts, highlighting this to colleagues.
- Work with the on-site staff to educate on AFA reduction.
- Identifying a risk relating to E-Scooters and charging in rooms and hallways and working with on-site staff to place posters at reception and removing scooters from protected stairwells
- Identifying an electrical fault on site that had caused cooking extractors to trip regularly.
- Highlighting poor quality chargers.
- Educating residents (students) on cooking safety and drinking.





- Signposting staff to 11 faulty or unlocked fire doors.
- Testing the vent system and ensuring faults were fixed.
- Correcting the address used by the alarm company.

These activities will reduce both the risk of a fire, and of further False Alarm calls to the property.





QUADRANT ONE -	SERVICE	D	ATA SUMM	ARY			
Overall Measures							
1. Number of Fire Deaths	1. Number of Fire Deaths 2022/23 Target: 0						
	Q1	Q2	Q3	Q4	Year to Q4		
Previous Year (21/22)	1	0	2	3	6		
Target (max)	0	0	0	0	0		
2022/23 Actual	0 ↑	1↓	3↓	0↑	4↑		

There were no fire fatalities in Q4 however sadly, there were four throughout 2022/23. Supporting work continues with the Safeguarding Adult Review Board and the Coroner's Office to understand fully the circumstances around each so we can focus our Prevention activities on any outcomes or risk trends identified. Teams continue to target Prevention activity to those most vulnerable to serious injuries in fires and work to increase Safe and Well Referrals from Partners showing success.

2. Number of non-fatal fire casualties 2022/23 Target: 75 max						
	Q4	Year to Q4				
Previous Year (21/22)	12	13	3	12	40	
Target (max)*	9	9	9	10	37	
2022/23 Actual	13 ↓	5 ↑	17 ↓	1 ↑	36 ↓	

<sup>\*</sup>This measure was originally published with a target of 75. We have identified an error with the analysis used to set this target, and have recalculated the target for the year.

It is very positive to see almost no non-fatal fire casualties in Q4, a reduction from the previous year.

3. Number of deliberate Primary Fires 2022/23 Target: Reduce						
	Q1	Q2	Q3	Q4	Year to Q4	
Previous Year (21/22)	30	27	37	35	129	
Target (max)	29	26	36	34	125	
2022/23 Actual	22↑	129 ↔				
4. Number of deliberate	e Secondary F	ires		202	2/23 Target: Reduce	
	Q1	Q2	Q3	Q4	Year to Q4	
Previous Year (21/22)	76	35	38	50	199	
Target (max)	75	34	37	49	195	
2022/23 Actual	91 ↓	115 ↓	23 ↑	41↑	270 ↓	

Prevention Teams continue to identify deliberate fire themes e.g., vehicle fires and are working closely with partner organisations. Q4 has seen the lowest level of deliberate primary fires in 2022/23 and it is hoped with continuing partnership work this will continue.





Prevention Measures								
5. Increase the number of Referrals for Safe and Well visits received from our partners 2022/23 Target: 10%								
	Q1	Q2	Q3	Q4	Year to Q4			
Previous Year (21/22)	682	701	740	780	2903			
Target	750	771	814	858	3193			
2022/23 Actual Number	889	886	1049	1083	3907			
2022/23 Percentage Change	30.4%	26.4%	41.6%	38.8%	34.6%			

We continue to exceed the target of a 10% increase in referrals for Safe and Well visits from our partner agencies. This is an excellent achievement from the Hub Teams which allows us to focus our resources where there is the most risk.

	····					
6. Percentage of Safe and threat or incidence of a		2022/23 Target: 100%				
	Q1	Q2	Q3	Q4	Year to Q4	
Previous Year (21/22)	100%	100%	100%	100%	100%	
Target	100%	100%	100%	100%	100%	
2022/23 Actual	100% ↔	100% ↔	100% ↔	100% ↔	100% ↔	
	7. Percentage of Very High and High Risk Safe and Well 2022/23 Target: 90% Referrals completed within target time					
	Q1	Q2	Q3	Q4	Year to Q4	
Previous Year (21/22)	N/A	N/A	N/A	N/A	N/A	
Target	90%	90%	90%	90%	90%	
2022/23 Actual	42.3%	33.4%	41.9%	45.8%	41.0%	
8. Percentage of Medium Risk Safe and Well Referrals  completed within target time  2022/23 Target: 75%						
	Q1	Q2	Q3	Q4	Year to Q4	
Previous Year (21/22)	N/A	N/A	N/A	N/A	N/A	
Target	75%	75%	75%	75%	75%	
2022/23 Actual	35.0%	29.1%	50.0%	46.9%	40.8%	

Completion of S&W visits within timescales is challenging due to the combination of complex needs and availability of clients and carers. Performance has improved through the year. We have recognised the challenges that this complexity brings in setting our targets for 2023-24.





#### **Protection Measures**

9. Proportion of Fire Safety Audits conducted against premises identified as 2022/23 Target: Monitor High or Very High Risk in our Risk Based Inspection Programme								
Q1 Q2 Q3 Q4 Year to Q4								
Previous Year (21/22)	N/A	N/A	N/A	N/A	N/A			
Target								
2022/23 Actual	N/A*	20.6%	21.2%	27.8%	23.4%			

<sup>\*</sup>The Risk Based Inspection Programme was launched on the 28th April. Monitoring data available from Q2 22/23.

Q4 has seen continuing focus on the revised Risk Based Inspection Programme (RBIP) with Fire Safety Inspecting Officers (FSIs) carrying out Audits where the greatest risks exist. Our performance in this area has been improving since the RBIP was launched. We will evaluate the RBIP in 2023-24.

10. Percentage of Full Fire Safety Audits with a 'Broadly 2022/23 Target: 60% max Compliant' result *							
	Q3	Q4	Year to Q4				
Previous Year (21/22)	56.2%	57.4%	63.3%	51.3%	57.2%		
Target (max)	60%	60%	60%				
2022/23 Actual	78.7% ↓	72.8% ↓	75.2% ↓	69.2% ↓	73.7% ↓		

<sup>\*</sup>As part of the Risk Based Inspection Programme the Fire Safety Inspecting Officers should be visiting premises which are less likely to conform to the RRO 2005 and are therefore a higher risk to life. This measure illustrates the percentage of closed Fire Safety Audits carried out in commercial premises, where the result was 'Broadly Compliant' (satisfactory) and no further action or follow-up was required.

Our new Risk Based Inspection Programme (RBIP) was launched at the end of April 2022 and includes many premises that have not been inspected before. This means we have less information available about their risk level and may mean that initially more 'Broadly Compliant' premises will be inspected. As we visit these premises we will learn more about them and incorporate this into their risk score.

11. Percentage success whe		2022/23 Target: 95%			
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (21/22)	0 cases	100% (1 case)	0 cases	0 cases	100% (1 case)
Target	80%	80%	80%	80%	80%
2022/23 Actual	0 cases	0 cases	0 cases	0 cases	0 cases

12. Percentage of Statutory the required timeframe	2022/23 Target: 95%				
	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	94.1%	97.7%	98.4%	97.2%	96.7%
Target	95.0%	95.0%	95.0%	95.0%	95.0%
2022/23 Actual	96.3% ↑	98.9% ↑	96.8% ↓	93.8% ↓	96.4% ↑

The number of Statutory Building Consultations remains high. In Q4 some consultations were not completed within timeframes due to their complex nature i.e. Fire Engineering Solutions and extended timescales requests.

13. The number of Automatic Fire Alarm calls received				
Q1	Q2	Q3	Q4	Year to Q4
622	853	868	698	3041
621	852	867	697	3037
763 ↓	787 ↑	901↓	702↓	3153 ↓
	Q1 622 621	Q1 Q2 622 853 621 852	Q1         Q2         Q3           622         853         868           621         852         867	Q1         Q2         Q3         Q4           622         853         868         698           621         852         867         697





In 2022/23, we have had 45 premises placed on the Unwanted Fire Signals list and Hub Protection Teams monitor weekly reports and continue to target and educate AFA repeat offenders.

14. Percentage of Automatic not attend	did	2022/23 Tar	get: 30% min		
	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	23.8%	22.0%	21.2%	28.1%	23.5%
Target	30%	30%	30%	30%	30%
2022/23 Actual	26.7% ↑	23.0% ↑	24.2% ↑	25.4% ↓	24.8% ↑

Although Q4 saw a small improvement in performance compared to Q3, we plan to evaluate the new AFA policy in 2023-24.

#### **Response Measures**

15. Percentage of occasions v an emergency incident wit emergency call was answe	es at	2022/23	Target: 75%		
	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	76.0%	77.0%	79.4%	76.3%	77.2%
Target	75.0%	75.0%	75.0%	75.0%	75.0%
2022/23 Actual	76.0% ↓	69.3% ↓	74.2% ↓	76.3% ↔	73.6% ↓

During Quarter 4 we exceeded our response standard target, attending 76.3% of emergency incidents within ten minutes.

16. Percentage of wholeting availability		2022/23 Target: 99%			
	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	98.6%	98.1%	97.0%	98.2%	98.0%
Target	99.0%	99.0%	99.0%	99.0%	99.0%
2022/23 Actual	97.6% ↓	97.4% ↓	96.6% ↓	98.2% ↔	97.5% ↓

We experienced continuing challenges to our wholetime appliance availability this quarter due to a number of factors, including staff turnover, high numbers of staff in development roles and higher than previous sickness levels. Through consistent monitoring and management, the Service continue to make optimum use of our resources and performance was higher this quarter than the rest of the year.





17. Percentage of hours whe	2022/23 Target: 60%						
call frontline pumping appliances (based on 24/7 crewing)							
	Q1	Q2	Q3	Q4	Year to Q4		
Previous Year (21/22)*	59.8%	34.7%	36.5%	43.8%	43.6%		
Target	60%	60%	60%	60%	60%		
2022/23 Actual	44.4% ↓	40.3% ↑	35.9% ↓	41.7% ↓	40.6% ↓		

\*excluding Pangbourne

Whilst an improvement from previous quarters this year, the target of 60% on call availability remains difficult to achieve. There are inherent challenges with the on-call system related to availability and sensitivity to staffing changes including the number of staff members holding key qualifications such as incident command or driving.

Service delivery managers continue to explore and employ opportunities to support more flexible and effective use of our on call staff.

#### Resilience Measures

18. Percentage of visits to Very High, High and Medium Operational Risk sites completed in timescale *					2/23 Target: Monitor
	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	NA	NA	NA	NA	NA
Target	-	-	-	-	-
2022/23 Actual	14.8%	30.5%%	42.9%	60.9%	38.1%

Particularly in light of high numbers of staff in development, operational preparedness, competence and learning continue to be key areas of focus for service delivery managers. As of the start of Quarter Four, all hubs have in place robust and planned practices for undertaking operational risk visits.

19. Number of Service Deliv		2022/23 Target: 12			
	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	N/A	N/A	N/A	N/A	N/A
Target	3	3	3	3	12
2022/23 Actual	3	1	4	4	12

Greater investment in delivery of high-quality exercises saw the completion of four hub level exercises, to ensure the annual target of 12 was achieved.





20. Percentage of domest service	e overall	2022	/23 Target: 100%		
	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%
2022/23 Actual	100% ↔	100% ↔	100% ↔	100% ↔	100% ↔
21. Percentage of comme	rcial responden	ts satisfied with	the	202	2/23 Target: 95%
overall service	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	100%	No returns	100%	100%	100%
Target	95%	95%	95%	95%	95%
2022/23 Actual	100% ↔	100% ↔	No returns	100% ↔	100% ↔
22. Percentage of respond regards to Fire Safety		vith the services	with	202	2/23 Target: 90%
regulas to the outery	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	95.8%	100%	100%	100%	98.7%
Farget	90%	90%	1 90%	90%	90%
2022/23 Actual	90% 100% ↑	90% 96.9% ↓	90% 100% ↔	90% 100% ↔	90% 98.9% ↑ /23 Target: 100%
2022/23 Actual  23. Percentage of domest regards their Safe and Previous Year (21/22)	tic respondents I Well Visit Q1 98.2%	96.9% ↓ satisfied with the	100% ↔  Service  Q3 99.0%	100% ↔ 2022 Q4 100%	98.9% ↑  /23 Target: 100%  Year to Q4  99.2%
2022/23 Actual  23. Percentage of domest regards their Safe and Previous Year (21/22)  Target	100% ↑  tic respondents I Well Visit Q1 98.2% 100%	96.9% ↓ satisfied with the Q2 100% 100%	100% ↔  e service  Q3  99.0%  100%	2022 Q4 100% 100%	98.9% ↑  /23 Target: 100%  Year to Q4  99.2%  100%
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2022/23 Actual  23. Percentage of domest regards their Safe and Previous Year (21/22)  Farget 2022/23 Actual  24. Number of complaints	100% ↑  ic respondents I Well Visit Q1 98.2% 100% 99.1% ↑	96.9% ↓ satisfied with the Q2 100% 100% 100% Q2	100% ↔  e service  Q3  99.0%  100%	2022 Q4 100% 100% 100% ↔  2022/23	98.9% ↑  /23 Target: 100%  Year to Q4  99.2%  100%  99.7% ↑  **Target: Monitor**  Year to Q4
Previous Year (21/22) Farget 2022/23 Actual 24. Number of complaints Previous Year (21/22)	100% ↑  cic respondents I Well Visit Q1 98.2% 100% 99.1% ↑	96.9% ↓ satisfied with the Q2 100% 100% 100%	100% ↔  P service  Q3  99.0%  100%  100%  ↑	2022 Q4 100% 100% 100% ← 2022/23 Q4 4	98.9% ↑  /23 Target: 100%  Year to Q4  99.2%  100%  99.7% ↑  Target: Monitor
2022/23 Actual  23. Percentage of domest regards their Safe and Previous Year (21/22)  Farget 2022/23 Actual  24. Number of complaints  Previous Year (21/22)  Farget	100% ↑  ic respondents I Well Visit  Q1  98.2%  100%  99.1% ↑  c received  Q1  7  -	96.9% ↓ satisfied with the Q2 100% 100% 100% Q2	100% ↔   23	2022 Q4 100% 100% 100% ↔  2022/23 Q4 4	98.9% ↑  /23 Target: 100%  Year to Q4 99.2% 100% 99.7% ↑  **Target: Monitor Year to Q4 28 -
2022/23 Actual  23. Percentage of domest regards their Safe and Previous Year (21/22)  Farget 2022/23 Actual  24. Number of complaints  Previous Year (21/22)  Farget	100% ↑  iic respondents I Well Visit	96.9% ↓ satisfied with the Q2 100% 100% 100%  Q2 8	100% ↔  Service  Q3 99.0% 100% 100%  Q3	2022 Q4 100% 100% 100% ← 2022/23 Q4 4	98.9% ↑  /23 Target: 100%  Year to Q4  99.2%  100%  99.7% ↑  6 Target: Monitor  Year to Q4
2022/23 Actual  23. Percentage of domest regards their Safe and Previous Year (21/22)  Farget 2022/23 Actual  24. Number of complaints  Previous Year (21/22)  Farget 2022/23 Actual	100% ↑  cic respondents I Well Visit  Q1  98.2%  100%  99.1% ↑  S received  Q1  7  -  7 ↔	96.9% ↓  satisfied with the Q2	100% ↔   23	2022 Q4 100% 100% 100% ↔  2022/23 Q4 4 - 4 ↔	98.9% ↑  /23 Target: 100%  Year to Q4 99.2% 100% 99.7% ↑  S Target: Monitor Year to Q4 28 - 28↔
2022/23 Actual  23. Percentage of domest regards their Safe and Previous Year (21/22)  Farget 2022/23 Actual  24. Number of complaints  Previous Year (21/22)  Farget 2022/23 Actual	100% ↑  ic respondents I Well Visit  Q1  98.2%  100%  99.1% ↑  s received  Q1  7  -  7 ↔  ats received	96.9% ↓ satisfied with the Q2 100% 100% 100% ↔  Q2 8 - 6↑	Q3 99.0% 100% ↑ 100% ↑	2022 Q4 100% 100% 100% ↔  2022/23 Q4 4 - 4 ↔	98.9% ↑  /23 Target: 100%  Year to Q4 99.2% 100% 99.7% ↑  6 Target: Monitor Year to Q4 28 - 28 - 28 ↔
2022/23 Actual  23. Percentage of domest regards their Safe and Previous Year (21/22)  Farget 2022/23 Actual  24. Number of complaints  Previous Year (21/22)  Farget 2022/23 Actual  25. Number of compliments	100% ↑  ic respondents I Well Visit  Q1  98.2%  100%  99.1% ↑  s received  Q1  7  -  7 ↔  ats received  Q1  Q1	96.9% ↓ satisfied with the Q2 100% 100% 100% ←  Q2 8 - 6↑  Q2	Q3 99.0% 100% ↑ 100% ↑	2022 Q4 100% 100% 100% ↔  2022/23 Q4 4 - 4 ↔	98.9% ↑  /23 Target: 100%    Year to Q4     99.2%     100%     99.7% ↑    Target: Monitor     Year to Q4     28     -
2022/23 Actual  23. Percentage of domest regards their Safe and Previous Year (21/22)  Farget 2022/23 Actual  24. Number of complaints  Previous Year (21/22)  Farget	100% ↑  ic respondents I Well Visit  Q1  98.2%  100%  99.1% ↑  s received  Q1  7  -  7 ↔  ats received	96.9% ↓ satisfied with the Q2 100% 100% 100% ↔  Q2 8 - 6↑	Q3 99.0% 100% ↑ 100% ↑	2022 Q4 100% 100% 100% ↔  2022/23 Q4 4 - 4 ↔	98.9% ↑  /23 Target: 100%  Year to Q4 99.2% 100% 99.7% ↑  6 Target: Monitor Year to Q4 28 - 28 - 28 ↔





## **Key - Performance Measures**

- ,	Tormanoo moacaroo	
	Target exceeded by more than 10%	
	Target met or exceeded by up to 10%	
	Target missed by up to 10%	Comparison with target
	Target missed by more than 10%	Companson with target
	NA or data accuracy issues affect confidence in	
	reporting	
<b>^</b>	Improvement in performance from equivalent period	
	the previous year	
	Maintenance of performance from equivalent period	Comparison with actual the
$\leftrightarrow$	the previous year	previous year
	Decline in performance from equivalent period the	
<b>\</b>	previous year	





# **Quadrant Two - Corporate Health**

#### **Finance Update**

The 2022/23 Revenue Budget agreed by Members in February 2022 was set at £38.446m as a balanced budget with no use of reserves.

The revenue outturn for 2022/23 shows a deficit of £733,000, to be funded from the Budget Contingency Reserve. Variances against individual revenue and expenditure lines are explained below.

The pay offer to Grey book was accepted and paid as 7%, backdated to 1 July 2022. The budget had been set at 2.5%, so has resulted in additional employment costs for Grey book staff in 2022/23 of £654,000. This is split between *stations* (£564,000) and *non-station* Grey book staff (£90,000).

Station staff budgets also included overtime costs £680,000 over budget (including an adjustment for back dated pay rises and the NI reduction). At the end of Q3 the variance was forecast as £577,000. During Q4 there were a number of leavers that brought down the establishment numbers, resulting in the need for more overtime. Other factors for the increase and level of the variance, include the additional back-pay for the pay rise, the additional bank holiday for the Queen's funeral, increased working in the summer heatwave, the need to cover absences for sickness and those on light duties, annual leave and training in order to maintain crewing levels. 18 new recruits came onto stations in mid-April 2022 but needed time to build up operational competency and have an effect on crewing cover. On a positive note, these additional overtime costs have partly been offset due to a different mix of station staff in development and competent roles compared to budgetary assumptions. Some of the increased workload in the summer was for over the border cover, particularly in Buckinghamshire, the costs for which are recovered and included under *Income Other*.

On-call stations are showing positive and negative variances across the county with an overall net pressure of £77,000, including the pay rise and after the NI reduction.

The Green Book pay award for 2022/23 has been accepted and paid (backdated to 1 April 2022) at 4%, compared with the budget of 2.5%. This resulted in additional budget pressure of £219,000.

An accrual of £32,000 has been made for back pay and on-costs that will become due to the Principal Officers once the Gold pay awards are finalised. The estimate has been based on the latest pay offer of 4% for 2022 and 3.5% for 2023.

This additional cost is mitigated by a number of vacancies that have not been filled due to the overall budgetary position, giving savings of £229,000.





Set against the adverse variances for pay rises was the Government announcement that the additional 1.25% rise in employers' national insurance contributions would be reversed from November 2022 - resulting in forecast savings of £85,000, split between *stations* (£49,000) and *non-station* (£36,000).

*Training* – due to a number of factors, including workload pressures such as summer fires, the Royal Funeral and other crewing pressures, attendance on some courses has been delayed and the underspend with external training providers is £51,000.

Repairs and Maintenance. Water damage to the lecture block at the Whitley Wood Fire Station has so far cost £101,000, but some has been reimbursed through an insurance claim (see *Other Income* below). Repairs to the Smoke House at the training centre cost £85,000.

Rates. The final appeal on business rate charges (Dee Road site) has been successful and has resulted in a net refund of £321,000.

*Utilities.* As Members will be aware, energy costs have been rising sharply. Although additional budget provision for utilities had been made in the current year, the prices rises that have come into effect from 1 October 2022 have resulted in costs exceeding the budget allocated by a total variance against budget of £160,000. This was £75,000 lower than the forecast variance at Q3 of £235,000 due to lower usage in a reasonably mild winter.

*Transport.* High fuel prices resulted in an additional costs of £46.000 for the operational fleet. Cost increases including the salaries of the Hampshire vehicle workshop technicians resulted in increased vehicle repair costs of £27,000. Offset against this are savings of £23,000 against the budget on travel and subsistence payments this year.

Cross border charges have been agreed with Thames Valley partners for the first three quarters of the year and, based on this, it is estimated that charges will be £48,000 higher (under *Contracts Other*) and income £121,000 higher (under *Income Other*) higher than the budgeted targets.

As part of the preparation work for the possible industrial action, officers enhanced the level of external support that would be available to the Authority. And this resulted in additional costs of £122,000 (under *Contracts Other*) in 2022/23. Other ongoing work to ensure that the Authority had sufficient arrangements in place also led to additional *Equipment* costs of £29,000 being incurred.

Legal costs. Costs incurred by the authority were £22,000 under the budget set. The costs in this area vary from year to year depending on cases and areas needing the input of legal professionals.

*Pensions*. Costs for injury to feelings claims arising from the McCloud judgement will now be settled by central government. This means we can now release provisions that we made in previous years' accounts to cover these claims, which is the vast portion of the favourable variance of £202,000.





The *Grants* line is showing an adverse variance as the Authority unexpectedly received notification from the Home Office that the grant funding provided for Firelink will be completely phased out over a five year period, starting in 2022/23. A 20% reduction in funding will occur in each of the next five years. This has resulted in a £75,000 budget pressure in 2022/23. It should also be noted that the grant did not cover all of the costs of Firelink and the Firelink contract increases by RPI each year. Within five years the unsupported costs of Firelink could by around £550,000.

Income Other also includes £15,000 as our share of prior year surpluses that have been distributed by the Fire and Rescue Indemnity Company as well as £84,000 from the insurance claim for water damage at Whitley Wood. A claim was made and received of £41,000 of additional costs associated with the Royal Funeral. Court fee recoveries of £13,000 were received. Collaborative and secondment recharges and miscellaneous receipts brought in a total of £30,000 in unbudgeted additional income.

*Investment Interest*. Given the recent interest rate rises yields, interest received from invested sums have generated additional income this year of £242,000.

Gov Grants/Precepts. As part of budget setting the Authority had to estimate the income it is due from central Government for section 31 business rates relief payments, for both the current and prior years. The net variance is £24,000 in reduced income.





# **Royal Berkshire Fire Authority**

# Revenue budgets and expenditure 2022/23

	Budget £'000	Outturn £'000	Variance £'000
EMPLOYEES			
STATIONS	17,155	18,259	1,104
NON-STATIONS	11,790	11,908	118
TRAINING	614	563	(51)
OTHER	290	301	11
	29,849	31,031	1,182
PREMISES			
REPAIRS & MAINTENANCE	825	1,003	178
RATES	821	497	(324)
CLEANING	285	291	6
UTILITIES	479	639	160
	2,410	2,430	20
SUPPLIES			
INSURANCE	397	392	(5)
EQUIPMENT	701	730	29
IS EQUIPMENT & LICENCES	963	976	13
CLOTHING/PPE	370	353	(17)
COMMUNICATIONS	806	790	(16)
OCCUPATIONAL HEALTH	238	239	1
PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTI	143	158	15
ONS COMMUNITY FIRE SAFETY SUPPLIES	145	130	(15)
SUPPLIES OTHER	1 <del>4</del> 5 191	178	(15)
SUPPLIES OTHER			(13)
CONTRACTS	3,954	3,946	(8)
CONTRACTS  CONTRIBUTION TO TVFCS & COLLABORATION	930	934	4
LEGAL	50	28	(22)
CONTRACTS OTHER (incl Professional Services)	678	854	176
CONTINACTO OTTIET (IIICIT Tolessional Gervices)	1, <b>658</b>	1,816	158
TRANSPORT	1,030	1,010	130
VEHICLE RUNNING COSTS	757	830	73
TRAVEL	203	180	(23)
IIVAVEE	960	1,010	5 <b>0</b>
PENSIONS	300	1,010	30
PENSIONS	409	207	(202)
. 2.1010110	<b>409</b>	<b>207</b>	(202)
INCOME			()
GRANTS	(2,191)	(2,125)	66
0.0.0.0	( <del>-</del> , ,	(-, . 20)	55





RENTAL INCOME	(243)	(236)	7
TVFCS RECHARGE INCOME	(354)	(354)	0
INCOME OTHER	(601)	(906)	(305)
	(3,389)	(3,621)	(232)
NET COST OF SERVICES	35,851	36,819	968
DEBT CHARGES INTEREST	388	371	(17)
INVESTMENT INTEREST	(78)	(320)	(242)
REVENUE FUNDING OF CAPITAL	1,670	1,670	0
APPROPRIATION TO/(FROM) RESERVES	(108)	(108)	0
FINANCING COSTS	701	701	0
REVERSAL OF ACCRUED HOLIDAY PAY	22	22	0
NET EXPENDITURE	38,446	39,155	709
GOV GRANTS/PRECEPTS	(38,446)	(38,422)	24
DEFICIT / (SURPLUS) BEFORE USE OF	0	733	733
RESERVES			

Royal Berkshire Fire Authority Quarter 3 Budget Monitoring Report 2022/23

Thames Valley Fire Control Service (TVFCS)

	Annual	Outturn to Dec	Forecast	Forecast Variance
	Budget	22	to Y/E	1 41141100
	£'000	£'000	£'000	£'000
EMPLOYEES	1,868	1,353	1,834	(34)
CORPORATE RECHARGES TO TVFCS FROM RBFRS	354	266	354	0
SUPPLIES/ OTHER	39	(10)	41	2
TECHNOLOGY	252	167	263	11
NET COST OF TVFCS	2,513	1,776	2,492	(21)
RBFRS Share of Costs (37%)	930	657	922	(8)





### HR Case Study - Musculoskeletal Support

The Movement Specialist continues to support staff with MSK issues and this quarter has worked with the wholetime apprentices.

In particular, rehabilitation advice was given remotely through our coaching app and face to face at the Fire Service College regarding existing injuries, intervention at an early stage in the course helped to protect from further injury and enable continuation on the course.

The Movement Specialist ran an evening clinic at the Fire Service College open to all apprentices who during training are undertaking new and repetitive movements which can put a strain on the musculoskeletal system. Those that were attended were given advice to manage any emerging issues. This demonstrates the preventative approach the Service takes to musculoskeletal health.





## **Equality, Diversity and Inclusion Objectives Progress Update**

The table below illustrates progress against our Equality, Diversity and Inclusion Objectives.

	End 21/22	Q1	Q2	Q3	Q4
Objective: Increasing the diversity of staff at all levels We recognise the value that a diverse workforce brings and will take action to increase the diversity of job applicants, seeking individuals with the right behaviours and skills to help us reflect and engage with our local communities.	New	G	G	А	G
Objective: Leadership and corporate commitment We will support our organisational leaders to understand their role in tackling inequalities and demonstrating inclusive behaviours, in line with our Behavioural Competency Framework. This commitment means we will be strong and visible in our leadership and ensure that all staff and members of our local communities have confidence in our commitment to equality, diversity and inclusion.	New	G	G	G	G
Objective: Improving our service delivery by creating strong links with our community  We will connect and communicate with our diverse local community to develop meaningful and sustainable links, which help us to increase our understanding of their needs. We will ensure that we tailor our prevention, protection and response activities accordingly and target the most vulnerable people with the greatest risk.	New	А	А	A	А
Objective: Building on our inclusive culture  We will continue taking action to ensure we have a culture where everyone feels valued and is treated with dignity and respect, and support all staff to contribute to the creation of an inclusive working environment.	New	A	А	G	G

Tables containing relevant Equality, Diversity and Inclusion data are presented quarterly and are available in Appendix A, which provide further explanation and detail regarding the below figures.

In summary, minimal changes have occurred in this quarter. The number of employees from ethnic minority groups has decreased from 45 to 43, and the number of female firefighters has increased from 28 to 30. There was no change in the number of individuals sharing information regarding a disability, with this figure remaining at 33. Trends will continue to be monitored by quarter to identify short-term changes as well as longer-term trends, in conjunction with activities as described above to monitor the impact of this work on demographics over time. Further work is also planned as part of the growth of the EDI Steering Group to explore options for equality monitoring and use of equality data.





# **Key - Project or Action Plan Status**

С	Project complete
G	Project on Track
А	There are issues with the project but these are being managed
R	Issues are having an impact on delivery
NS	Project not yet due to start





QUADRANT TWO – CORPORATE HEALTH DATA SUMMARY							
26. Percentage of work	2022/2	3 Target: 4% max					
	Q1 Q2 Q3						
Previous Year (21/22)	3.4%	5.5%	7.3%	7.1%	5.8%		
Target	4.0%	4.0%	4.0%	4.0%	4.0%		
2022/23 Actual	6.2% ↓	4.9% ↑	5.5% ↑	4.6% ↑	5.3% ↑		

Sickness this quarter is lower than in the same period last year, in both number of days lost and percentage of working time lost to sickness. Levels of sickness are also lower than in quarter 3.

Management of short term absence is addressed through Service Delivery Hubs/ TVFCS meetings. Quarterly sickness audits are also undertaken to identify poorly managed absence which is then addressed with the managers.

The target for this measure has been adjusted to 5% for the 2023-24 year, due to background societal trends.

27. Percentage of eligible staff with Personal Development 2022/23 Target: 100% Appraisals  Q1 Q2 Q3 Q4 Year to Q4					
	Q3	Q4	Year to Q4		
Previous Year (21/22)	76.0%	93.8%	98.2%	98.7%	98.7%
Target	100%	100%	100%	100%	100%
2022/23 Actual	30.0% ↓	81.0% ↓	86.0% ↓	88.0% ↓	88.0% ↓

The percentage of eligible staff receiving a PDR meeting this quarter is 88%. This is a lower than the same quarter last year (98.7%). The deadline for completion of PDR meetings was extended to July, this was due to several factors; workloads, crewing, sickness and preparation for the HMICFRS Inspection. Managers have access to reports to monitor performance locally and HR contact Managers on a monthly basis to ensure meetings have been recorded accurately and that paperwork has been returned.

28. Number of formal g	28. Number of formal grievances 2022/23 Target: Monitor				
	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	2	1	4	0	7
Target					
2022/23 Actual	2 ↔	1 ↔	10 ↑	5 ↑	18 ↑





29. Number of RIDDOR ac	29. Number of RIDDOR accidents and diseases  Q1 Q2				: 4 max
	Q1	Q3	Q4	Year to Q4	
Previous Year (21/22)	2	1	1	1	5
Target (max)	1	1	1	1	3
2022/23 Actual	3 ↓	1 ↔	3 ↓	2↓	9 ↓

During quarter 4 of 22/23, we reported two RIDDOR events. One was an over 7-day event, details of which were that the injured person suffered a back strain whilst moving a casualty. The second event was a specified injury, where the injured person suffered heat stress following hot BA training at the fire house.

In all cases, safety events are investigated, with recommendations made to address areas for improvement.

30. Percentage of spen	d subject to com	petition		2022/23 T	arget: 85%
	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	94.7%	92.3%	89.9%	83.8%	91.0%
Target	85.0%	85.0%	85.0%	85.0%	85.0%
2022/23 Actual	85.7% ↓	82.2% ↓	87.4% ↓	86.5 ↑	85.9% ↓
31. Compliant spend a	s a percentage o	f overall spend		2022/23 Ta	rget: 100%
	Q1	Q2	Q3	Q4	Year to Q4
Previous Year (21/22)	100%	100%	100%	100%	100%
Toract	100%	100%	100%	100%	100%
rargei	10070	10070			
Target 2022/23 Actual	100% ↔	100% ↔	100% ↔	100% ↔	100% ↔
				100% ↔	100% ↔
<u> </u>	100% ↔	100% ↔	100% ↔		100% ↔ 3 Target: 0
2022/23 Actual	100% ↔	100% ↔ er assessments	100% ↔		
2022/23 Actual  32. Number of Informat	100% ↔	100% ↔ er assessments	100% ↔		
2022/23 Actual  32. Number of Informat	100% ↔ ion Commission breached Inforn	100% ↔ er assessments nation Rights Le	100% ↔ finding gislation*	2022/23	3 Target: 0
2022/23 Actual  32. Number of Informat that the Service has	100% ↔  ion Commission breached Inform Q1	100% ↔ er assessments nation Rights Le Q2	100% ↔  finding gislation* Q3	<b>2022/23</b>	3 Target: 0 Year to Q4

## **Key - Performance Measures**

	Target exceeded by more than 10%	
	Target met or exceeded by up to 10%	
	Target missed by up to 10%	Comparison with target
	Target missed by more than 10%	Companson with target
	NA or data accuracy issues affect confidence in	
	reporting	
<b>^</b>	Improvement in performance from equivalent period	
l	the previous year	
$\leftrightarrow$	Maintenance of performance from equivalent period	Comparison with actual the
	the previous year	previous year
1	Decline in performance from equivalent period the	
<b>+</b>	previous year	





# **Quadrant Three – Priority Programmes**

Our Priority Programmes Quadrant brings together progress updates on our areas of work where we are delivering defined outcomes that are different to, or improve on, current working practices, policies and procedures.

Updates are provided on our CRMP, People Strategy and Strategic Asset Investment Framework (SAIF), assessing progress against the projects and objectives set in our 2022-23 Annual Plan.

A review of the existing initiatives is underway with the actions being reported on currently due for an update following the publication of key governance documents including our new CRMP and Corporate Plan. The initiatives and actions associated with these areas will be refreshed to align with the new strategic direction in Quarter 1 of 2023-34.

#### **Key - Priority Programme Project Status**

С	Project complete
G	Project on Track
А	There are issues with the project but these are being managed
R	Issues are having an impact on delivery
NS	Project not yet due to start





#### **CRMP**

RBFA is required to publish a Community Risk Management Plan (CRMP – formerly known as an Integrated Risk Management Plan). In 2018, we consulted on and published an IRMP for 2019-23, which reflects the priorities and requirements of the Fire and Rescue National Framework for England.

The below shows progress against our CRMP (IRMP) commitments published in our 2022-23 Annual Plan.

Project 1: Risk Analyses					
	End 21/22	Q1	Q2	Q3	Q4
Review our Risk Methodology and data requirements to inform our new CRMP, ensuring our risk analysis supports equality of access to our services for all the communities of Royal Berkshire.	BAU	Α	Α	G	С
Deliver our action plan to align our analysis to the Fire Standard for Community Risk Management Plans.	New	А	G	G	С
Develop and consult on a new Community Risk Management Plan to start in 2023.	New	Α	Α	G	С
Provide a mapping capability to support local risk analysis.	New	Α	Α	G	G
Analyse information about fire casualties to determine risk factors.	New	NS	NS	G	С
Continue to engage with and drive the National Fire Chiefs Council (NFCC) work to develop national best practice in risk analysis.	G	G	G	G	G
Project 2: Prevention					
	End 21/22	Q1	Q2	Q3	Q4
Continue to work in collaboration with our Berkshire partners to identify the most vulnerable people in our society, increasing the numbers of Safe and Well Visits resulting from Referrals.	А	G	G	G	G
Deliver and evaluate our new programme of follow up Safe and Well Visits to the most vulnerable.	G	G	G	G	G
Focus our activities in support of Children and Young People through our road and water safety education programmes, Fire Cadets and FireSafe.	А	А	А	А	А
Carry out targeted road safety activity, including for motorcyclists and around smart motorways.	G	G	G	G	G
Further develop local safety initiatives, campaigns and events to target risk at a local level and evaluate their effectiveness.	G	G	G	G	G
Ensure a high standard of service through the quality assurance of our Prevention activities.	А	G	G	G	G
Carry out a risk based review of Safe and Well Visit provision to be aligned with the development of our new CRMP.	New	NS	Α	А	А





Project 3: Protection	Fnd	101	02	02	04
	End 21/22	Q1	Q2	Q3	Q4
Continue to develop and embed our new risk-based inspection programme to ensure that we are identifying and targeting our resources at the areas of highest risk, in line with our Protection Strategy.	G	G	G	G	G
We will implement the learning from the phase one Grenfell Tower inquiry.	G	G	G	G	G
Ensure a high standard of service through the quality assurance of our Protection activities.	R	G	G	G	G
Project 4: Response Resource Deployment					
	End 21/22	Q1	Q2	Q3	Q4
Continue to evaluate future developments in housing and infrastructure to ensure that our resource deployments match predicted future demands.	А	G	G	G	G
As set out in our Response Strategy, continue the review of our specialist water rescue capabilities to be aligned to local risk and reflect national best practice.	А	G	G	А	G
Improve and evaluate our ability to respond to risk in the West of the county through effective targeting of our Prevention and Protection activity.	New	G	G	G	G
Undertake incident support and technical capability reviews as part of the risk analysis element of the development of the new CRMP.	New	NS	А	А	А
Project 5: Response Safe Systems of Work Development					
	End 21/22	Q1	Q2	Q3	Q4
Continue to clarify and prioritise next steps in the digital transformation journey as part of our Technology roadmap.	New	G	G	G	G
Work with the NFCC and other key stakeholders to adopt new technologies, which support effective and efficient safe systems of work.	G	G	G	G	G
Continue our investment of resource and expertise in the Thames Valley Breathing Apparatus Replacement project, conducting an effective and efficient joint procurement prior to implementation.	G	G	G	G	С





# **People Strategy**

The purpose of our <u>People Strategy 2018-2021</u> is to support RBFRS staff to become the best public servants they can be, creating a workforce that can deliver efficient and effective service on behalf of the Fire Authority, to manage all foreseeable fire and rescue related risks that could affect the people of Berkshire.

WARKTARCO WAA CAA ARAVIAO A TIT TAR AUTAAGO GORVICO 1411 SAS AAVG S	safe, prof	essiona	l and ca	apable	
workforce, who can provide a fit for purpose service, 24/7, 365 days a	End 21/22	Q1	Q2	Q3	Q4
Undertake Fire Fighter recruitment using Apprenticeships	G	G	G	С	С
Expand on alternative ways of delivering learning and development through improved use of technology	G	G	G	С	С
Objective 2: Increase the diversity of our workforce to better represe	nt and the	erefore	serve oi	ur loca	
communities	End 21/22	Q1	Q2	Q3	Q4
Continue to support the Leonard Cheshire Change 100 programme to work with disabled graduates on a 100-day intern programme.	G	G	G	С	С
Review and consult on our Equality, Diversity and Inclusion objectives and deliver associated actions, including taking positive action to ensure job and career opportunities in our service are accessible to all individuals and groups in our communities	G	G	G	G	G
Develop and implement the Chairman's Internship which will target young people from under-represented groups in Berkshire	G	G	G	G	G
Objective 3: Develop people and recruit talent to take personal respondence organisation to ensure a public service ethos, support collaboration improvement					
	End 21/22	Q1	Q2	Q3	Q4
					Q4
	G	G	G	G	G G
at all levels of the service	G G	G	G A	G A	
Integrate and embed our behavioural competency framework and values at all levels of the service  Deliver a framework for coaching and mentoring  Objective 4: Develop a diverse and inclusive 'one team' culture when and positive behaviours are used to describe how we work together	G re everyo	G	Α	A	G
Deliver a framework for coaching and mentoring  Objective 4: Develop a diverse and inclusive 'one team' culture when and positive behaviours are used to describe how we work together	G re everyo	G ne's cor	A	A on is va	G A
at all levels of the service  Deliver a framework for coaching and mentoring  Objective 4: Develop a diverse and inclusive 'one team' culture where	G re everyo End 21/22	G ne's cor	A A Ditribution	A Q3	G A A alued Q4





	End 21/22		Q1	Q2	Q3	Q4
We will explore the options for use of digital resources for our Protection services	Α		Α	А	А	R
Objective 6: Continue to support both the physical and mental heal	th and wel	lbei	ing of	our ne	onle.	
Objective 6: Continue to support both the physical and mental heal	1	lbei				104
Objective 6: Continue to support both the physical and mental heal	End 21/22	Ibei	i <b>ng of</b> Q1	our pe	Q3	Q4
Objective 6: Continue to support both the physical and mental heal  Learn and adapt to different ways of working during and after the  COVID-19 pandemic	End	lbei				Q4 C





# **Strategic Asset Investment Framework**

The Strategic Asset Investment Framework sets out how we will maintain and renew the vital capital assets, necessary to support our services. Our capital assets include our fire stations and HQ, fleet and equipment and our ICT systems. All together, they represent a major capital investment.

Buildings						
<u> </u>				Status		
		End 21/22	Q1	Q2	Q3	Q4
Estates Development	On Track	G	G	G	G	G
	On Budget	G	G	G	G	G
Fleet and Equipment						
				Status		
		End 21/22	Q1	Q2	Q3	Q4
Fleet: Special Appliances	On Track	Α	А	А	А	G
	On Budget	G	G	G	G	G
Fleet: Other Ancillary	On Track	G	G	G	G	G
Vehicles	On Budget	G	G	G	G	G
Equipment	On Track	G	G	G	G	G
	On Budget	G	G	G	G	G
ICT				21.1		
				Status		
		End 21/22	Q1	Q2	Q3	Q4
Hardware	On Track	А	G	G	G	Ð
	On Budget	G	G	G	G	Ð
Software	On Track	G	G	G	G	G
	On Budget	G	G	G	G	G
Networks	On Track	Α	А	А	А	А
	On Budget	G	G	G	А	А
Services	On Track	G	G	G	G	G
	On Budget	G	G	G	G	G
ESMCP	On Track	Α	А	R	R	R
	On Budget	Α	А	R	R	R





# **Quadrant Four - Assurance**

# Risk Register

RBFRS has a comprehensive Organisational Risk Management Policy, along with a framework for monitoring and managing risks and uncertainties to ensure that organisational objectives can be achieved. Strategic Risks and those with a current score of 17 or above, are escalated to the Corporate Risk Register and monitored monthly by the Senior Leadership Team.

#### **Risk Movement Highlights**

This section highlights organisational risks which have been added, closed or substantially changed risk score over the course of Quarter 4. To ensure the most up to date picture for risk, the updates include information about progress since the end of the quarter.

## **Key - Classification of Risk Scores and Risk Movement**

20 - 25	Outside assumed Risk Appetite and requires mitigation to proceed
19	Inside Risk Appetite only because of extremely low probability. Mitigate if necessary and possible, accept only if no further action can be justified
17 & 18	Inside Risk Appetite. Mitigate further if cost effective to do so - discuss with a Director
7-16	Inside Risk Appetite. Mitigate further if cost effective to do so
1-6	Inside Risk Appetite and unlikely to need further mitigation
<b>↑</b>	Risk increasing
$\leftrightarrow$	No risk movement
<b></b>	Risk decreasing





Key	/ Risk	<u>417</u> ·	Firefighter	Safety
110	I NISK.	T ! / .	i ii ciigiitei	Jaicty

Risk Owner: Ka	atie Mills
----------------	------------

	End of Q3 Risk Score	End of Q4 Risk Score	Direction of travel	Risk score as at Jun 23
Risk Description:  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	19	19	$\leftrightarrow$	19
public reputation and trust levels.				

The risk to the safety of our firefighters is significant and ongoing. The treated score for this risk is 19, recognising that the nature of the role is inherently risky, and the potential impact will always be major. We continue to review and add mitigations to ensure the risk score does not rise.

Current Mitigations	Progress on Mitigations
COMPETENCE OF OPS PERSONNEL: Monitor and ensure the competence of all operational personnel, including appropriate assessment, assurance, verification and monitoring	Driving quals analysed due to likely risk, further info via SD required to aid future approach. Q4 = 69% FF and CM only. New FF staff not yet ready for ERD. Challenges as a result of facilities (training centre/ firehouse) ongoing and adjustments made to meet need. No. of staff in development- high and loss of experience = more assessment activity in L&D, org consider support to training required. Ops competence fire standard action plan progressing, reg review sessions, monitor @ PB. OTP learning outcomes align to NOG -expect complete July. Officer training sessions reg run. Station based quals review with SD, station 0/22 temp resolved. Further review AM Response req. WR project intro further Mod 3 quals. Delay tethered wade due to delivery time. Capacity and qual of L&D =impact to revals. Expiry RTC quals - plan return to BAU in Oct. New risk regarding delivery added. Issues Apprentice course with FSC impacts to critical skills plan to correct being developed.
OPERATIONAL GUIDANCE: Alignment of RBFRS Operational Policy and Guidance with the National Operational Guidane (NOG)	N.O.G project closed down, now BAU, some alignment work continues in teams e.g., L&D, RRS - monitored by OPAG team. Reporting into OLAB/SDMT to escalate issues.
ASSURANCE & LEARNING: Operational assurance and post incident/event learning	HMICFRS AFI now closed down and service aligned to Operational learning fire standard - OLAB operating in steady state - continuous improvement work ongoing to refine and improve reliability and ensure new processes are robust.





Key Risk: 417: Firefighter Safety	
Risk Owner: Katie Mills	
AUDITS: Engage in appropriate audit arrangements to share good practise, check compliance and identify further opportunities to improve.	External 'peer review audit' scheduled for January 23 (originally Spring 2020 but postponed due to C-19). Audit preparation underway. Audit report expected March 23. Findings from audit to be incorporated into HSW action plan. RBFRS support SE regional collaborative audits of other FRSs, and Thames Valley FRS's 'mini' audits.
OVERARCHING H&S POLICY inc: Roles and responsibilities. Consulting arrangements. Identify and review new information. Reviewing and developing procedure / guidance. Reporting, recording and investigating accidents/near misses.	Health and Safety Policy updated in April 22 to incorporate organisational changes and lead responsibility for H&S (transfer from DCCF to DCS/DCE). Policy is aligned to HSG 65. Annual review of CFO and FA Chair safety policy statement undertaken in Sept 22. Next full review (April 23) to include a review against NOG Health and Safety Management to ensure that arrangements continue to align with legal and NFCC guidance. Any opportunities for improvement to be included in the HSW action plan. Review of processes to be undertaken in consultation with the Business Support Lead to identify potential efficiency opportunities for the health and safety team and wider organisation.
RESOURCE: Ensure adequate resource for the provision of appropriate H&S management, inc: Central and operational H&S resource capacity/capability, including H&S qualification and investigative practise.	Appropriate H&S aspects incorporated in to DAPs for grey book staff. CMs and above complete IOSH managing safely course which includes a module on risk assessment and accident investigation. Separate accident investigation course delivered to managers. Senior Managers attend IOSH safety for senior execs. CPD and refresher training to be explored. Health and safety training matrix to be developed for green book staff (including those who may manage grey book staff).
PERFORMANCE: Monitor and measure H&S performance	Lagging indicators monitored via SPB and HSWC (RIDDOR, accident and near miss data, sickness data). Near miss/ incident data provided to SLT monthly. Opportunities for benchmarking are being explored withing the NFCC SE region. Operational assurance framework in place, includes incident, exercise and post incident learning. Incident Monitoring roles includes observation of safety and risk issues. Exercise plan 22/23 includes FF safety critical functions. Operational training is reported to SPB. An action plan which is being developed to deliver the refreshed HSW strategy will consider and propose a range of lagging indicators and a review of the process for sharing of external information. Monitoring of this risk (417) included in HSWC ToR as a standing item.





#### Key Risk: 417: Firefighter Safety

Risk Owner: Katie Mills

OPERATIONAL PREPAREDNESS: Planning for incident safety, including provision of risk critical information, assessment of risk, operational decision making and recording.

Ongoing work under way on Response Fire Standards, with any improvement areas to be managed through Service Plans. New framework document relating to risk visits is monitored through Service Delivery management to manage schedule and alignment to framework. Service Level measures being developed alongside improved reporting. Exercise Plan now well established and being delivered. Operational Support function now in place and providing support and coordination to hub delivery of the plan and other elements of operational learning. Additional capabilities being implemented for Q2 2023/24 as part of phased CRMP work in relation to water rescue and wildfire. Operational resource management policy to be published June 23 to ensure co-ordinated and effective use of all operational resources (replacing optimisation of crewing policy and degradation of crewing guidance). Incident command packs, decision logs and contemporanous notebooks embed and reviewed through OLAB.

WELLBEING AND WELFARE; (limited to direct operational activity) inc: adequate consideration for fatigue, refreshments/hydration and recovery (including stress and trauma) (wider Service health surveillance out of scope)

Basic requirements in relation to incident welfare sufficiently met through policy, procedure, incident support etc. Post incident support for trauma well established. Work underway in relation to impact and management of contaminants. All the above can be monitored and assured through OLAB and HSWC with any corrective actions being addressed.



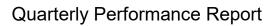


Key Risk: 681: Wholetime Operational Availability, Crewing and Capabilities					
Risk Owner: Katie Mills	End of Q3 Risk Score	End of Q4 Risk Score	Direction of travel	Risk score as at Jun 23	
Risk Description: If we do not maintain the necessary numbers, skills and knowledge requirements of WDS personnel, which requires constant attention with our lean operating model, we may see adverse impacts on the provision of appliance availability, delivery of our response standard and our wider service plans and this could significantly impact community safety and our organizational reputation.	21	21	$\leftrightarrow$	21	

This risk relates to one of the biggest challenges we are currently facing. We have seen a rise in departures from our wholetime workforce in recent years, due to a number of factors including pension changes and moves to other services. We plan ahead and recruit to fill these vacancies and are working hard to ensure our new staff members become competent as soon as possible, however due to this volatility there are a high number of the operational work force who are in development. Sickness absence levels are also high currently, reflecting societal rises in sickness absence.

Current Mitigations	Progress on Mitigations
To ensure the effective and efficient management of skills and knowledge to ensure operational staff are trained and developed to deal with a range of incidents as defined in the National Operational Guidance (NOG)	Number of staff in qualification is an HR&L&D Service measure. Training & revalidation activity is assessed & reviewed, including learning from events. Some challenge with revalidation and capacity in L&D - separate risk raised. If cancellation of courses/students due to crewing = impact to quals. Training needs increased due to projects & new staff in development. Engagement with NOG developments & other programmes of activities to ensure training needs are informed. Op Comp policy and OTP in place. Updates in Fire Standard action plan via PB. MOKS OTP E-learning package launched, face to face training completed, LO development progressing for completion July 2023. Training Plans for 2023/24 agreed. Station Based Qualifications interim solution for station 20/22 rest need attention. DAPS evaluation complete due for launch. Impact to skills delivery due to pressures in L&D and capacity affected. Qual extension decision enacted to deal with crisis of facilities then RTC issues. Additional Mod 3 training underway but tethered way needs considerations.
Effective workforce planning for the wholetime staffing duty system to ensure the full complement is achieved	24 apprentices commenced 2/2/23 - 23 progressing. FF recruitment due to commence end Q1. RRG supported by HR & R&D providing info. 6 wholetime recruitment activity planned for Aug intake seeking to increase numbers, if possible, review workforce plan 26/4/23 WPG meeting.







	Review of staff mobility and promotion requirements continuous.
Effective monitoring and management of sickness absence	Monitoring of sickness absence undertaken in RRG and also hub based monthly meetings with HR. Aim to have good understanding of short- and long-term sickness and restricted duties and in support of strong performance management and support to improve sickness absence. Further work required between HR/SD in relation to management of trigger points. During Q4 and Q1 of 2023, operational sickness absence has reduced from previous quarters.
RRG responsible for regular monitoring and management of crewing and establishment	Reports into SDMT and escalates risks and issues. Regular review of crewing establishment and qualifications with a view to seeking short term resolution / improvement and informing and escalating issues to SDMT / workforce planning. Ops Support function providing assistance in relation to monitoring and management of crewing. Recent apprentice arrivals on station will support overall numbers, but there is an increasing challenge in relation to skills and qualifications which requires careful monitoring and management. New operational resource management policy in place from June 23 to support best use of resources.
Review our risk analysis and response model as part of our CRMP	Reviewed our utilisation of appliances over last 6 years, which confirms that our response standard will stay the same. A project to review our response model has been agreed in the new CRMP. This new project will look at our response model, including, appliances, specials and flexi duty officers. A project has been entered in the Annual plan for 2023/24 to scope out the project and review the RMS FDO.





Key Risk: 844: Cost of living rise impact on staff						
Risk Owner: Nikki Richards						
	End of Q3 Risk Score	End of Q4 Risk Score	Direction of travel	Risk score as at Jun 23		
Risk Description: If the cost of living continues to increase, which is very likely with the rate of inflation expected to continue at high levels, then we can expect to see our staff members struggling financially, which would reduce staff wellbeing and increase the risk of industrial action. This risk may affect our ability to meet our strategic commitment to recruit, train and develop our people to ensure we create a safe, professional, capable and diverse workforce that are supported to become the best public servants they can be for the residents of Berkshire.	18	18	$\leftrightarrow$	18		

We identified this risk in June 2022, introducing mitigations to help minimise the impact of cost of living pressures on our staff. We continue to make progress on these mitigations and regularly consider if any further actions need to be taken.

Current Mitigations	Progress on Mitigations
Consider options for hardship support	Work has progressed through HR/Finance monthly meetings and through to SLT
Working with representative bodies, we will review reward and recognition offer to all staff, to include a review of allowances	Allowances review complete. Uplift in line with CPI agreed, including backdated where applicable. Specific vehicle allowances considered in separate T&F group to be considered, car lease policy via SLT for FDO reviewed provision initially. Travel policy and rates uplifted from 7 October. ARA review required including station based qualifications, Driving review underway to inform req decisions.
Signposting where to get financial advice, how to access food banks, etc	Promotion of support and tools specifically in relation to financial wellbeing - dedicated space on Siren.  Communication through wellbeing and separate objective set up in HS&W action plan monitored via HSWC. Hardship alternative of buy back leave agreed via SLT and available in certain circumstances. Review of other streaming services considered.
Awareness to managers of stress indicators	Mental Health training with refreshed content considered for forthcoming Training year to address requirements and ensure continued focus on staff welfare and support from managers and peers. all opportunities used to highlight personal impacts, health promotion identifies other supports that might address associated issues e.g. D&A
Provide additional Focus on Finance courses	New course in place replaces mid-career planning. Learning outcomes for anyone looking to take control of their finances,





# Quarterly Performance Report

Signpost use of workplace offers and benefits e.g. MyLifestyles benefits	are to encourage greater confidence in financial matters through increased financial knowledge Help employees take stock of their current financial position and show them the benefits of budgeting.  Siren Pages - inform advice and support and tools to assist
Reviewing staffing working patterns and remuneration options as part of CRMP and People Strategy	CRMP priorities agreed by FA and planning re projects commencing. Development Programme in development .





## Corporate Risk Register risks as at 28th June 2023

#### Each risk has 3 risk scores:

- Inherent Score the risk score at the risk's initial assessment
- Current Score the risk score as of this current moment in time
- Treated Score the risk score we expect to reach once the treatments have been completed and have mitigated the impact or likelihood of the risk.

## Strategic Risks

Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
417	Firefighter Safety	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.	25	19	19
418	ESMCP	If we do not make sufficient provision of resources and budget 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.	23	23	10





Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
506	Volatility of funding	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.	24	16	16
629	Management of Cyber Security	If we fail to ensure compliance with Cyber Security best practices and guidelines, which is increasingly likely due to ongoing evolution in the sophistication of attack methodologies, we may be exposed to operational degradation, financial loss and/or reputational damage due to reduced availability, integrity or currency of our data and systems.	21	21	12
663	Capital Projects - Effective Estate Management	If we fail to effectively manage our property assets to ensure they are fit for purpose and in the right locations, which may become increasingly likely given the funding challenges and the increasing age of our fire stations, then we can expect our revenue expenditure to increase, our services to be less effective and our stations to further decline which would be significant in respect to our strategic objectives; to ensure value for money and ensure fire stations are suitable and accessible for our own staff and the communities they serve.	23	17	10
681	WDS Operational Availability, Crewing and Capabilities	If we do not maintain the necessary numbers, skills and knowledge requirements of WDS personnel, which requires constant attention with our lean operating model, we may see adverse impacts on the provision of appliance availability, delivery of our response standard and our wider service plans and this could significantly impact community safety and our organizational reputation.	23	21	12





Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
682	On-Call Operational Availability, Crewing and Capabilities	If we do not sustain activity to ensure our on-call provision has the appropriate numbers of personnel with the necessary skills, knowledge and availability then we risk undermining organisational resilience in our response capability and this could impact community safety and organizational reputation.	21	16	12
737	Fire Transformation	If the fire transformation programme brings significant change within the sector, which is becoming increasingly likely with the Government's fire reform agenda, then we face a period of increasing uncertainty which may affect the organisation's strategic direction.	21	21	11
742	Management of premises risk information	If we do not manage the capture, processing, storage and access of premises risk information which is increasingly likely due to the quantity and complexity of the data involved, staff may be unaware of hazards within the built environment or be presented with inaccurate or out of date information which may result reduced staff safety and or a breach of GDPR.	18	15	12
774	Comms Resource	If we fail to resource the Communications and Engagement Team adequately, in line with our current and anticipated work demands, then this could significantly impact the effectiveness of the support provided across the Service and risk delivery against our strategic objectives as set out in the Annual Plan and Corporate Plan	21	15	15





Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
798	Environmental/Sustainability	If RBFRS fails to develop, fund and implement an environmental and sustainability plan, then we can expect an increase in financial pressure with rising energy costs, and RBFRS' reputation as a public sector organisation to be negatively impacted through being out of alignment to wider societal progress towards creating a more sustainable future which will significantly impact our ability to deliver our statutory duties and strategic objectives.	23	21	10
831	Service Delivery Policy	If we do not develop, deliver and maintain coherent service delivery policy and guidance, which is likely given existing legacy arrangements, we can expect to have contradictory, duplicated, erroneous or out of date policy which is significant in respect of supporting staff to provide a safe and effective Response service, aligned to our statutory duties.	16	10	6
833	Fire Investigation - Collaboration	If we are unable to provide the support and resource required to deliver a multi-service approach to ISO 17020 accreditation, which is becoming increasingly likely due escalating costs and increasing complexity and demand, then we can expect to encounter issues in supporting criminal prosecutions which is significant in respect of public safety and the reputation of RBFRS.	21	21	12
842	Volatility of operational staff numbers	If Prevention, Protection and Response staff turnover increases, which may become more likely with changes in pension rules and recruitment of neighbouring services, then we can expect to have a challenge in retaining required levels of PP&R staff, which may affect our ability to meet our strategic commitment to ensure a swift and effective response when called to emergencies.	25	23	15





Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
843	Proportion of operational staff in development	If PP&R staff turnover increases, which may become more likely with changes in pension rules and recruitment of other services, then we can expect to have a greater number of new members of staff who will be in development being recruited to replace experienced leavers, which may affect our ability to meet our strategic commitment to ensure a swift and effective response when called to emergencies and impact corporate memory.	25	23	15
844	Cost of living rise impact on staff	If the cost of living continues to increase, which is very likely with the rate of inflation expected to continue at high levels, then we can expect to see our staff members struggling financially, which would reduce staff wellbeing and increase the risk of industrial action. This risk may affect our ability to meet our strategic commitment to recruit, train and develop our people to ensure we create a safe, professional, capable and diverse workforce that are supported to become the best public servants they can be for the residents of Berkshire.	18	18	13
875	Industrial Action – ability to deliver statutory services impact	If the Fire Brigades Union elect to take national industrial action as a consequence of the ongoing pay award negotiations for Grey Book Staff, then we can expect there to be a significant impact on our ability to deliver our statutory services, which we must seek to mitigate through best endeavours and business continuity arrangements.	24	6	6
876	Industrial Action – financial impact	If the Fire Brigades Union elect to take national industrial action as a consequence of the ongoing pay award negotiations for Grey Book Staff, then we can expect there to be a significant financial impact on the Service due to the requirement to make best endeavours to mitigate the impact through its business continuity arrangements.	24	6	6





Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
879	Organisational Capacity	If RBFRS does not effectively align its organisational resource capacity to priority areas, which is becoming increasingly likely given internally and externally driven demand within an environment of greater spending restriction, then we can expect reduced delivery of core services, negatively impacting on the wellbeing and retention of staff, which will significantly impact our ability to deliver all our annual objectives.	23	23	13
885	Climate Change Operational Response	If we do not consider the impact of a changing climate on our operational response, we may fail to effectively mitigate risk within our communities for which we have statutory responsibility and be suitably prepared to respond to operational incidents in changing conditions, which could have implications for the for the health, safety and wellbeing of our staff.	21	21	15
891	FDO numbers, skills & knowledge	If we do not maintain the necessary numbers, skills and knowledge requirements of Flexi Duty Officers personnel, which requires constant attention with our lean operating model, we may see adverse impacts on the provision of incident command and specialist capability, which could significantly impact community safety, firefighter safety and our organizational reputation.	23	13	12
892	MEN Arena Inquiry	If we do not evaluate and respond to the recommendations made within the Manchester Arena report which is becoming increasingly likely given current demands on capacity then we can expect potential impact to the safety of our staff and members of the public which is significant in respect to our public reputation and managing our community risk.	17	17	10





Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
893	National Power Outage planning	If we do not have appropriate business continuity arrangements in place for a widespread power outage, which is increasing likely due to gaps in current Business Continuity Planning processes, then we can expect severe and critical impacts on service delivery and our staff, which is significant in meeting our statutory duties and impacts on community safety.	21	18	12
906	IT Disaster recovery	If we suffer a system(s) or data loss, which may become increasingly likely due to ageing systems and increased risks from cyber incidents, then we may be exposed to a disruption in the continuity of key digitally delivered services for a prolonged period of time, which are significant in respect to our capability to deliver all services, reputation, statutory reporting timeframes, or staff wellbeing.	21	21	16





## Service Plan Risks

Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
664	Management of Budget Pressures	If we fail to accurately capture budget pressures over the medium term, which is becoming more likely given the volatility in the macro-economic environment, then resource allocation will become sub-optimal, impacting negatively on our ability to deliver an efficient and effective service to the public.	24	18	16
685	Pensions Case Law	If we do not keep informed of pension case law and prepare records and establish adequate arrangements to meet the expected changes to pension regulations and ensure the Pensions Administrator undertakes the necessary action; which is becoming increasingly difficult due lack of understanding and clear direction, the technical complexity associated with changes and competing demands, then we can expect to be in breach of the regulations, subject to potential legal challenge and adversely impact employees and pensioners, which are significant in respect to our financial security, employer duties and our reputation.	24	22	18
686	Pensions Governance	If we do not employ an effective pension governance, management and administration strategy; which is becoming increasingly important given the complexity and changes made to pension regulations, limited pensions expertise and capacity within the HR department, then we can expect to fail in our employer duties, breach regulations, be subject to legal challenge and scrutiny from The Pensions Regulator resulting in potential for enforcement and penalty notices, which are significant in respect to our financial security, statutory duty and our reputation.	21	21	15





Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
767	TVFCS staffing resilience	If we do fail to develop and implement resilient TVFCS staffing arrangements, which is becoming likely due to the impacts of crewing deficiencies on managerial capacity, then we can expect to experience impacts on service delivery in the control room and the health and wellbeing of our staff, which is significant in respect of FRS delivering their statutory duties.	18	18	12
768	Capacity to adopt National Operational Guidance (TVFCS)	If we are unable to resource the activities required to adopt and embed Control Room N.O.G. into TVFCS, which is likely givewn the limited capacity available within the Control room's management team, then there is the potential for personnel to train in or deploy procedures which do not align to industry best practice and which do not maximise safety and operational effectiveness which is significant in respect of delivery of statutory duties and legislative responsibilities.	18	18	9
791	Responding to high levels of demand in TVFCS	If we are unable to increase levels of staffing within TVFCS to deal with high call volumes or complex incidents at short notice, which is likely given that TVFCS staff are not contractually required to attend work other than for their scheduled shifts, then we can expect to experience impacts on TVFCS ability to deliver an efficient, effective and resilient service which is significant in respect of delivering the statutory functions of a fire a rescue service and the primary objectives set out in the TVFCS legal agreement.	18	18	12





Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
852	Fire Investigation Internal	If we are unable to effectively investigate fires within RBFRS which is possible due to a reliance on a 1 month notice period contract with West Midlands FRS for all Tier 2 fire investigations then we can expect to be unable to determine the cause and origin of significant fires both deliberate and accidental which is significant in respect of public safety and the reputation of RBFRS.	21	18	12
853	IBIS capability and limitations	If we are unable to record and access timely and accurate data in relation to Prevention and Protection activities which is likely due to the bespoke, 'inhouse' nature of IBIS software then we can expect an impact on the accuracy of our identification and prioritisation of risk and our ability to comply with legislative requirements which is significant in respect of public safety and the reputation of RBFRS.	21	21	12
861	Hydrant Inspection and Repair	If we fail to appropriately resource and fund the hydrant inspection and repair programme, which is increasing likely given financial restrictions and difficulty recruiting personnel, then we can expect to see an increase in hydrant failure rates, already noted through operational feedback, which is significant is respect of Firefighter safety and providing an effective response to incidents.	21	18	12
867	Training Centre Refurbishment/Renewal	If RBFRS does not provide appropriate training centre facilities following a severe flooding incident, then we can expect operational training activities to be severely impacted leading to staff being unable to train and or maintaining competence of skills, which will significantly impact our ability to deliver our front line services and strategic objectives.	23	17	12





Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
882	Building Safety Regulator	If the BSR were to required RBFRS to provide fully qualified FSIs to support its function from October 2023 which is increasingly likely given the national shortage of qualified FSIs across England FRS and given the powers granted to the HSE under the Building Safety Act RBFRS may have insufficient qualified FSIs to discharge our legal duties in relation to enforcement and regulation which is significant because these are statutory requirements.	18	18	12
896	TVFCS Learning and Development	If we do not appropriately support control learning and development, which is becoming increasingly likely due to the impact of increased staff turnover, new drivers such as control N.O.G and external impacts on capacity, we can expect to experience a range of impacts on TVFCS staff knowledge, skills and capability, which is significant in ensuring the health and safety of frontline staff and community safety.	18	18	12





Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
902	R&D Staffing	If we are not able to fill vacancies in the R&D department quickly and retain existing employees, which is likely given the high employment rate and affluent demographic within the Berkshire area, we can expect to have significant difficulty in meeting the demand for recruitment, training and development activity and in supporting staff fulfil their roles effectively, increasing the pressure placed on current R&D staff and line managers; reducing overall performance and impacting productivity; delaying filling operational vacancies, staff development and the attainment of competence in role and impacting capacity to lead and engage in organisational development projects, leading to the risk of compliance failure, EDI implications, a failure to meet contractual obligations (DAPs) and associated pay implications, increased complaint (demanding more time), absence of training to meet need and ultimately a risk to FF safety, operational and organisational effectiveness.	18	18	6
903	NILO Resilience	If we do not maintain our NILO establishment in line with the Thames Valley Procedure, which is likely due to current Flexi Duty Officer establishment and staff turnover, then we can expect to be unable to deliver a safe and effective response which is significant in line with strategic commitments and may be of detriment to firefighter and public safety.	21	18	
904	TVFCS recruitment and retention	If the trend of increased staff turnover continues, which is likely as this is reflected in the national picture and is linked to pay and conditions, we can expect an increased burden on capacity to deliver recruitment processes and training as well a reduction in experience levels, which will have a significant impact on our ability to deliver an effective service, potentially increasing risk to communities and firefighters.	17	17	10





## **Project Risks**

Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
897	Command Support effectiveness	If we fail to assure that we have effective and robust command support arrangements that are aligned across the Thames Valley, there is an increasing likely hood, given the aging command support equipment and arrangements that the command support arrangements would be operating sub-optimally. This could impact our operational response, and affect the safety of our staff and members of the public.	18	18	10





#### **Audit Plan**

Audits provide assurance that the Service is run properly and in ways that have been agreed by our Officers and Members. They demonstrate that the business is conducted in accordance with relevant legislation, government expectations, good practice and organisational policy.

Our Audit Programme is agreed by the Audit and Governance Committee at the start of the year. Progress against all actions open at the start of Quarter 4, or opened during the quarter, is detailed below.

## **Key - Project or Action Plan Status**

С	Project complete
G	Project on Track
А	There are issues with the project but these are being managed
R	Issues are having an impact on delivery
NS	Project not yet due to start

Audit title and date	Audit Action	Date due (revised where applicable)	Priority	Status	Open / Closed
Risk and	2022: RAG:1	31/10/2023	Low	G	Open
Governance	The Performance Management Framework will				
26/05/2022	The Performance Management Framework will be updated to clearly outline that the SLT is the main group responsible for review of the Corporate Risk Register.				
Progress: Additiona	al required amendments to the Performance Manager	nent Framewo	rk have bee	n identifie	d and a
full review will be ca	rried out in 2023-24.				
Health & Safety	2023: HS:2	30/03/2023	Medium	G	Open
13/12/2022	We will review all managers who have been with the Service for more than three years and ensure that health and safety refresher training has been provided in a timely manner.				

**Progress:** Context: RBFRS policy is that all grey book managers and some specific green book managers complete an IOSH Managing Safely course. A refresher course after 3 years is recommended but not mandatory. From the sample audited, it was found that a number of staff had not completed refresher training within the recommended 3 years.

Action proposed: IOSH Managing Safety refresher courses are now mandatory for eligible staff (supervisory staff, grey and green book equivalents). HSM currently undertaking a review of all green book roles to identify health and safety training required.

Health & Safety	2023: HS:3	31/03/2023	Low	G	Open
13/12/2022	We will integrate the review of the Workplace				
	Safety Inspection policy within a formal meeting				



# Quarterly Performance Report



Audit title and date	Audit Action	Date due	Priority	Status	Open /
		(revised	-		Closed
		where			
		applicable)			
	such as the Health and Safety Wellbeing				
	Committee who will approve future changes				
-	Minor updates had been made to the Workplace Hea	-	-	-	
	nal consultation process (e.g. SLT, representative boo	,	•		
	accordance with the Document Management Policy.	The auditors for	elt that this	might lead	l to a lack
of oversite by SLT.					
Proposed action: St	arting with Q1 23/24, a summary of any updated heal	th and safety p	olicies whi	ch do not r	equire ful
consultation will be	presented to the quarterly Health, Safety and Wellbei	ng meeting, wh	nich is chair	red by the	Deputy
Chief Executive, an	d attended by several SLT members.				
Health & Safety	2023: HS:6	31/12/2023	Low	G	Open
13/12/2022	We will introduce lessons learned in the quarterly				
. 0,, _ 0	meetings to the Health and Safety Committee				
	and cascade the information to employees.				
Progress Contaxt:	Quarterly and annual safety event reports are preser	tod to Hoolth	Safaty and	Mallhaina	•
	Quarterly and annual safety event reports are preser				net
Committee. The rep	orts include the total number of injuries, injuries by ty	pe, severity of	injury, work	ing days lo	
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23: FM1a  e will ensure that the contractor portal is kept to date for each of the contractor scheduled rks and all necessary statutory compliance ecks will be included.  23: FM1b  e will ensure that the three residential operties the Service is responsible for are	Completed at time of report  Completed at time of	Medium	C	Closed
e will ensure that the contractor portal is kept to date for each of the contractor scheduled rks and all necessary statutory compliance ecks will be included.  23: FM1b  e will ensure that the three residential	at time of report			Closed
e will ensure that the three residential	· ·	Medium		
e will ensure that the three residential	· ·	Medium		
luded within the contractor scheduled works.	report			Closed
23: FM2a e will develop a process to ensure upcoming rks are checked and delayed works are entified and chased.	30/04/2023	Medium	G	Open
wnership transferred to temporary facilities man	ager.			
23: FM2b  e will ensure all overdue works are picked up d completed work certificates are saved within e shared drive.	30/04/2023	Medium	G	Open
wnership transferred to temporary facilities man	l ager.			
23: FM3a  e will ensure that the PPM is formally reviewed domonitored with progress notes and actions corded against the PPM.	30/04/2023	Low	G	Open
wnership transferred to temporary facilities man	ager.			
23: FM3b e will also consider whether formal scrutiny er the PPM should take place and be	30/04/2023	Low	С	Closed
	will develop a process to ensure upcoming the are checked and delayed works are intified and chased.  Where which transferred to temporary facilities manels: FM2b  will ensure all overdue works are picked up all completed work certificates are saved within shared drive.  Where which transferred to temporary facilities manels: FM3a  will ensure that the PPM is formally reviewed a monitored with progress notes and actions orded against the PPM.  Where which transferred to temporary facilities manels: FM3b  will also consider whether formal scrutiny	will develop a process to ensure upcoming iks are checked and delayed works are intified and chased.  Where the process to ensure upcoming iks are checked and delayed works are intified and chased.  Where the process is a substitution of the process of the proc	will develop a process to ensure upcoming its are checked and delayed works are ntiffed and chased.  When the process to ensure upcoming its are checked and delayed works are ntiffed and chased.  When the process to ensure upcoming its are checked and delayed works are ntiffed and chased.  When the process is a solution in the proces	will develop a process to ensure upcoming its are checked and delayed works are ntified and chased.  whereship transferred to temporary facilities manager.  30/04/2023 Medium G  will ensure all overdue works are picked up a completed work certificates are saved within shared drive.  whereship transferred to temporary facilities manager.  31: FM3a 30/04/2023 Low G  will ensure that the PPM is formally reviewed a monitored with progress notes and actions orded against the PPM.  whereship transferred to temporary facilities manager.  32: FM3b 30/04/2023 Low C  will also consider whether formal scrutiny or the PPM should take place and be sented on a frequent basis to a committee or





	Audit Action	Date due (revised where	Priority	Status	Open / Closed
		applicable)			
_	sideration, PPMs are available on request from the co	ontractors port	al rather tha	an present	ed on a
requent basis.					
Facilities	2023: FM4a	30/04/2023	Low	С	Closed
<b>Management</b>	We will consider whether a continuously				
10/03/2023	We will consider whether a service level agreement should be established with HBI for the				
10/00/2020	provision of asbestos services.				
Brograss: Cansida	ed with Procurement, and due to the low value of the	contract on S	I A is not re	auirod for	thic
progress: Consider provider.	ed with Procurement, and due to the low value of the	Contract, an S	LA IS HOUSE	equired for	uus
	1	T	T -	_	
Facilities	2023: FM4b	30/04/2023	Low	С	Closed
Management	We will ensure that performance meetings are				
10/03/2023	held in accordance with the contractual				
	obligations and recorded in a consistent format.				
Progress: Performa	nce meetings are held and recorded.				
Facilities	2023: FM5	01/06/2023	Medium	G	Open
Management	2023. 1 1913	01/00/2023	Mediaiii	3	Open
_	We will ensure that inspections are undertaken				
10/03/2023	on a six-monthly basis for all sites and completed				
	workplace inspection reports will be signed off				
	and sighting in accordance with the Policy.				
	and sighting in accordance with the Policy. ce inspections are completed every six months (April a	•	-	-	-
site with the Workpl	and sighting in accordance with the Policy.  be inspections are completed every six months (April acce Manager (Facilities Manager for HQ). At the time	•	-	-	_
site with the Workpl	and sighting in accordance with the Policy. ce inspections are completed every six months (April a	•	-	-	_
site with the Workplato be completed with	and sighting in accordance with the Policy.  ce inspections are completed every six months (April acce Manager (Facilities Manager for HQ). At the time hin the required timeframe.  cs in completing this task in a timely manner, early wa	of the audit, a	number of	inspection When ins	s had yet
site with the Workpl to be completed with To support manage are not completed b	and sighting in accordance with the Policy.  The inspections are completed every six months (April as ace Manager (Facilities Manager for HQ). At the time hin the required timeframe.  The inspection window, this will be escalar.	of the audit, a	number of	inspection When ins	s had yet
site with the Workpl to be completed with To support manage are not completed b	and sighting in accordance with the Policy.  ce inspections are completed every six months (April acce Manager (Facilities Manager for HQ). At the time hin the required timeframe.  cs in completing this task in a timely manner, early wa	of the audit, a	number of	inspection When ins	s had yet
site with the Workpl to be completed with To support manage are not completed b be reported to the H	and sighting in accordance with the Policy.  The inspections are completed every six months (April as ace Manager (Facilities Manager for HQ). At the time hin the required timeframe.  The inspection window, this will be escalar.	of the audit, a	number of	inspection When ins	s had yet
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site with the Workplato be completed with To support manager are not completed be reported to the H Facilities Management	and sighting in accordance with the Policy.  De inspections are completed every six months (April a cace Manager (Facilities Manager for HQ). At the time hin the required timeframe.  It is in completing this task in a timely manner, early way the end of the inspection window, this will be escalated the ealth, Safety and Welfare Committee.  2023: FM6  We will ensure that defects are appropriately monitored, tracked and implemented in	of the audit, a rning emails w ited to the RAM	number of ill be send.  //head of s	inspection When ins ervice. Thi	s had yet pections s will also
site with the Workplato be completed with To support managerare not completed be reported to the H Facilities Management	and sighting in accordance with the Policy.  The inspections are completed every six months (April a face Manager (Facilities Manager for HQ). At the time in the required timeframe.  The inspection window, this will be escalated the end of the inspection window, this will be escalated the ealth, Safety and Welfare Committee.  The inspection window is a simple will be escalated the ealth, Safety and Welfare Committee.  The inspection window is a simple will be escalated the ealth, Safety and Welfare Committee.  The inspections are completed every six months (April a size in the properties of the inspection window). At the time in the required time is a size in the properties of the inspection will be escalated the earth of the end of the inspection will be escalated the earth of the earth of the end of the inspection will be escalated the earth of the end of the	of the audit, a rning emails w ited to the RAM	number of ill be send.  //head of s	inspection When ins ervice. Thi	s had yet pections s will also
site with the Workplato be completed with To support manager are not completed be reported to the H Facilities Management 10/03/2023	and sighting in accordance with the Policy.  The inspections are completed every six months (April a cace Manager (Facilities Manager for HQ). At the time in the required timeframe.  The inspection window, this will be escalar ealth, Safety and Welfare Committee.  2023: FM6  We will ensure that defects are appropriately monitored, tracked and implemented in accordance with the prioritisation schedule where possible.	of the audit, a rning emails wated to the RAN 30/04/2023	number of ill be send.  //head of s	inspection When ins ervice. Thi	s had yet pections s will also
site with the Workplato be completed with To support manager are not completed be reported to the H Facilities Management 10/03/2023	and sighting in accordance with the Policy.  The inspections are completed every six months (April a face Manager (Facilities Manager for HQ). At the time in the required timeframe.  The inspection window, this will be escalated the end of the inspection window, this will be escalated the ealth, Safety and Welfare Committee.  The inspection window is a simple will be escalated the ealth, Safety and Welfare Committee.  The inspection window is a simple will be escalated the ealth, Safety and Welfare Committee.  The inspections are completed every six months (April a size in the properties of the inspection window). At the time in the required time is a size in the properties of the inspection will be escalated the earth of the end of the inspection will be escalated the earth of the earth of the end of the inspection will be escalated the earth of the end of the	of the audit, a rning emails wated to the RAN 30/04/2023	number of ill be send.  //head of s	inspection When ins ervice. Thi	s had yet pections s will also
site with the Workplato be completed with To support managerare not completed be reported to the H  Facilities Management 10/03/2023  Progress: In progre	and sighting in accordance with the Policy.  The inspections are completed every six months (April a cace Manager (Facilities Manager for HQ). At the time in the required timeframe.  The inspection window, this will be escalar ealth, Safety and Welfare Committee.  2023: FM6  We will ensure that defects are appropriately monitored, tracked and implemented in accordance with the prioritisation schedule where possible.	of the audit, a rning emails wated to the RAN 30/04/2023	number of ill be send.  //head of s	inspection When ins ervice. Thi	s had yet pections s will also
site with the Workplato be completed with To support managerare not completed be reported to the H Facilities Management 10/03/2023	and sighting in accordance with the Policy.  December inspections are completed every six months (April and English and Sections are completed every six months (April and English and Eng	of the audit, a rning emails wated to the RAN 30/04/2023 ager.	number of ill be send.  //head of selling  Medium	When inservice. Thi	s had yet pections s will also
site with the Workplato be completed with To support managerare not completed be reported to the H  Facilities Management  10/03/2023  Progress: In progre  Facilities Management	and sighting in accordance with the Policy.  The inspections are completed every six months (April and Ence Manager (Facilities Manager for HQ). At the time in the required timeframe.  The inspection window, the will be escalar ealth, Safety and Welfare Committee.  2023: FM6  We will ensure that defects are appropriately monitored, tracked and implemented in accordance with the prioritisation schedule where possible.  Solutions.  2023: FM7  We will ensure that a sustainability plan is	of the audit, a rning emails wated to the RAN 30/04/2023 ager.	number of ill be send.  //head of selling  Medium	When inservice. Thi	s had yet pections s will also
site with the Workplato be completed with To support managerare not completed be reported to the H  Facilities Management  10/03/2023  Progress: In progre  Facilities	and sighting in accordance with the Policy.  December inspections are completed every six months (April and English and Sections are completed every six months (April and English and Eng	of the audit, a rning emails wated to the RAN 30/04/2023 ager.	number of ill be send.  //head of selling  Medium	When inservice. Thi	s had yet pections s will also





# Quarterly Performance Report

Audit title and date	Audit Action	Date due (revised where applicable)	Priority	Status	Open / Closed
•	ility has been added as an Annual Objective to the 2 stainability action plan.	2023-24 Annua	l Plan and i	ncludes de	eveloping





#### **HMICFRS ACTION PLAN**

The HMICFRS report for RBFRS was published in 2019 rating us good in each of the three areas of effectiveness, efficiency and people. Improvements were identified within the report and the actions to address these are being tracked through this report. Our latest HMICFRS report was published in January 2023 and we have added the actions from this report to the update below.

#### **Key - Project or Action Plan Status**

С	Project complete
G	Project on Track
А	There are issues with the project but these are being managed
R	Issues are having an impact on delivery
NS	Project not yet due to start

Section One: Effectiveness										
Improvement	Delivered via	Status								
		End 21/22		Q1	Q2	Q3	Q4			
Prevention evaluation to better understand benefits	Service Plans (Service Delivery & Collaboration and Policy)	А		Α	G	G	А			
Prevention quality assurance	Collaboration and Policy Service Plan	А		G	С	С	С			
Protection quality assurance	Collaboration and Policy Service Plan	А		G	С	С	С			
Addressing the burden of false alarms	Collaboration and Policy Service Plan	G		G	С	С	G			
Keeping the public informed during ongoing incidents	Corporate Services Service Plan	G		G	G	С	С			
Effective system to use for learning and debriefs	Collaboration and Policy Service Plan	А		G	С	С	С			
Post Incident prevention activity	Collaboration and Policy Service Plan						G			
Up to date site specific risk information							G			
MDTs							G			
Response Model							NS			
Section two: Efficiency										
Improvement	Delivered via			Sta	atus					





		End 21/22	Q1	Q2	Q3	Q4
Best use of available technology	ICT Strategy	G	G	G	G	С
Productive Workforce						NS
Section three: People						
Improvement	Delivered via		Sta	atus		
		End 21/22	Q1	Q2	Q3	Q4
Values and behaviours understood and demonstrated	HR & L&D Service Plan	G	G	G	G	С
Effective use of competence recording system	HR & L&D Service plan	G	G	А	С	С
Effective grievance procedures in place	HR & L&D Service plan	С				
Staff are confident in using feedback mechanisms	Corporate Services Service plan	G	G	G	С	С
Process to identify, develop and support high-potential staff and aspiring leaders	HR & L&D Service plan	А	А	А	А	А
Absence/Attendance procedures						G
Workforce Planning						
Tools and opportunities to increase diversity						G
Understanding and application of PDRs						G





# Fire Standard Implementation Tracking

Updated 2<sup>nd</sup> May 2023

## **Key - Project or Action Plan Status**

С	Project complete
G	Project on Track
А	There are issues with the project but these are being managed
R	Issues are having an impact on delivery
NS	Project not yet due to start

		Fire Standard	Owner	Manager	FS consultation	FS publication date	Gap analysis	SLT Review	Action Plan progress	Commentary
ω	1	Emergency Response Driving	Becci Jefferies	Becci Jefferies	С	Feb-21	С	С	A=	Action Plan in progress.
progress	2	Operational Response - Preparedness	Doug Buchanan	Doug Buchanan	С	Feb-21	С	С	A=	Action Plan in progress.
⊇.	3	Operational Response - Competence	Becci Jefferies	Becci Jefferies	С	Feb-21	С	С	G =	Action Plan in progress.
Standards	4	Operational Response - Learning	Jim Powell		С	Feb-21	С	С	С	Action Plan completed.
	5	Code of Ethics	Nikki Richards	Lucy Greenway	С	May-21	С	С	G =	Action Plan in progress.

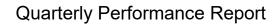






6	Community Risk Management Planning	Nikki Richards	Tim Readings	С	May-21	С	С	G =	New implementation tool created and completed for 2023-2027 CRMP. Uploaded to S Drive, now needs to be reviewed.
7	Protection	Jess James	Matt Hoult	С	Sep-21	G =	NS	NS	Gap analysis is near completion to reported via PPSG for sign off by SLT.
8	Prevention	Jess James	Matt Hoult	С	Jul-21	G =	NS	NS	Gap analysis is near completion to reported via PPSG for sign off by SLT.
9	Safeguarding	Jim Powell	Liz Warren	С	Jan-22	С	С	G =	Action Plan in progress.
10	Fire Investigation	Jess James	Tim Benham	С	Apr-22	G =	NS	NS	Gap Analysis first draft completed and progressing to review and submission to PPSG.
11	Emergency Preparedness and Resilience	Jim Powell	Alison Hazelton	С	May-22	A <b>↓</b>	NS	NS	Awaiting gap analysis to be completed - local capacity have added approx. 6 week delay to original planning assumption. Aiming to take to SLT on 14 June.
12	Data management	Nikki Richards	Becca Chapman	С	Aug-22	G =	NS	NS	Awaiting NFCC guidance before completing the gap analysis.
13	Leading and Developing People	Wayne Bowcock	Becci Jefferies	С	Dec-22	G =	NS	NS	Fire standard published 31st March 2023 and gap analysis underway
14	Leading the Service	Wayne Bowcock	Becci Jefferies	С	Dec-22	G =	NS	NS	Fire standard published 31st March 2023 and gap analysis underway
15	Fire Control	Jim Powell	Simon Harris	G	Mar-23	NS	NS	NS	Fire standard published 30th March 2023 and gap analysis planned
16	Communication & Engagement Consultation	Paul Bremble	Jo Watson	G	Mar-23	NS	NS	NS	Fire standard published 31st March 2023 and gap analysis planned







				,			
Not published	17	Commercial and Procurement	Conor Byrne		Sep-23		Proposed publication date September 2023
	18	Finance and Assurance	Conor Byrne		Sep-23		Proposed publication date September 2023
	19	Asset Management			Sep-23		Proposed publication date September 2023





# Appendix A – Additional Data

# **Equality, Diversity and Inclusion Data**

							]	
ļ	Measure	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2022/23 YTD	Q4 21/22	Authorised establishment at the end of Q4 2022/23 (Number of authorised posts)
_	Wholetime	360	368	361	373	373	375	361
Z L	On-call	68	70	66	65	66	62	65
TAFF I POST	Control	41	39	38	38	38	42	40
STAFF POST	Green Book	171	175	172	168	168	171	170
	Total Number	640	652	637	644	644	650	636
		Q1	Q2	Q3	Q4	2022/23 YTD	Q4 21/22	
	Wholetime	13	6	6	13	38	34	
~	On-call	0	3	4	3	10	16	
₩ <u>&gt;</u>	Control	2	3	3	2	10	7	
STAFF TURNOVER	Green Book	6	17	7	8	38	39	
S R	Total Number of	21	29	20	26	96	96	
ĭ	Staff in Post	640	652	637	644	643	650	
	Percentage of	3.28%	4.45%	3.14%	4.03%	14.93%	14.76%	
		Q1	Q2	Q3	Q4	2022/23 YTD	Target	YTD Q4 21/22
	Wholetime	5.0%	5.2%	5.2%	5.6%	5.2%		5.3%
FEMALE STAFF	On-call	16.2%	14.3%	13.6%	13.8%	13.6%	40/	16.1%
FEMALI	Control	73.2%	74.4%	71.0%	71.1%	71.0%	4%	73.8%
出 'S	Green Book	56.7%	55.4%	55.81%	55.4%	55.81%		56.7%
	Total	24.4%	23.8%	23.7%	23.29%	23.29%		24.3%
		Q1	Q2	Q3	Q4	2022/23 YTD	Target	YTD Q4 21/22
Щ	Wholetime	4.4%	4.3%	4.4%	3.8%	4.4%		4.3%
둗닖	On-call	4.4%	4.3%	3.0%	3.1%	3.0%		3.2%
ON WHIT	Control	7.3%	7.7%	7.9%	7.9%	7.9%	5%	4.8%
NON WHITE STAFF	Green Book	14.0%	14.2%	14.0%	14.3%	14.0%		12.9%
Ž	Total	7.19%	7.06%	7.06%	6.68%	6.68%		6.5%





## **Staff Ethnicity Profile**

Ethnicity	Wholetime	On-call	Control	Green Book	All Staff
White British	359	63	35	144	601
Other Ethnicity	14	2	3	24	43
Unknown	0	0	0	0	0
Total	373	65	38	168	644

Ethnicity	Number of Staff
Asian or British Asian: Indian	4
Asian or British Asian: Other	3
Black or Black British African	4
Black or Black British Caribbean	4
Chinese	1
Mixed White and Asian	1
Mixed White and Black Caribbean	3
Other	1
Other Mixed	3
White British	601
White Irish	3
White Other	15
Asian or British Asian: Pakistani	1
Grand Total	644

# Staff Age Profile

Age Group	Wholetime	On-call	Control	Green Book	Total
25 and Under	22	8	8	13	51
26 - 35	101	23	11	29	164
36 - 45	131	20	7	37	195
46 - 55	108	10	9	50	177
56 - 65	11	4	3	32	50
66 and Over	0	0	0	7	7
Total	373	65	38	168	644





## **Staff Gender Profile**

Gender	Wholetime	On-call	Control	Green Book	All Staff
Female	21	9	27	93	150
Male	351	56	11	75	493
Other	1	0	0	0	1
Total	373	65	38	168	644





## Appendix B - 2022-23 Annual Objectives

- 1) We will provide education and advice on how to prevent and mitigate the impacts of fires and other emergencies.
- 2) We will ensure a swift and effective response when called to emergencies.
- 3) We will provide advice, consultation and enforcement in relation to fire safety standards in buildings.
- 4) We will seek opportunities to contribute to a broader safety, health and wellbeing agenda, whilst delivering our core functions.
- 5) We will ensure that Royal Berkshire Fire and Rescue Service provides good value for money, and is financially and environmentally sustainable, whilst ensuring Equality of Access for the public.
- 6) We will continue to work with Central Government and key stakeholders in the interests of the people of Royal Berkshire.
- 7) We will recruit, train and develop our people to ensure we create a safe, professional, capable and diverse workforce that are supported to become the best public servants they can be for the residents of Berkshire.
- 8) We will manage RBFRS in accordance with best practice and national professional standards, understanding and continuous improvement, learning from events and being transparent in our compliance.
- 9) We will be strong and visible in our leadership in developing a diverse and inclusive 'one team' culture, reflecting our Equality, Diversity and Inclusion Objectives, where everyone's contribution is valued and positive behaviours are recognised.
- 10)We will explore collaboration opportunities to ensure we deliver effective and efficient services to the people we serve.





# Appendix C – 2022-23 Performance Measures and Definitions

## **Service Provision**

ID	Measure	Definition
1	Number of fire deaths	The number of deaths that occur as the result of a fire, even when the death occurs weeks or months later.
2	Number of non-fatal fire casualties	The number of non-fatal casualties that occur as a result of a fire. This includes any injuries or medical attention which are attributed to the fire.
		The total number of primary fires that have been started deliberately.  Primary fires are potentially more serious
3	Number of deliberate primary fires	fires that harm people or cause damage to property and meet at least one of the following conditions:
		any fire that occurred in a (non- derelict) building, vehicle or (some) outdoor structures
		<ul> <li>any fire involving fatalities, casualties or rescues</li> </ul>
		any fire attended by five or more pumping appliances
		The total number of secondary fires that have been started deliberately.
4	Number of deliberate secondary fires	Secondary fires are generally small outdoor fires, not involving people or property. These include refuse fires, grassland fires and fires in derelict buildings or vehicles, unless these fires involved casualties or rescues, or five or more pumping





		appliances attended, in which case they become primary fires.
Pre	evention	
5	Increase the number of Referrals for Safe and Well visits received from our partners	RBFRS receive referrals from other agencies for individuals at risk from fire in their homes. These referrals are a high quality source of information about those at risk in our communities.
6	Percentage of Safe and Well referrals, where there has been a threat or incidence of arson, completed within 48 hours.	When RBFRS are made aware of the threat or an incidence of arson against an individual(s) a Safe and Well Visit should be conducted, wherever possible, within 48 hours.
7	Percentage of Very High and High Risk Safe and Well Referrals completed within target time	Safe and Well Referrals are risk assessed, with each category of risk having a target time for completion. Very High risk referrals have a target time of 72 hours and High risk referrals have a target time of 14 days.
8	Percentage of Medium Risk Safe and Well Referrals completed within target time	Safe and Well Referrals are risk assessed, with each category of risk having a target time for completion. Medium risk referrals have a target time of 21 days.
Pro	otection	
9	Proportion of Fire Safety Audits conducted against premises identified as High or Very High Risk in our Risk Based Inspection Programme	A Fire Safety Audit is carried out to enforce the Regulatory Reform Order (RRO) 2005. Our Risk Based Inspection Programme targets the riskiest premises in the county for inspection. Fire Safety Audits can also result from complaints, or can be carried out after an incident or for training purposes. This measure allows us to monitor how our resources are being targeted at risk.
10	Percentage of Fire Safety Audits with a 'Broadly Compliant' result.	The percentage of completed Fire Safety Audits carried out in commercial premises, where the result was 'Broadly Compliant'





		(satisfactory) and no further action or follow- up was required.	
11	Percentage success when cases go to court.	RBFRS prosecute serious cases following Fire Safety Audits. A successful outcome at court is a finding or admission of guilt.	
12	Percentage of statutory fire consultations completed within the required timeframes.	Statutory fire consultations have a legally defined timeframe in which they must be completed. Types of consultation include:  • Licensing  • Building regulations	
13	The number of Automatic Fire Alarm calls received.	Automatic Fire Alarm calls are calls from Alarm systems and have a higher likelihood of being a false alarm. Reducing the number of these types of calls makes us more efficient.	
14	Percentage of Automatic Fire Alarm calls where RBFRS did not attend	This is the number of Automatic Fire Alarm calls received where we did not attend. In some circumstances we are able to seek confirmation before attending, enabling us to be more efficient.	
Res	Response		
15	Percentage of occasions where the first fire engine arrives at an emergency incident within 10 minutes from time the emergency call was answered	This is our Response Standard, and 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. We aim to attend 75% of these incidents in under 10 minutes.	
16	Percentage of wholetime frontline pumping appliance availability	This measure shows the percentage of time that our wholetime pumping appliances are available for mobilisation. Reasons for unavailability include mechanical defects and crewing.	





17	Percentage of hours where there is adequate crewing on on-call frontline pumping appliances (based on 24/7 crewing)	This is the percentage of hours where there are sufficient minimum qualified firefighters on on-call pumping appliances (fire engines) to enable the appliance to be available. On-call fighters are ready to leave their place of work or home and attend emergencies from the local on-call station, when they receive the call.			
Res	silience				
18	Percentage of visits to Very High, High and Medium Operational Risk sites completed in timescale	Operational Risk sites are those locations with particular characteristics (e.g. use, location) that pose a specific or unusual risk to our firefighters and the surrounding communities. Regular familiarisation visits by crews and support staff are required to ensure understanding of the risk is up to date.			
19	Number of Service Delivery Hub exercises completed	Service Delivery Hub-level operational exercises are an important part of ensuring RBFRS is prepared for incidents that might occur through testing our planning assumptions, guidance and site specific response plans.			
Cus	Customer Experience				
20	Percentage of domestic respondents satisfied with the overall service	A customer feedback questionnaire is sent to those who have experienced a dwelling fire asking about their satisfaction and experience with the service they received from RBFRS.			
21	Percentage of commercial respondents satisfied with the overall service	A customer feedback questionnaire 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.			
22	Percentage of respondents satisfied with the services with regards to Fire Safety Audits	A customer feedback questionnaire 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.
23	% of domestic respondents satisfied with the service regards their Safe and Well Visit	A customer feedback questionnaire is sent to a sample of individuals who have received a Safe and Well Visit and asks about their satisfaction and experience with the service they received from RBFRS.
24	Number of complaints received	The number of complaints made to RBFRS about any aspect of our service or staff.
25	Number of compliments received	The number of compliments received by RBFRS about any aspect of our service or staff.





# **Corporate Health**

ID	Measure	Definition		
Hur	Human Resources and Learning & Development			
26	Percentage 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.		
27	Percentage of eligible staff with Personal Development Reviews	This measure reflects the percentage of eligible employees who have had a Personal Development Review meeting. Eligible staff are those who have completed their initial probation period, before the end of the PDR 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 PDR.		
28	Number of formal grievances	The number of formal grievances raised by staff under the Grievance, Bullying and Harrassment Policy.		
Hea	alth and Safety			
29	Number of RIDDOR accidents and diseases	RIDDOR (Reporting of Injuries Diseases and Dangerous Occurrences Regulations) are more serious injury accidents and diseases.		
Fina	ance and Procurement			
30	Percentage of spend subject to competition	This measure looks 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.		
31	Compliant spend as a percentage of overall spend	This measure calculates the supplier spend that is in a compliant contract as a percentage of the total spend to external bodies and suppliers (as per RBFA contract regulations).		
Free	Freedom of Information			





32

Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act, Environmental Regulations or Data Protection Legislation) RBFRS are required to conform to Data Protection and Freedom of Information legislation. The Information Commissioner is responsible for determining compliance and issuing advice or penalties. This measure includes only incidents where there is a finding of a breach (not complaints which are subsequently dismissed).



# Appendix D – Glossary

Abbreviation	Meaning	Context
ACFO	Assistant Chief Fire Officer	
AFA	Automatic False Alarms	
AIO	Accident Investigation Officers	
ALP	Aerial Ladder Platform	
AM	Area Manager	
APB	Additional Pensionable Benefit	
AR3	Animal Rescue Level 3	Officer or team specialising in animal rescue
ARA	Additional Responsibility Allowance	
ARP	Adults at Risk Programme	
ARU	Animal Rescue Unit	
ASB	Anti-Social Behaviour	
AWE	Atomic Weapons Establishment	
ВА	Breathing Apparatus	
BAU	Business As Usual	
BCF	Behavioural Competency Framework	
BFBC	Bracknell Forest Borough Council	
ВМЕ	Black and Minority Ethnic	
BMKFRS	Buckinghamshire & Milton Keynes Fire & Rescue Service	
BPI	Business Process Improvement	
CAFS	Compressed Air Foam System	Most appliances have this for extinguishing small fires quickly
CEMT	Corporate Emergency Management Team	
CFO	Chief Fire Officer	
CM	Crew Manager	
СОМАН	Control of Major Accident Hazards	Top tier and low tier sites throughout Berkshire. High risk sites.
CRP	Community Risk Programme	
CS	Community Safety	
CSA	Community Safety Adviser	
DAPs	Development Assessment Pathways	
DCFO	Deputy Chief Fire Officer	





DIM	Detection Identification Monitoring	Mobilised from Oxfordshire Fire and Rescue Service
DPA	Data Protection Act	
DRA	Dynamic Risk Assessment	One of the methods for identifying risk in the workplace and recording it for legal reasons
DSS	Director of Support Services	
DVR	Digital Voice Recorder	
EDI	Equality, Diversity and Inclusivity	
EIR	Environmental Information Regulations	
EPM	Emergency Planning Manager	One for each of the six Unitary Authorities
EPO	Emergency Planning Officer	Some of the EPM's have a EPO, such as Reading Borough Council
ESMCP	Emergency Services Mobile Communications Programme	
ESN	Emergency Services Network	
FARRG	Fire and Rescue Risk Group	
FBU	Fire Brigades Union	
FCP	Forward Control Point	A nominated point area where resources can be deployed from to meet the needs of an incident
FDO	Flexi Duty Officer	
FF	Firefighter	
FI	Fire Investigation	
FIO	Fire Investigation Officer	A nominated Officer with the skills to assess what caused a fire and why
FOIA	Freedom of Information Act	
FPS	Firefighters' Pension Scheme	
FRIC	Fire and Rescue Indemnity Company	
FRSA	Fire and Rescue Service Association	
FS	Fire Safety	Green/Grey book personnel carrying out inspections within buildings and events
FSG	Fire Survival Guidance	
FSIOs	Fire Safety Inspecting Officers	
GDPR	General Data Protection Regulation	
GM	Group Manager	
HERU	Hazardous Environmental Response Unit	
HFRS	Hampshire Fire and Rescue Service	
HGV	Heavy Goods Vehicle	





НМЕРА	Hazardous Materials Environmental Protection Advisor	Was known as a Hazmat Officer. Specialist Officer with the skills to deal with chemical incidents.
HMICFRS	Her Majesty's Inspectorate of Constabulary & Fire and Rescue Services	
HMO	House of Multiple Occupancy	
HoS	Head of Service	
HRRBs	High Risk Residential Buildings	
HRU	Heavy Rescue Unit	Attends road traffic collisions of 3 or more cars HGVs
HR and L&D	Human Resources and Learning and Development	
HSE	Health and Safety Executive	
IBIS	Incident & Building Information System	The ICT system where all incident and building information is held.
ICO	Information Commissioner's Office	
ICT	Information Communication Technology	
ICU	Incident Control Unit	Large bus mobilised on 7 pump or more incidents
IEC	Immediate Emergency Care	
IRMP	Integrated Risk Management Plan	
IRS	Incident Recording System	
ITHC	Information Technology Health Checks	
JESIP	Joint Emergency Services Interoperability Principles	
JO	Junior Officer	
JY	Juliet Yankee	RBFRS call sign in Control for all appliances
L&D	Learning and Development	
L1	Level 1 Officer	Incident Command Level - Crew and Watch Manager
L2	Level 2 Officer	Incident Command Level - Station Manager/Group Manager A
L3	Level 3 Officer	Incident Command Level - Group Manager A & B
L4	Level 4 Officer	Incident Command Level - Area Manager and Principal Officer
LGPS	Local Government Pension Scheme	
LGV	Light Goods Vehicle	
LMS	Learning Management System	
LPP	Light Portable Pump	





LRF	Local Resilience Forum	Multi agancy partners collaborate to fulfil
LKF	Local Resilience Forum	Multi-agency partners collaborate to fulfil their duties under the Civil Contingencies Act 2004
LSP	Local Safety Plan	
MAC	Media Advisory Cell	
MAPS	Multi-Agency Problem Solving	
MDT	Mobile Data Terminal	
MHCLG	Ministry of Housing Communities and Local Government	
MORRG	Management of Road Risk Group	
MRV	Multi Roll Vehicle	
MSK	Musculoskeletal-(sickness)	
NAG	Neighbourhood Action Group	
NFCC	National Fire Chiefs Council	
NILO	National Interagency Liaison Officer	
NOG	National Operational Guidance	
NVQ	National Vocational Qualification	
OFRS	Oxfordshire Fire and Rescue Service	
OiC	Officer in Charge	
OJEU	Official Journal of the European Union	
ONR	Office for Nuclear Regulations	
OPAS	Operational Policy and Support	
OQP	Operational Qualifications Planner	
OSEP	Operational Support and Emergency Planning	
OSR	Operational Support Room	
OSU	Operational Support Unit	
ОТВ	Over the Border	
ОТР	Officer Training Programme	
P2P	Purchase to Pay	
PDA	Pre-determined Attendance	
PDI	Personal Development Interview	
PDR	Personal Development Review	
PFI	Post Fire Inspection	
PID	Project Initiation Document	The formal document used to define project objectives, deliverables, costs and timescales for approval





PPE	Personal Protective Equipment	
PPV	Positive Pressure Ventilation	
PQA	Personal Qualities and	
PQA	Attributes	
PRF	Personal Record File	
PSAA	Public Sector Audit	
	Appointments	
PSO	Programme Support Office	
QCF	Qualifications Credit	
11/2-2-0	Framework	
WBDC	West Berkshire District Council	
RA	Risk Assessment	
RBFA	Royal Berkshire Fire Authority	
RBIP	Risk Based Inspection Programme	
RBWM	Royal Borough of Windsor and	
	Maidenhead	
RDS	Retained Duty System	
RIDDOR	Reporting of Injuries Diseases	
	and Dangerous Occurrences	
DMO	Regulations	
RMS	Remotely Managed Stations	
RRT	Risk Reduction Team	
RTC	Road Traffic Collision	
RTW	Return To Work	
S&W	Safe and Well visit	
SAG	Safety Advisory Group	
SAIF	Strategic Asset Investment Framework	
SCAS	South Central Ambulance	
	Service	
SCC	Strategic Command Centre	
SCG	Strategic Coordinating Group	
SDMT	Service Delivery Management	
	Team	
SECTU	South East Counter Terrorism	
	Unit	
SJCC	Staff Joint Consultative Committee	
SLT	Senior Leadership Team	
SM	Station Manager	
SPB	Strategic Performance Board	
Stn 1	Station 1 – Caversham Road	Wholetime
Stn 10	Station 10 – Wokingham	Wholetime





Stn 11	Station 11 – Mortimer	Retained (On Call)
Stn 14	Station 14 – Ascot	Satellite Station (operates from 0900-1800
0.4	0.00	hours daily)
Stn 15	Station 15 – Crowthorne	Retained (On Call)
Stn 16	Station 16 – Bracknell	Wholetime
Stn 17	Station 17 – Slough	Wholetime
Stn 18	Station 18 – Langley	Wholetime
Stn 19	Station 19 – Maidenhead	Wholetime
Stn 2	Station 2 – Wokingham Road	Wholetime
Stn 20	Station 20 – Whitley Wood	Wholetime
Stn 21	Station 21 – Windsor	Satellite Station (operates from 0900-1800 hours daily)
Stn 3	Station 3 – Dee Road	Wholetime
Stn 4	Station 4 - Newbury	Wholetime
Stn 5	Station 5 - Hungerford	On Call (Retained)
Stn 6	Station 6 - Lambourn	On Call (Retained)
Stn 7	Station 7 – Pangbourne	On Call (Retained)
Stn 9	Station 9 – Wargrave (closed September 2020)	On Call (Retained)
ToA	Threat of Arson	
TCG	Tactical Coordinating Group	
TCR	Training Course Request	
TIC	Thermal Image Camera	
TVFCS	Thames Valley Fire Control Service	
TVP	Thames Valley Police	
UA	Unitary Authority	
USAR	Urban Search and Rescue	
WAH	Working at Height	
WDS	Wholetime Duty System	
WM	Watch Manager	
WRT	Water Rescue Team	
WT	Wholetime	
WYPF	West Yorkshire Pension Fund (from context)	



# ROYAL BERKSHIRE FIRE AND RESCUE SERVICE

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