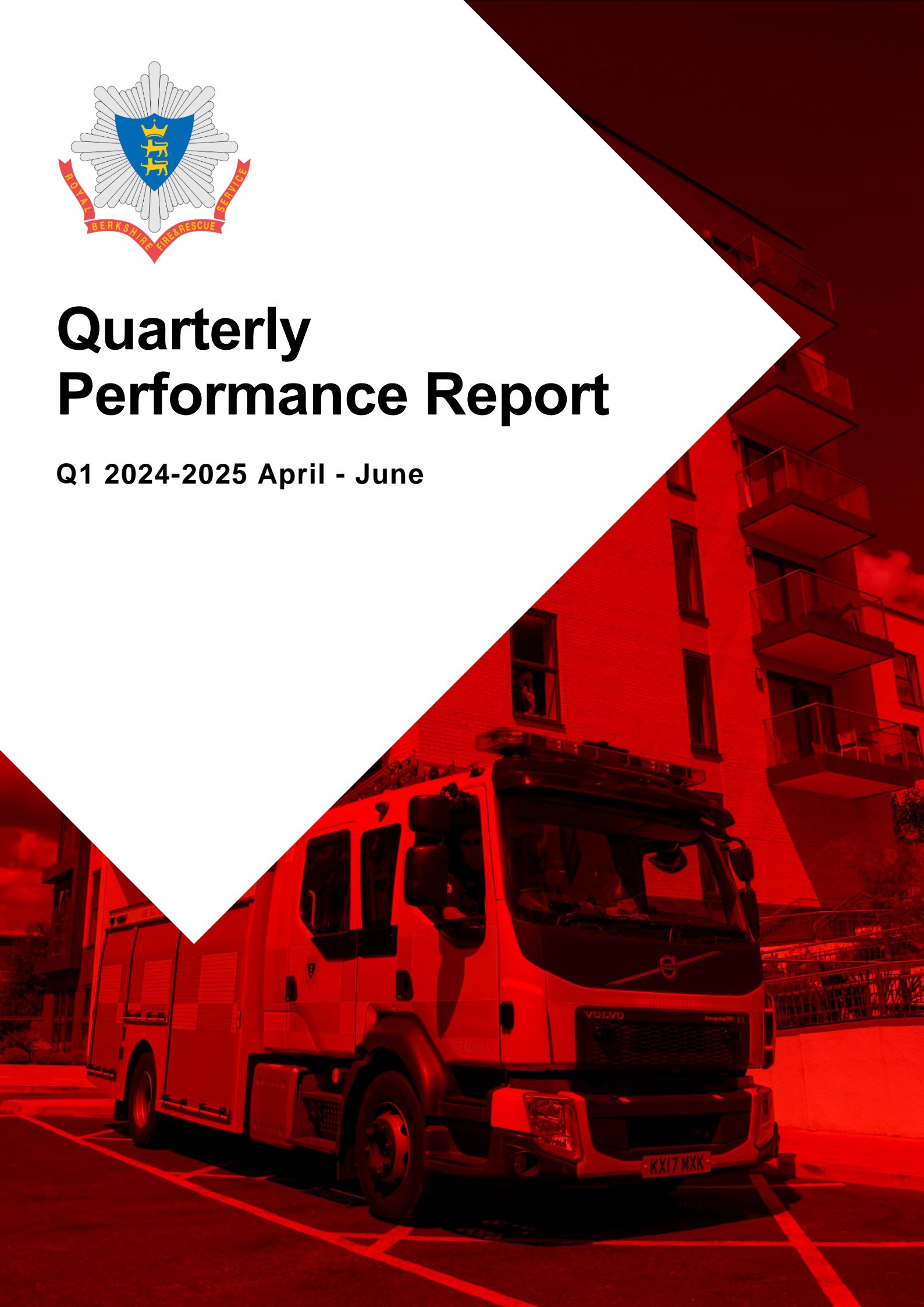




Quarterly Performance Report

Q1 2024-2025 April - June





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Contact Us

Accessibility

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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 one Performance Report, summarising our progress across the Service.

In order to achieve the Strategic Commitments we have made to the people of Royal Berkshire, our Annual Plan for 2024-25 highlights 9 areas of focus, which can be found at Appendix B. The areas of focus are delivered through our Service Plans and Hub 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), RBFRS Development Programme and Strategic Asset Investment Framework).

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%	Comparison with target
	Target met or exceeded by up to 10%	
	Target missed by up to 10%	
	Target missed by more than 10%	
	NA or data accuracy issues affect confidence in reporting	
↑	Improvement in performance from equivalent period the previous year	Comparison with actual the previous year
↔	Maintenance of performance from equivalent period the previous year	
↓	Decline in performance from equivalent period the previous year	

Priority Programme Project Status

C	Project complete
G	Project on Track
A	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
↑	Risk increasing
↔	No risk movement
↓	Risk decreasing



Quarter One Summary



1,931

Total number of emergency incidents in Berkshire



74.7%

% of occasions we responded to emergency incidents within 10 minutes



12.5%

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



73.7%

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



1

Number of complaints received



5.4%

% of working time lost to staff sickness across all groups



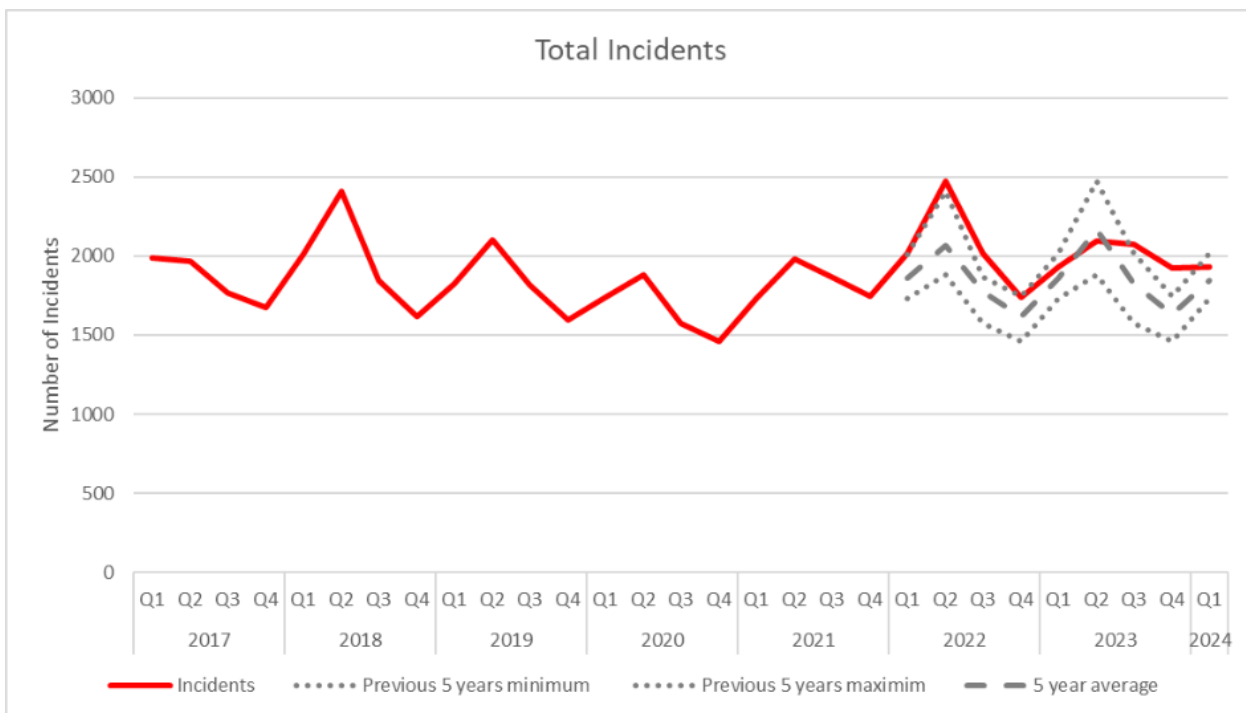
100%

Compliant spend as a % of overall spend



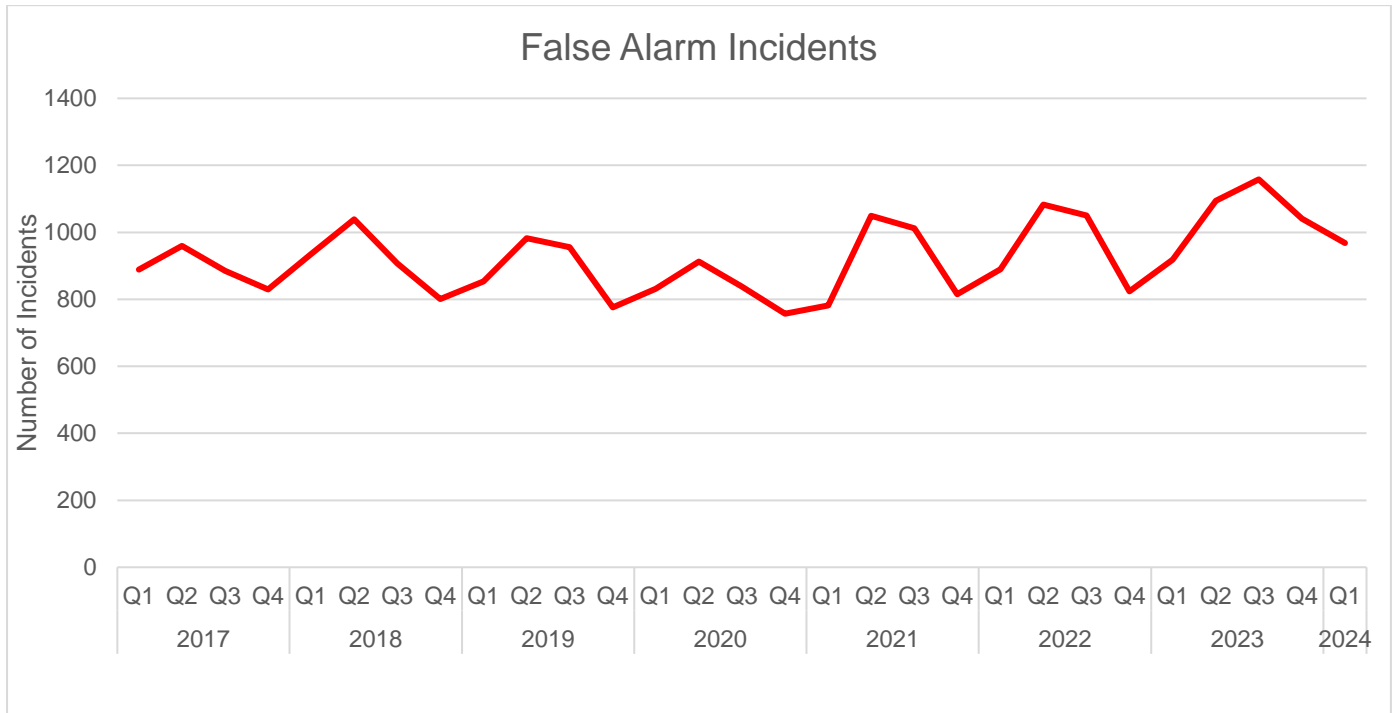
Incident Trends

We responded to 1931 emergency incidents in Berkshire in Quarter 1 2024-25. Chart 1 below shows the trend in incidents over time, and for the most recent quarters includes the five year maximum, minimum and average incident levels for comparison. The chart illustrates the fall in overall incident numbers during the Covid-19 pandemic, and shows the hot, dry summers of 2018 and 2022. After a higher than usual number of incidents in Quarter 4 of last year, which was partly due to weather-related flooding, the number of incidents in Quarter 1 was more in line with historic levels, although still higher than average.





Levels of different incident types were broadly in line with historic trends this quarter, and we continue to see high numbers of Special service incidents and False Alarms.





Quadrant One – Service Provision

Fire Risk Prevention within Mental Health Establishments

The Safeguarding team has collaborated with staff at Prospect Park Hospital to deliver innovative sessions aimed at managing patients where a fire risk is present. This included addressing firesetting behaviours, as well as general fire risks within the home, such as smoking and hoarding.

The purpose of these sessions was to provide a space for professionals to reflect on the evidence and data from fire incidents to consider patient, family and staff perspectives. This information informed a personal and team preventative approach to fire setting on inpatient wards as well as fire risks within the community.

Immersive theatre was used to create a story narrative around a hypothetical event that resulted in a fire on an inpatient ward. The event drew upon themes identified in data collected over the past five years across Berkshire Health Foundation Trust and the evidence base from the national picture.

The event finished with a presentation drawing upon themes identified by professionals discussing key messages based on data collected locally and evidence base from a national perspective. RBFRS' Service Provisions were highlighted, such as the At Risk Programme (ARP) Training, Safe and Well Visits, Threat of Arson Visits, Response, Prevention and Protection.

Practitioners and Senior Management have spoken highly of the bespoke training provided. Senior Managers have commented that the event has 'exceeded expectations' of ongoing partnership work between RBFRS and Prospect Park Hospital and is a positive step for the future.

Due to its success so far, it has been agreed by Prospect Park Hospital and RBFRS that this will be a continuous training provision for clinicians moving forward.



QUADRANT ONE – SERVICE PROVISION					
Overall Measures					
1. Number of Fire Deaths					2024/25 Target: 0
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	2	1	0	1	2
Target (max)	0	0	0	0	0
2024/25 Actual	1 ↑				1 ↑
<p>Q1 saw a tragic incident in Slough resulting in the death of a member of the homeless community. Crews from Slough have undertaken community activity within the area to reassure the community. We continue to network with partner agencies, to promote and deliver ARPs with the aim of targeting those most in need of our services. All Hubs are collaborating with their communities to understand the hard-to-reach/seldom-heard groups and to increase engagement with our partners through Community Safety Partnerships (CSP) and other joint working groups.</p>					
2. Number of non-fatal fire casualties					2024/25 Target: 31 max
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	7	16	8	7	7
Target (max)	7	8	8	8	7
2024/25 Actual	17 ↓				17 ↓
<p>Q1 figures are higher than usual and include a total of 10 casualties in Slough. 9 of these resulted from 3 incidents in Slough. Post-fire safety activity is undertaken following all incidents, which has led to Safe and Well Technicians including garden safety while completing S&Ws during the summer period. E-bike scooter safety leaflets distributed to East hub Stations, with crews to increase awareness of the risks during safe and well visits and at all community events being attended. Crews utilising “After the fire leaflets”.</p>					
3. Number of deliberate Primary Fires					2024/25 Target: 135 max
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	20	26	25	29	20
Target (max)	31	31	31	32	31
2024/25 Actual	20 ↔				20 ↔
<p>A substantial proportion of our deliberate primary fires relate to car and motorbike fires linked to local and organised crime. Prevention teams continue to link in with Thames Valley Police at partnership meetings.</p>					
4. Number of deliberate Secondary Fires					2024/25 Target: 233 max
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	68	65	39	15	68
Target (max)	77	81	34	41	77
2024/25 Actual	50 ↑				50 ↑
<p>Prevention and Response teams continue to work closely with local communities, Thames Valley Police, Community Safety Partnerships and Problem Solving Task groups to reduce occurrences of anti-social behaviour and fire setting within the community.</p>					



Prevention Measures					
5. Increase the number of Referrals for Safe and Well visits received from our partners					2024/25 Target: 10%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24) % change	18.4%	13.5%	8.6%	-1.4%	18.4%
Target percentage change	10%	10%	10%	10%	10%
2024/25 Actual Number	1185				1185
2024/25 Percentage Change	12.5% ↓				12.5% ↓
<p>A positive performance, with Q1 achieving over our targeted increase figure of 10%, as well as improving on Q4 of last year. Prevention continues to actively promote At Risk Programmes (ARPs) and have had good take-up of these the last few months.</p> <p>Staff shortages within the East Hub continue to impact Slough, with referrals failing to achieve the 10% increase. This has now been addressed and additional staff have been recruited.</p>					
6. Percentage of Safe and Well referrals, where there has been a threat or incidence of arson, completed within 48 hours					2024/25 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (24/25)	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%
2023/24 Actual	100% ↔				100% ↔
<p>The service continues to perform well in this area. Ongoing engagement and joint working across prevention and response teams has enabled high performance against this measure.</p>					
7. Percentage of Very High Risk Safe and Well Referrals completed within 72 hours					2024/25 Target: 40%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	37.5%	49.0%	32.7%	30.2%	37.5%
Target	40%	40%	40%	40%	40%
2024/25 Actual	30.0% ↓				30.0% ↓
<p>We have not met our target in this area, with a mixed performance across the authorities. Of the occasions where the Service did not meet the 72-hour target, the majority have been due to logistical difficulties outside of our control. Booking complex visits presents a challenge because we are often reliant on other agencies and family members to facilitate.</p>					
8. Percentage of High Risk Safe and Well Referrals completed within target time					2024/25 Target: 57%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	43.1%	52.5%	52.2%	52.6%	43.1%
Target	57%	57%	57%	57%	57%
2024/25 Actual	44.2% ↑				44.2% ↑
<p>Capacity issues continue to impact all three Hubs, with reductions in technician numbers contributing. We conducted an audit on 10% of missed timescales. 75% of the cases audited were outside our control, for example relating to the availability of the occupants. 25% were a result of technician capacity. A planned uplift in Technician numbers should help see improvements in the area moving forward.</p>					



We continue to monitor contact attempts and seek support where necessary from partner agencies where engagement is proving difficult.

Protection Measures

9. Proportion of Fire Safety Audits conducted against premises identified as High or Very High Risk in our Risk Based Inspection Programme **2024/25 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24) *	-	-	-	-	-
Target	-	-	-	-	-
2024/25 Actual	-				-

Reporting for this new Corporate Measure is currently being developed. Due dates and targets were set in July, and reporting will start from Q2.

10. Percentage of Full Fire Safety Audits with a 'Broadly Compliant' result * **2024/25 Target: 60% max**

	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	69.6%	62.4%	65.3%	76.1%	69.6%
Target (max)	60%	60%	60%	60%	60%
2024/25 Actual	73.7% ↓				73.7% ↓

*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.

We did not achieve the 60% target maximum in Q1. Reactive Fire Safety Audits, such as those triggered by complaints and post fire inspections, continue to be a source of 'Broadly Compliant' returns.

An improved triage process has been implemented and is starting to take shape. This should assist in reducing some unnecessary inspections, which should in turn reduce "Broadly compliant" outcomes as well.

Our in development Fire Safety Inspectors continue to lead on simple premises audits, which typically result in a "Broadly Compliant" outcome. Given the number in development, needing to enhance their skills and competency, we are likely to continue to identify an impact on the number of "Broadly Compliant" outcomes until approximately August 2025.

11. Percentage success when cases go to court **2024/25 Target: 80%**

	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	0 cases	0 cases	0 cases	0 cases	0 cases
Target	80%	80%	80%	80%	80%
2024/25 Actual	100% (1 case)				100% (1 case)

We are pleased to report a successful prosecution by the legal team. This involved a combined effort with members of protection also contributing significantly.



We issued a prohibition notice to Papa Johns 272a High Street Slough on the 3rd of March 2023, as we were of the opinion that the premises posed a risk to people so serious that the use of the premises ought to be prohibited. Two Prohibition Notices were served upon the Responsible Person prohibiting sleeping accommodations (two flats). We achieved a successful prosecution during the current quarter.

12. Percentage of Statutory fire consultations completed within the required timeframes **2024/25 Target: 95%**

	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	97.0%	98.4%	95.5%	96.4%	97.0%
Target	95%	95%	95%	95%	95%
2024/25 Actual	98.8% ↑				98.8% ↑

The Service continues to perform well across this measure with Wokingham, Bracknell, Windsor and Slough achieving 100% completion.

Response Measures

13. Percentage of occasions where the first fire engine arrives at an emergency incident within 10 minutes from time the emergency call was answered **2024/25 Target: 75%**

	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	74.6%	72.9%	71.5%	70.1%	74.6%
Target	75%	75%	75%	75%	75%
2024/25 Actual	74.7% ↑				74.7% ↑

During Q1, we attended 74.7% of all emergency incidents within 10 minutes of receiving the call. This is slightly below target, but an increase in performance compared to all quarters of last year.

Managers will continue to monitor and manage response times, ensuring standards are maintained throughout the service, exploring some improvement area' such as Standby arrangements and appliances attending OTB incidents through Hub management teams.

14. Percentage of wholetime frontline pumping appliance availability **2024/25 Target: 99%**

	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	97.3%	97.1%	97.6%	97.8%	97.3%
Target	97.4%	97.4%	97.4%	97.4%	97.4%
2024/25 Actual	97.7% ↑				97.7% ↑

Whilst the Service has achieved the 97% target we continue to identify areas for improvement.

15. Percentage of hours where there is adequate crewing on on-call frontline pumping appliances (based on 24/7 crewing) **2024/25 Target: 50%**

	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	46.5%	38.4%	33.5%	41.5%	46.5%
Target	50%	50%	50%	50%	50%
2024/25 Actual	34.1% ↓				34.1% ↓

On call availability has been challenging in Q1 resulting in a drop of 7.4 percentage points when compared to the previous quarter's figures. Evidence points towards the number of leavers as the main contributing factor in the reduced availability.



Recruitment is ongoing with National Fire Service Testing (NFST) planned for Q2; initial indications are that we will have enough to run another On-Call initial course in November.

Lambourn had a temporary Watch Manager appointed into role, this has had a positive impact on morale, further work is being carried out to try and increase availability of the Lambourn appliance.

New crewing arrangements have been introduced allowing two on call firefighters to crew 4x4 response vehicles. Whilst crewing of these vehicles does not reflect in our corporate measures, the increased availability of these assets does represent a significant benefit to the Service.

16. Percentage of time that 14 or more pumping appliances are available **2024/25 Target: 100%**

	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	-	-	-	-	-
Target	100%	100%	100%	100%	100%
2024/25 Actual	91.2%				91.2%

This is a new measure introduced this year to assist in monitoring our compliance with our CRMP commitment to ensure a baseline service provision of 14 pumping appliances. Our monitoring and management of crewing is an area of continued focus and this measure will assist with this, as well as assist us in monitoring the implementation of our Priority 6 commitment from Q3.

During Q1 there were 31 occasions where the 14th WDS appliance was degraded, despite efforts to make use of PAOT – this clearly demonstrates an overreliance on overtime to maintain baseline appliance availability. However, it is worthy of note that there were only 16 shifts during Q1 where fewer than 14 pumping appliances were available. All these instances were day shifts, which highlights the role of On Call appliances, particularly at night, in maintaining our baseline service provision.

Resilience Measures

17. Percentage of visits to Very High, High and Medium Operational Risk sites completed in timescale **2024/25 Target: 100%**

	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	57.7%	80.0%	83.3%	56.0%	57.7%
Target	100%	100%	100%	100%	100%
2024/25 Actual	71.0% ↑				71.0% ↑

The Q1 target has not been achieved, 22 visits were completed out of timescale. Of those overdue, most were completed and submitted within 8 days of falling due. A couple being more problematic due to gaining access to the premises.

Reasons for failures are being reviewed to create improvements into Q2.

18. Number of Service Delivery Hub exercises completed **2024/25 Target: 12**

	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	4	1	4	3	4
Target	3	3	3	3	3
2024/25 Actual	3 ↓				3 ↓



This is a positive result for this quarter with all hub level exercises completed and debriefed within the required time frames. This has been achieved through careful management from Hub management teams to ensure crews are supported in the planning and delivery of the exercises.

19. Percentage of Automatic Fire Alarm calls where RBFRS did not attend					2024/25 Target: 30% min
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	25.7%	25.8%	24.8%	25.1%	25.7%
Target	30%	30%	30%	30%	30%
2024/25 Actual	24.9% ↓				24.9% ↓

Performance against this target has been broadly consistent for the last 12 months based on the current RBFRS call challenge position.

Following feedback from HMICFRS, the service recognised this approach required review as it was a limiting factor in the potential effectiveness of frontline operational response. The service has taken action in two key areas; firstly, a public consultation to change the way the service responds to AFA notifications, concluding in Q1, and secondly, a review of the effectiveness of the services interaction with businesses to reduce false alarms at source.

The service expects the former to have a direct effect on this measure by creating the conditions that will enable Fire Control operators to successfully challenge more calls, reducing the mobilisation of frontline resources to false alarms where the service will not mobilise to low and medium risk premises unless a fire is confirmed.

This position is being aligned across the Thames valley. A decision will be taken, and the resulting position implemented in Q2.

In respect of the effectiveness of the services interaction with businesses, an action plan has been developed and is expected to be completed in Q1 25/26. This should have a positive effect on the numbers of AFA calls the service receives, however the data suggests that there is limited scope for improvement, underlining the importance changing our approach to call challenge.

Customer Experience Measures					
20. Percentage of domestic respondents satisfied with the overall service					2024/25 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	100%	100%	100%	No returns	100%
Target	100%	100%	100%	100%	100%
2024/25 Actual	100% ↔				100% ↔
21. Percentage of commercial respondents satisfied with the overall service					
					2024/25 Target: 95%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	100%	100%	100%	No returns	100%
Target	95%	95%	95%	95%	95%
2024/25 Actual	(no responses)				(no responses)



22. Percentage of respondents satisfied with the services with regards to Fire Safety Audits					2024/25 Target: 90%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	100%	90.9%	100%	100%	100%
Target	90%	90%	90%	90%	90%
2024/25 Actual	100% ↔				100% ↔

23. Percentage of domestic respondents satisfied with the service regards their Safe and Well Visit					2024/25 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	100%	100%	98.8%	100%	100%
Target	100%	100%	100%	100%	100%
2024/25 Actual	100% ↔				100% ↔

Although all of those responding to our surveys have been satisfied so far this year, response rates to all our surveys remain low. A review of the information required and process for obtaining it is planned for later this year.

24. Number of complaints received					2024/25 Target: Monitor
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	7	6	6	2	7
Target	-	-	-	-	-
2024/25 Actual	1 ↑				1 ↑

In Quarter 1 2024/2025, the service received 1 complaint. The subject matter of this complaint is shown below:

Complaint subject	Number of complaints in Quarter
Safety Concern	0
Customer Service	0
Behaviour	0
Accidental Damage	1

25. Number of compliments received					2024/25 Target: Monitor
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	4	4	5	8	4
Target	-	-	-	-	-
2024/25 Actual	7 ↑				7 ↑

Of the seven compliments received during Quarter 1, one was for Thames Valley Fire Control following some advice they gave over the phone. Two were thanking separate crews following community visits to primary schools. One was for a Safe and Well technician following a home visit. Three were for three separate crews following Safe and Well visits carried out. Three compliments arrived by email and four arrived via our online form.



Key – Performance Measures

	Target exceeded by more than 10%	Comparison with target
	Target met or exceeded by up to 10%	
	Target missed by up to 10%	
	Target missed by more than 10%	
	NA or data accuracy issues affect confidence in reporting	
↑	Improvement in performance from equivalent period the previous year	Comparison with actual the previous year
↔	Maintenance of performance from equivalent period the previous year	
↓	Decline in performance from equivalent period the previous year	



Quadrant Two – Corporate Health

Performance Development Review (PDR) and Talent Management

The purpose of the Talent Management scheme is to consider, in the context of workforce planning, how talent management informs planning of recruitment, promotion and development activity and how this links to job satisfaction, retention and future career aspirations, as well as broader organisational considerations such as identification of critical roles and succession planning. The PDR process plays a key role in the talent management process and will act as a driver for identifying talent.

Following a consultation which concluded in early 2024, a talent management pilot was launched in April 2024 to a group of staff across the service (incorporating different areas of the organisation such as TVFCS, Corporate Services and Service Delivery). The launch included training on coaching and giving feedback and introducing the pilot PDR form that incorporated a rating system that allows staff to be included on the talent management grid. The talent management framework links to personalised development opportunities to support an individuals' growth towards future aspirations.

Having an effective PDR process helps RBFRS drive successful performance and meet its strategic commitments. On an individual level, PDRs identify any key areas for development and make them more effective in their daily work.

Introducing talent management acts in tandem with existing processes such as 360-degree feedback, 1-2-1s, coaching and the PDR process to enable individuals make best use of their knowledge, skills and potential but making current performance and future aspirations clearer by offering more tailored opportunities for development.

The pilot is ongoing and will be reviewed following the collation of feedback.



Revenue Budget Update – Q1 2024/25

The 2024/25 Revenue Budget agreed by Members in February 2024 was set at £45.964m. The budget was set with no addition to or need to draw on the Budget Contingency Reserve.

The forecast revenue outturn for 2024/25 is shown in Appendix A and shows an anticipated surplus of £80,000, compared to the original budget. Variances against individual revenue lines are explained below.

Employee costs. The Grey book staff reached a pay settlement from 1 July 2024 of 4%. This was against a budget rate of 3.75% - at an additional cost of £39,000. The budget was set with the crewing model that included a buffer of an additional ten firefighters. The actual numbers for quarter 1 were below the budgeted number. The 17 new recruits that joined in February are now all on stations and 18 new recruits have been taken on (in July) and after training will join the stations in November. Taking into account known leavers the net result is anticipated to be that the crewing establishment, including the additional buffer, will be achieved by November. The proportion of firefighters in development is higher than in the budget. Overall, there is a forecast net cost savings of around £367,000.

The overtime budget was set at a lower level, in anticipation that the additional ten firefighter buffer would help lead to reduced overtime. Due to the under establishment in quarter 1, and pressure on the overtime budget to cover sickness, firefighters on light duties and additional overtime for training, the overtime forecast is showing at £395,000 over budget for the year.

On-call stations are currently showing a net negative variance across the county, with a net variance of £93,000, with Lambourn being £50,000 of this amount.

The Green book pay award has not yet been finalised. A forecast rise of 3.75% (from 1 April 2024) has been used, which is the same as budgeted.

Occupational Health – costs are forecast to be £46,000 higher than budgeted due to cost increases, additional number of wholetime staff with additional medicals, increased numbers of referrals – particularly of complex cases needing Physician rather than Adviser appointments. Referrals for mental health cases have also risen.

Contracts – Internal and External audit cost are forecast to be a total of £22,000 higher than budgeted

Pension costs – £27,000 higher due to additional Injury award costs.

Grants – the Pension Grant to cover additional pension costs has come in £87,000 higher than budgeted.



Interest receivable – the higher than budgeted interest rates have been to the advantage of the Authority, with current and anticipated interest from money on deposit forecast to yield around £146,000 more revenue than originally budgeted.

Royal Berkshire Fire Authority

APPENDIX

Budget Update - Revenue Position Quarter 1 2024/25

	Annual Budget £'000	Q1 Outturn £'000	Forecast to YE £'000	Fcast - Budget Variance £'000
EMPLOYEES				
STATIONS	20,743	5,008	20,715	(28)
NON-STATIONS	14,499	3,428	14,518	19
TRAINING	702	116	713	11
OTHER	294	80	292	(2)
	36,238	8,632	36,238	0
PREMISES				
REPAIRS & MAINTENANCE	950	171	949	(1)
RATES	968	283	968	0
CLEANING	294	49	294	0
UTILITIES	787	109	787	0
	2,999	612	2,998	(1)
SUPPLIES				
INSURANCE	437	254	437	0
EQUIPMENT	510	93	525	15
IS EQUIPMENT & LICENCES	929	386	946	17
CLOTHING/PPE	373	39	373	0
COMMUNICATIONS	913	165	912	(1)
OCCUPATIONAL HEALTH	268	105	314	46
PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTIONS	142	101	143	1
COMMUNITY FIRE SAFETY SUPPLIES	110	24	110	0
SUPPLIES OTHER	231	67	249	18
	3,913	1,234	4,009	96
CONTRACTS				
CONTRIBUTION TO TVFCS	1,063	253	1,045	(18)
LEGAL	50	4	50	0
OTHER CONTRACTS (incl. Professional fees)	961	185	995	34
	2,074	442	2,090	16
TRANSPORT				
VEHICLE RUNNING COSTS	754	220	761	7



Quarterly Performance Report

TRAVEL	228	55	224	(4)
	982	275	985	3
PENSIONS				
PENSIONS	518	163	545	27
	518	163	545	27
INCOME				
GRANTS	(1,593)	(1,368)	(1,680)	(87)
RENTAL INCOME	(239)	(128)	(223)	16
TVFCS RECHARGE INCOME	(429)	(107)	(429)	0
INCOME OTHER	(546)	(7)	(548)	(2)
	(2,807)	(1,610)	(2,880)	(73)
NET COST OF SERVICES	43,917	9,748	43,985	68
DEBT CHARGES INTEREST	333	0	333	0
INVESTMENT INTEREST	(453)	(137)	(599)	(146)
REVENUE FUNDING OF CAPITAL	2,001	0	2,001	0
APPROPRIATION TO/(FROM) RESERVES	(384)	0	(384)	0
FINANCING COSTS	550	0	550	0
NET EXPENDITURE	45,964	9,611	45,886	(78)
GOV GRANTS/PRECEPTS	(45,964)	(14,450)	(45,966)	(2)
(SURPLUS)/DEFICIT BEFORE USE OF RESERVES	0	(4,839)	(80)	(80)



Equality, Diversity and Inclusion Objectives Progress Update

	End 23/24	Q1	Q2	Q3	Q4
<p>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.</p>	G	G			
<p>Q1 saw the second iteration of our Discover a Career as a Firefighter programme with some changes following the evaluation of our first. 90 individuals signed up for the programme in Q1. Additional pre-engagement work has been carried out in the community to encourage take up of the sessions by those from underrepresented groups. Stations have visited girls only sixth forms, local Muslim centres and other faith group venues to share the information in addition to sharing across community groups on social media and via email.</p> <p>During Q1 5 individuals transferred into firefighter roles from other services or from our call team, in addition to 17 new firefighter apprentices. However, compared to previous recruitment campaigns the number of applicants and successful candidates has decreased. Of the applicants who were shortlisted, 15 were female and 92 male. Only 1 of the females was successfully appointed and 1 individual from an ethnic minority background of 15 shortlisted</p> <p>This quarter we successfully recruited 5 summer interns who will start their placement with the service in Q2. The interns as per the eligibility criteria are all from ethnic minority groups that are currently underrepresented in the service. All 5 of the selected interns have expressed a keen interest in roles within the service both operational and non operational.</p>					
<p>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.</p>	G	G			
<p>This quarter the contract was awarded for the services mandatory EDI and Cultural Awareness Training which will start to be rolled out in Q2. In addition, our mandatory e-learning package an Introduction to Equality, Diversity and Inclusion was refreshed and updated with more up to date, expanded information and more sector specific examples. All staff are required to complete this training prior to the full day EDI and Cultural Awareness Training. It is hoped that all staff will have completed the EDI and Cultural Awareness Training over the next 18 months.</p> <p>The services new people strategy was launched which addresses the diversity of our operational staff and aims to increase the diversity of its operational staff by 100%.</p>					



The service is working on an Equality Data and Culture Dashboard to support our decision making. This dashboard will compare our staff demographic data to the Berkshire population and allow us to more easily monitor for trends in our processes such as recruitment, grievances and training and will allow us to better understand if there are groups within the service that don't have access to the same opportunities or outcomes.

This quarter the service produced a Positive Action video to support colleagues in understanding what positive action is, why as an organisation we do it and the importance it has. Feedback of this has been well received and we are looking to expand our education on the importance of positive action.

2 further Leadership Forums were held in Q1 with a strong focus on culture including a session on employment law as well as a talk from the FBU Womens Rep on sexual harassment in Fire and Rescue Services.

Neurodiversity training was delivered to our HR, L+D and R+D teams to provide better advice and guidance for managers when supporting colleagues who are neurodivergent.

This quarter we introduced for the first time EDI accountability for all Red Watch station managers. This aims to bring a cohesive approach across Service Delivery to EDI and provide more on the ground support to push the EDI agenda. Accountability includes the organising of station activities as well as reporting back to Hub management on what has taken place. This has been embedded into SM objectives and hub and station plans.

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.

G	G			
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Q1 has seen a significant increase in engagement with our communities from Service Delivery. Highlights have included Stn 20 greens engaging with the Whitley attachment of the Berkshire Army Cadet Force and inviting them to station where they had a tour of the station and demonstrations as well as a session on careers in the service and the tests required for firefighter recruitment. The visit also included a session on lifesaving and CPR. Feedback from commandment of the group was extremely positive.

Crews from the East attended Friday Prayer and JMIC mosque to promote important safety information and the careers available. In addition to crews building relationships with Slough Outreach who support those experiencing homelessness and displacement in Slough. The crew have maintained an ongoing relationship and support with serving food to homeless individuals at Slough Homeless Our Concern.

Crews from Bracknell attended the Bracknell Cultural Day in the Lexicon which provided the ideal platform to speak to the diverse community about the service RBFRS offer.

Crews from Newbury have built and maintained a relationship with a local charity group Project Salama, a group of ethnic minority women who are or have been a victim of domestic abuse after initial contact future events between the station and charity group have been organised.



In addition, many crews have taken part in the Discover a Career as a firefighter programme and contributed on online sessions and station visits. We hope to see more responsibility taken in the rest of the year for the planning of these sessions.
The development of our cultural dashboard will allow us to better target communities moving forwards.

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.

G	G			
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Headquarters staff attended a potluck lunch to celebrate Pride month. The event aimed to bring people from the organisation together to talk about Pride and what it means to them. The event was a great success with many people from different departments in attendance.
Pilot sessions of the Station Visits programme started in Q1. The project was commissioned to support the Vision that was published as part of the 2023-2027 CRMP. A key objective to give staff a better understanding of what we do in our roles and develop working relationships to help build more effective joint working and our One Team culture.
The refresh of our introduction to EDI e-learning hopes to support the building of our inclusive culture going into more detail and providing more examples of how we can better support our colleagues.
Colleagues across HR developed a Neurodiversity action plan that will support the inclusion of staff who are neurodivergent. The guidance produced by our Occupational Health providers the service we commissioned to focus specifically on how to support neurodivergent colleague in both operational roles and control room roles was complete.

Tables containing relevant Equality, Diversity and Inclusion data are presented quarterly and are available in Appendix A.

Key - Project or Action Plan Status

C	Project complete
G	Project on Track
A	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 working time lost to sickness across all staff groups					2024/25 Target: 5% max
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	4.0%	4.8%	6.9%	6.3%	4.0%
Target	5.0%	5.0%	5.0%	5.0%	5.0%
2024/25 Actual	5.4% ↓				5.4% ↓

There were fewer days lost to sickness this quarter compared to Q4. However, there was an increase of 37% compared to the same period last year. The increase compared with last year has been driven by an increase in long term, rather than short term sickness.

The top three reasons for sickness absence this quarter were Mental Health, Respiratory and MSK. The top three reasons will fluctuate quarter on quarter and will also be impacted by seasonal factors.

Cause	Q1 24/25		Q4 23/24		Q1 23/24	
	Days Lost	Occurrences	Days Lost	Occurrences	Days Lost	Occurrences
Gastro	103	31	119	32	93	37
Mental Health	779	27	689	25	167	6
Musculo Skeletal	156	24	468	34	369	44
Respiratory	172	37	230	61	94	27
Other	302	46	213	52	237	44
Total Days Lost	1512	165	1719	204	960	158

Sickness by Contract Type

In comparison to the same period last year, sickness days lost has increased across all contract types. When compared with Q4, sickness has decreased for all groups except for On Call which has increased by 23%.

Musculoskeletal (MSK) Sickness

Musculoskeletal (MSK) sickness days have reduced this quarter. Further analysis shows that:

- The top three reasons for MSK absence were shoulder, lower limb and back and is consistent with last quarter
- MSK absence is lower when compared to the same quarter last year.
- Wholetime employees had the highest amount of sickness days lost to MSK this quarter. This will mainly be the case as this staff group is the largest in the service. However, there was a decrease in the number of days lost to MSK this quarter across all contract types.
- There were four long term MSK sickness cases this quarter everyone has returned to the workplace
- Consistent with other Fire and rescue Services, MSK absence remains one of the top three highest causes of sickness absence.



Mental Health

Mental Health sickness days lost has increased again this quarter. Further analysis shows that:

- Over 50% of all sickness days lost this quarter were Mental Health related. This is the highest we have seen mental health absence in recent years.
- The biggest categories of mental health absence this quarter were non-work-related stress, other forms of mental health and work related stress.
- Wholetime days lost have decreased this quarter. Green Book, On-Call and Control all increased
- There are no identifiable trends as the majority related to personal/outside pressures. Appropriate mental health support has been offered and welfare visits undertaken.

Respiratory

There was a decrease in Respiratory sickness this quarter in terms of both episodes and days lost.

HR Support

- Meetings were completed with Group Managers across all the hubs to review and provide support to managers addressing short and long term sickness levels and light duties. Face to face meetings including visits to stations have also been undertaken. Ongoing support continues to be given to discuss and input into return-to-work plans, stress risk assessments and guidance in occupational health referrals for more complex cases.
- A further four sickness absence management workshops were completed in Q1, a total of 106 managers have received some training input. The workshops reiterated the absence management procedures to drive consistency of policy application. Additional workshops are scheduled for the end of Q2.
- Quarterly sickness audits are also undertaken to identify poorly managed absence which is then addressed with the managers. To monitor the effectiveness of the workshops, absence cases managed by those who attended the workshops will be audited.

27. Percentage of eligible staff with Personal Development Appraisals					2024/25 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	62.5%	86.0%	92.0%	94.0%	62.5%
Target	100%	100%	100%	100%	100%
2024/25 Actual	32.1% ↓				32.1% ↓

At Q1 551 staff were eligible to have received a Personal Development Review (PDR) meeting between April and July 2024. Dual contract employees only require one PDR and therefore have only been counted once.

81 employees were exempt for the following reasons:
 new employees
 absences from the workplace



177 active staff are recorded as having had their PDR at the end of the quarter which is 32.1%. This is much lower than the same period last year (62.5% in Q1 23/24). The deadline for completion of PDR meetings this year is July 2024.

Of the meetings that have taken place, 81 completed PDR forms have been returned to HR.

28. Number of formal grievances					2024/25 Target: Monitor
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	2	3	4	8	2
Target (max)	--	--	--	--	--
2043/25 Actual	6 ↓				6 ↓

During Q1 there were six formal complaints raised.

A report for the year 2023/2024 analysing the effectiveness of grievance and disciplines was presented to Audit and Governance in at the Q4 performance meeting. This report will be presented annually to the committee. No specific trends for the reason for the increase in complaints could be identified, but this continues to be monitored through six monthly complaint audits. Where actions are identified, these are addressed in a timely manner where appropriate.

29. Number of RIDDOR accidents and diseases					2024/25 Target: 4 max
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	1	0	1	1	1
Target (max)	1	1	1	1	1
2024/25 Actual	0 ↑				0 ↑

During Q1 there were no RIDDOR reportable injuries.

30. Percentage of spend subject to competition					2024/25 Target: 85%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	80.5%	85.1%	91.6%	87.6%	80.5%
Target	85%	85%	85%	85%	85%
2024/25 Actual	89.9%↑				89.9%↑

Competition was above the required target of 85% this quarter with a few waivers that includes:

ADT Fire and Security Plc – closed protocol fire alarm in HQ and changing supplier will need to replace the whole smoke alarm system costing authority additional cost. Waiver done to stay with the current provider as they have the IP on the system.

Concept Engineering – purchase of smoke system for firehouse training facility which need specialist equipment with experienced and capable supplier who can install this equipment on the fire house building.

DA Technologies: To provide maintenance work at the fire house to replace tiles which are patented goods of the supplier with no reasonable alternatives.



First Product: supply of bespoke bags to store equipment and other items in appliances.

Ricardio-AWA Ltd: Chemical hazards database is unique to a single supplier and government approved supplier that provides patented/proprietary goods.

31. Compliant spend as a percentage of overall spend					2024/25 Target: 100%
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	98.8%	100%	100%	100%	98.8%
Target	100%	100%	100%	100%	100%
2024/25 Actual	100% ↑				100% ↑

Compliant spend met the required target of 100%

32. Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation*					2024/25 Target: 0
	Q1	Q2	Q3	Q4	Year to Q1
Previous Year (23/24)	0	0	0	0	0
Target	0	0	0	0	0
2024/25 Actual	0 ↔				0 ↔

*Freedom of Information Act, Environmental Regulations or Data Protection Legislation

No Information Commissioner assessments finding that the Service has breached Information Rights Legislation.

Key - Performance Measures

■	Target exceeded by more than 10%	Comparison with target
■	Target met or exceeded by up to 10%	
■	Target missed by up to 10%	
■	Target missed by more than 10%	
■	NA or data accuracy issues affect confidence in reporting	Comparison with actual the previous year
↑	Improvement in performance from equivalent period the previous year	
↔	Maintenance of performance from equivalent period the previous year	
↓	Decline in performance from equivalent period the 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, RBFRS Development Programme and Strategic Asset Investment Framework (SAIF), assessing progress against the projects and objectives set in our 2024-25 Annual Plan.

Key - Priority Programme Project Status

C	Project complete
G	Project on Track
A	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



RBFRS Public Sector Decarbonisation Scheme (PSDS)

The Authority is committed to reducing the impact of the organisation's operations on the environment and reducing its carbon footprint. Our service commitment is to ensure we are providing a financially stable and environmentally friendly service to our communities.

The PSDS scheme is in place to support public sector organisations in achieving 'net zero' by 2050; the UK Government target. The scheme follows a detailed and data-driven process where applications are meticulously reviewed to select successful applicants.

RBFRS applied for PSDS Phase 3c in October 2023 and received notice of success with the maximum grant awarded in February 2024. This has enabled the service to plan to make huge steps in their decarbonisation journey.

This project will decarbonise five priority sites and improve energy efficiencies with a combination of renewable energy and other technologies. The scheme focusses on removing fossil fuels so each site will have gas fired heating systems replaced with air source heat pumps to provide significantly more efficient systems producing much less carbon.

RBFRS has to adhere to a strict two-year programme. Year one (April 24 – March 25) will focus on the design and detailed planning, with year two (April 25 – March 26) focussing on physical delivery.

For this project the service has opted to seek specialist professional services support from a single multi-disciplinary consultancy from the application stage and throughout the two-year programme of works. By enlisting the services of sector specialists, this mitigates the risk of unknown information and gives us the opportunity to plan for all design aspects and issues.

Further, to align the SAIF refurbishment project at Langley, the multidisciplinary team that is appointed will form a robust working relationship with the team on the heat decarbonisation project. Both consultancy services will work together and develop efficient and effective communication and coordination to align the programme and reduce risks during project delivery.

As part of this, there will be operational impact assessment forums with key site users to understand how the scope of works will affect the site, so we can mitigate any risks and put a robust delivery plan in place.

Progress against this project can be seen within Quadrant 3 Priority Programmes.



CRMP

RBFA is required to publish a Community Risk Management Plan (CRMP – formerly known as an Integrated Risk Management Plan). In early 2023, we consulted on and published a CRMP for 2023-27, which reflects the priorities and requirements of the [Fire and Rescue National Framework for England](#).

The below shows progress against our CRMP commitments published in our 2023-24 Annual Plan.

Priority 1: We will develop our Integrated Service Delivery Strategy to meet the changing profile of risk in Berkshire due to climate change, societal and technological shifts.						
	End 23/24	Q1	Q2	Q3	Q4	
We will build on our horizon scan and evidence base developed for our CRMP to improve our understanding of climate change, societal and technological risks.	G	G				
We will develop our water rescue capability to respond to the impact of climate change.	G	G				
We will develop our wildfire capability to respond to the impact of climate change.	R	G				
As society adapts, through increased use of alternative and renewable energy systems in vehicles, homes and businesses, we must adapt what we do to mitigate the risk. The hazards we manage are changing and we must keep pace with these changes. We will develop our prevention activities and response model to reduce the impact of incidents from alternative fuel sources, both to the Service and the people of Berkshire.	G	G				
Priority 2: We will develop a Risk Based Prevention Programme to target those most vulnerable and at risk from emergency incidents						
	End 23/24	Q1	Q2	Q3	Q4	
We will use our evidence base to identify who is most at risk in our communities, to ensure our resourcing is targeted in the most effective and efficient way.	NS*	NS*				
We will continue to work with our partner agencies to ensure high quality referrals for the most vulnerable.	G	G				
Data and local knowledge in prevention	G	G				
*Changed to NS from a previous amber due to the conscious decision to manage workloads and prioritise activity.						
Priority 3: We will develop our response model to ensure that we are providing the most effective response to incidents within Berkshire, ensuring that it is aligned to the risks identified, sustainable and provides value for money						
	End 23/24	Q1	Q2	Q3	Q4	
In preparation for a project commencing in 2024/25 to improve our response to incidents, we will use our CRMP evidence base and our annual review of risk to assess our response model to determine the areas that will form part of this project.	G	G				



Undertake a review of the utilisation and resilience of our Flexi Duty Officer arrangements.	R	A			
<p>A review has been completed and will now form part of Priority 3 workstream</p> <p>A draft review of Level 2 and Level 3 command has been produced for the project sponsor. This report is under consideration, and it is likely further work linked to Priority 3 will need to be undertaken. Timing for delivery will now coincide with Priority 3.</p> <p>It is noted that in the interim, RBFRS has increased the flexi duty officer establishment to mitigate capacity issues identified.</p>					
Special appliances review		NS			
<p>Priority 4: We will review the incidents that do not form part of our core statutory responsibilities, to better understand the implications for the Service in attending these incidents. Notwithstanding the review of our response and the gathering of this data, public safety will remain the primary priority of the Service</p>					
	End 23/24	Q1	Q2	Q3	Q4
We will assess the volume and costs of responding to incidents which do not currently form part of our core statutory responsibilities. Public safety will remain our priority and this information will be used to support the implementation of "Fit of the Future", the NFCC and sector ambitions for the future of fire and rescue service over the next five years.	G	A			
<p>Priority 5: We will develop our Service to reduce the impact of fire safety issues in commercial buildings.</p>					
	End 23/24	Q1	Q2	Q3	Q4
We will evaluate our new Risk-Based Inspection Programme to ensure we are targeting the premises with the greatest risk	G	G			
We will evaluate the changes we have made to our call challenge policy and review our response	G	G			
Sprinklers		G			
Building Safety Regulator		G			
New Ways of working		NS			
<p>Priority 6: We will maintain 19 frontline fire appliances, and a baseline service provision of 14 frontline fire appliances, utilising wholetime and on-call staff as effectively as possible, through local management</p>					
	End 23/24	Q1	Q2	Q3	Q4
Develop our service delivery policies to integrate our wholetime and on call availability to achieve our baseline service provision of 14 frontline appliances, making dynamic and intelligence-based decisions to maximise cover and our response standard. We will monitor and evaluate these processes.	G	G			



RBFRS Development Programme

The Development Programme contains five key pillars of work for places, processes and systems, comms and engagement and governance & assurance and People. Reporting for four of these primarily take place in other areas with this update focused on the People pillar.

Fire Authority approved the RBFRS annual plan in April and plans are in place for monitoring delivery against the plan within our Forums. Our People Strategy was also agreed with SLT and has been published. Plans are now underway to shape the activities supporting the strategy delivery. A staff engagement group was held with the aim of gathering feedback on our communications and understanding around our vision and development programme. Alongside this a piece of work has been commissioned with an external consultant to review our narrative around our purpose, vision and values. Our staff survey actions were agreed and these have been communicated to the organisation, ongoing reporting will provide visibility of progress. A revised social media policy has been released for consultation. Preparation for the HMICFRS inspection continues with inspectors onsite during October.



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						
		Status				
		End 23/24	Q1	Q2	Q3	Q4
Estates Development	On Track	G	G			
	On Budget	G	G			
Training Centre	On Track	G	G			
	On Budget	G	G			
Slough	On Track	G	G			
	On Budget	G	G			
Langley	On Track	NS	A			
	On Budget	NS	A			
P1 Heat Decarbonisation	On Track	A	G			
	On Budget	R	R			
EDI Station Improvements	On Track	A	G			
	On Budget	G	G			
Contaminants Estate Development	On Track	G	G			
	On Budget	G	G			
Service House Refurbishment	On Track	G	G			
	On Budget	G	G			
LED Priority 2	On Track	G	G			
	On Budget	G	G			
Fleet and Equipment						
		Status				
		End 23/24	Q1	Q2	Q3	Q4
Fleet: Special Appliances	On Track	G	G			
	On Budget	G	G			



Fleet: Other Ancillary Vehicles	On Track	G	G			
	On Budget	G	G			
Equipment	On Track	G	G			
	On Budget	G	G			
ICT						
		Status				
		End 23/24	Q1	Q2	Q3	Q4
Hardware	On Track	A	G			
	On Budget	G	G			
Software	On Track	G	G			
	On Budget	G	G			
Networks	On Track	R	A			
	On Budget	R	A			
Services	On Track	G	G			
	On Budget	G	G			
ESMCP	On Track	R	R			
	On Budget	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.

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
↑	Risk increasing
↔	No risk movement
↓	Risk decreasing



Corporate Risk Register risks as at September 2024

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	20	19
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	18	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	18	12



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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
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	21	12
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	17	10



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
842	Volatility of operational staff numbers	If PP&R 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
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



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
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	21	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	13	10
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



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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	18	16
917	Culture	High profile investigations have culminated in the LFB independent review of culture and HMICFRS spotlight report on values and culture in FRS's. Whilst RBFRS conducts staff surveys and has a HMICFRS 'good' rating for promoting values and culture, the service is not immune to poor behaviours. If we don't take action to manage our culture in light of both the findings of the recent sector wide cultural reviews and our own subsequent internal listening exercises then we can expect to lose existing staff, fail to attract new staff and potentially lose public trust. This will directly affect our ability to deliver our statutory duties and therefor impact our ability to protect both the public and staff.	21	21	8
918	Wildfire Capability	If we do not prepare for the impact of a changing climate on the likelihood and severity of wildfires and ensure we are suitably prepared to respond to operational incidents in changing conditions, which may become more likely given resource pressures and the speed of climate change, then we can expect to see increased harms from fire which are significant in respect of our statutory responsibilities to mitigate risk within our communities and our duties to ensure the health, safety and wellbeing of our staff.	22	17	13



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
928	ESMCP	If we do not plan for and make sufficient provision of resources and budget to support the development 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 which would have significant negative impact on our ability to deliver our core functions.	21	21	12
931	Industrial Action	If we do not secure, or make every endeavour to secure, adequate resources to meet the full range of service delivery risks and duties as defined in FRA 2004 and CCA 2008, which may become increasingly likely given the volatile national industrial relations landscape across the public sector, then we can expect to fail in delivery of our target statutory duties and providing adequate resource to meet the identified risk in Berkshire, which is significant in respect to public and staff safety and organisational reputation.	24	21	16
932	Fleet strategy, documentation and control	There is a lot of inconsistency in the documentation, policies and controls we have across Service that relate to Fleet. There are also a large number of owners of documents that have a bearing on the delivery or use of fleet, potentially leading to gaps that could lead to non-compliance. If we fail to manage our fleet operations appropriately, we risk affecting frontline operational capability and policy compliance.	17	17	10



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
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, 'in-house' 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	20	12
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
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	21	12



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
909	Fire Investigation	If we are unable to effectively investigate Tier 2 Accidental and Deliberate fires within RBFRS and support a multi-service approach to ISO 17020 accreditation, which is possible due to a lack of internal capability and reliance on a 1 month notice period contract with West Midlands FRS for all accidental Tier 2 fire investigations, then we can expect to encounter issues in supporting Criminal Prosecutions as well as Inquests, Safety boards and other Prevention activities which is significant in respect of public safety and the reputation of RBFRS	21	18	12
913	External Audit	If the Authority's statutory accounts are not audited in a timely manner, which is currently the case given the lack of audit capacity across the sector then we can expect increasing workloads and costs to clear the audit backlog or the prospect of the accounts being qualified, all of which would significantly impact the Authority in terms of cost and public reputation.	17	17	16
914	Training Delivery	If we fail to deliver training and assessment events which underpin operational qualifications, which is increasingly likely due to crewing pressures, the development profile in L&D, reliance on the availability of ARA instructors and no additional capacity in the training calendar, we can expect to see an erosion of operationally qualified staff that impacts staff safety, appliance availability and public safety.	21	21	15
926	New Finance System	If we do not implement a new Finance System by December 2024, which is a possibility given the suggested length of time for implementation from pre-market engagement then we can expect to receive no updates from Sage in relation to legislative changes and limited workarounds from Datel, which will impact the integrity of financial reporting.	22	18	10



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
933	Fires in tall buildings	If we do not deliver and train for appropriate interventions for Fires in Tall Buildings, which is likely given that the service is not fully aligned to National Operational Guidance, then we can expect this to impact the effectiveness of firefighting and rescue operations in these scenarios, which is significant in respect of the safety of high rise building occupants.	17	17	10
934	Alternative Energy Systems	If we do not react appropriately to the emerging risks from Lithium Ion Batteries , Battery Energy Storage Systems (BESS) and other decarbonisation initiatives, which may become increasingly given the pace, complexity and scope of change in this area, then we can expect potential compromises in public and firefighter safety which is significant in respect of delivering our statutory duties and managing our reputation.	21	18	12
938	Resilient communication technology	If we fail to design and maintain resilient communication technology as a result of changes within the communications and digital industry and service demand, we can expect disruption to operations and delivery of our statutory duties, which could significantly impact our ability to deliver our core service.	24	24	15
940	Data Analysis Capacity	If we are unable to improve advanced data analysis (including mapping and modelling) capability and capacity, which is likely due to budget available and difficulty recruiting, then we can expect to not have robust evidence and analysis to support the CRMP and other essential projects, and fail to meet the requirements set out in the Data Management Fire Standard and CRMP guidance, which will impact our ability to identify risk and plan our resourcing effectively.	17	17	10



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
941	Productivity Programme Risk	If we don't have the required capacity and capability to deliver the Productivity Programme, the RBFA Efficiency Plan may be at risk as the associated benefits may not be realised.	21	18	8
954	Addressbase Data and Process	If we cannot rely on the accuracy of Addressbase data, which could become likely given existing variances in the accuracy, consistency and maintenance approach to this data, this could leave gaps in our approach to managing risks to the communities we serve, which could in turn result in a failure to meet our statutory duties towards our communities and our staff, as well as prevent us from being able to deliver on our CRMP commitments.	24	22	19
955	IBIS/Community Risk Management Risk	If we continue relying on the in-house community risk management solution (currently IBIS), which is likely in the short term given the amount of resource necessary and time needed to replace this, there is a risk that the solution fails, support resource becomes unavailable, information is poorly entered or missed, all of which would be significant in respect of our protection and prevention duties, staff safety and wellbeing, as well as our productivity and efficiency commitments.	22	22	1



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.	21	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

C	Project complete
G	Project on Track
A	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
Health & Safety 13/12/2022	2022: HS:2 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.	31/12/2023	Medium	G
Progress: 3.4.24 19 personnel cert expired, 53 due refresh 2024-25, refreshers planned each 1/4. 18 to complete MS initial, aim to run courses by the end of Q2. 14/08/24 40 have completed since Jan 2024 with 8 of those in Q1.				
Health & Safety 13/12/2022	2022: HS:6 We will introduce lessons learned in the quarterly meetings to the Health and Safety Committee and cascade the information to employees.	31/12/2023	Low	C
Progress: Amended review date 31/1/24. A new way of presenting the information at HSWC is being developed, including lessons learned. Ready for Q3 reporting in January. This is now in place.				
Facilities Management 10/03/2023	2022: FM2b We will ensure all overdue works are picked up and completed work certificates are saved within the shared drive.	30/04/2023	Medium	C
Progress: Overdue works are monitored and chased with contractors and reviewed on contractor meetings. All worksheets / certificates are filed and saved in the Facilities files and contractor portal systems.				
Facilities Management 10/03/2023	2022: FM3a We will ensure that the Pre Planned Maintenance (PMM) is formally reviewed and monitored with progress notes and actions recorded against the PPM.	30/04/2023	Low	G
Progress: A new review of PPMs processes are currently in discussion for easy access to obtain information. PPMs are on the portals of our contractors that can be pulled into a report. Ongoing work for smaller contractors is ongoing.				



Facilities Management 10/03/2023	2022: FM6 We will ensure that defects are appropriately monitored, tracked and implemented in accordance with the prioritisation schedule where possible.	30/04/2023	Medium	G
Progress: Defects are monitored by triage process, tracked and monitored throughout. A new process document is to be created for easy access to obtain information. This can now be closed, Weekly reports are obtained and updated on firewatch.				
Facilities Management 10/03/2023	2023: FM7 We will ensure that a sustainability plan is developed to identify and plan ways to embed sustainability in the Facilities Department.	31/07/2023	Low	G
Progress: Superseded by wider sustainability strategy development work which aims to ensure a holistic approach is taken by the Service rather than just the FM dept. Draft strategy presented to SLT, plan to get it endorsed at the Management Committee on 8/10.				
Risk Management and Governance 09/06/2023	2022: RAG: 2 We will ensure the risk management training is completed at all required levels. A method to monitor compliance regarding training completion will be introduced.	31/10/2023	Medium	G
Progress: RDP have reviewed the list of those that are required to carry out the training and the LMS package and will shortly be sending out a reminder and will monitor quarterly.				
Community Risk Management Plan 15/10/2023	2023: CRMP: 1 We will develop policies and procedures relating to the CRMP in accordance with NFCC guidance. These will be made available to staff and form part of a regular review.	31/01/2024	Low	G
Progress: Policy has been drafted and is currently being reviewed to ensure that all areas have been covered.				
Community Risk Management Plan 15/10/2023	2023: CRMP: 2 We will utilise a risk scoring matrix that quantifies the likelihood and consequence and ensure the project tracker is complete with risks for the CRMP.	30/08/2024	Medium	A
Progress: This work has been delayed by the departure of the SM CRMP to another service. Work has commenced on assessing the impact to People, Place, Environment, Economy. This will support the development of the scoring matrix for each risk.				
GDPR 11/01/24	2024: GDPR: 1 The Service will update the Data Flow Maps to cover the missing areas identified in the audit. In addition, Maps will be centrally tracked to ensure they remain up to date.	31/03/24	High	A
Progress: A new template that aligns with the ICO template exists and has been in place since March, with several Data Flow Maps already updated and using the revised template. Outstanding action to complete the move of all Data Flow Maps.				
GDPR 11/01/24	2024: GDPR: 2a The Contracts Register will be updated.	31/03/24	High	C
Progress: Revised contract register has been produced accordingly and reviewed, publication is complete.				
GDPR 11/01/24	2024: GDPR: 2b The Standard Terms of Business will be updated to cover the areas identified in the audit findings.	31/03/24	High	C



	Following this, the Service will ensure that the Standard Terms of Business are utilised for all contracts where there is sharing of personal information.			
Progress: The Standard Terms of Business have been updated, reviewed with Procurement and Information Governance and published accordingly.				
GDPR 11/01/24	2024: GDPR: 3 Relevant policies and procedures will be updated with respect to password management:	31/12/24	Low	C
Progress: All are referenced in the following policies: 'Password Policy' - 'Firewall Policy' - 'Social Media Policy' - 'Anti Virus Policy'.				
GDPR 11/01/24	2024: GDPR: 4a The Records Retention Policy and Document Management Policy and Procedure will be updated.	31/12/24	Low	G
Progress: On track				
GDPR 11/01/24	2024: GDPR: 4b The Records Retention Schedule template will be updated. Following this, the Service will centrally track the Schedules to ensure they remain up to date and complete.	30/06/24	Medium	R
Progress: Due to unforeseen staffing issues, the progress of this item has been delayed. Aiming to complete by August.				
GDPR 11/01/24	2024: GDPR: 6 Formal responsibility will be assigned to a forum for oversight and review of GDPR compliance across the organisation.	30/03/24	Medium	C
Progress: We have agreed the information that needs to be tracked, agreed with our SIRO that numbers and eventually trending can be added to SPB report, in a GDPR Compliance Update. The details have been compiled by our DPO and sent in for the Q1 SPB Update.				
GDPR 11/01/24	2024: GDPR: 7 The Data Protection Policy will be updated.	31/03/24	Low	G
Progress: On track.				
GDPR 11/01/24	2024: GDPR: 8 A review will be undertaken of all Service privacy notices to ensure that they cover all required areas of GDPR in line with ICO guidance	30/06/24	Medium	A
Progress: Due to unforeseen staffing issues, the progress of this item has been delayed. Aiming to complete by August.				
GDPR 11/01/24	2024: GDPR: 9a The Subject Access Request Policy will be updated to cover the areas identified in the audit findings, ensuring that it focuses on all rights under GDPR rather than just the right of access	30/06/24	Medium	A
Progress: Almost all of the policy updates are tied together, one/two decisions are needed before we can complete. Should be complete by end of July.				
GDPR 11/01/24	2024: GDPR: 9b The Subject Access Requests and Data Subject Requests Log will be updated to cover the areas identified in the audit findings.	31/03/24	Low	C
Progress: Completed for the start of this financial year.				



GDPR 11/01/24	2024:GDPR:10a The Service will formally document and agree the lawful bases for the different types of data processed by the organisation. This will include the rationale for the lawful bases as relevant. Subsequently, this will be communicated to relevant staff	30/06/24	Medium	G
Progress: IG determine the lawful basis and we have documented internally what we use. Policy states to engage to engage with IG.				
GDPR 11/01/24	2024: GDPR: 10b The consent management policy and procedure will be updated.	30/06/24	Medium	A
Progress: IG agreed not to have a new policy but to update our Data Protection Policy; Draft policy exists, publication is tied to all the policy updates awaiting the last few things to agreed. End of July new date.				
GDPR 11/01/24	2024: GDPR: 10c The Service will update 'what information a consent request should cover' section of the Consent Policy/Procedure (to be developed as part of the above action).	30/06/24	Medium	A
Progress: FORM updates for consent are currently being reviewed. Revised date end August.				
GDPR 11/01/24	2024: GDPR: 11a The Information Security and Data Breach Policy will update the policy around Data breaches.	31/12/24	Low	G
Progress: On track				
GDPR 11/01/24	2024: GDPR: 11b The Data Breach Log will be updated to cover the areas identified in the audit findings. Following this, the Service will ensure that the Log is fully completed.	30/06/24	Medium	C
Progress: Complete - log has been updated				
Sickness Absence 15/01/24	2024: Sickness Absence: 1 All managers will undertake mandatory sickness absence training which will be monitored and tracked through to completion. We will introduce a cyclical refresher session to keep the staff informed of any changes or updates in the process.	30/09/24	Low	G
Progress: At the end of Q1 107 managers had received some absence management input. Further courses are scheduled for Q2/Q3.				
Sickness Absence 15/01/24	2024: Sickness Absence: 2 We will communicate to line managers the importance of completing the Sickness Self-Certification and Return to Work Interview Forms in a timely manner. We will discuss the right to privacy risk and reiterate that this may be infringed when providing detailed commentary on Fire Watch..	29/02/24	Medium	C
Progress: All middle and supervisory managers have attended a sickness absence refresher workshop.				
Sickness Absence 15/01/24	2024: Sickness Absence: 3 We will monitor compliance with the Sickness Absence Policy and challenge managers where non-compliance is noted.	31/1/24	Medium	C



Progress: Compliance monitored through quarterly sickness audit as BAU for the department.				
IT General Controls 4/7/24	2024: IT General Controls: 1 Management will implement a formal process to track alerts generated by anti-virus solutions to ensure they are actioned by IT in a timely manner by directing alerts to the ticketing system.	31/08/2024	Low	G
Progress: Policy Documents updated. awaiting publication for completion.				
IT General Controls 4/7/24	2024: IT General Controls: 2 Management will implement a formal process to track alerts generated by anti-virus solutions to ensure they are actioned by IT in a timely manner by directing alerts to the ticketing system.	31/08/2024	Medium	C
Progress: We are now using MS365 Defender to provide auto email notifications to all ICT staff. Within the defender portal all actions are saved providing a full audit trail of completed actions against any notifications.				
IT General Controls 4/7/24	2024: IT General Controls: 3 "Management will ensure a formal process is established to perform periodic reviews of the firewall rule base (where there has been no change to firewall rules over a specified period and therefore, no review of rules) and firewall logs. Evidence of formal periodic review will be retained."	31/08/2024	Medium	C
Progress: We review all Firewall rules every 6 months or as/when rules are added amended. This is all recorded on a specific page on the IT/BIS SharePoint page.				
IT General Controls 4/7/24	2024: IT General Controls: 4 Management will ensure the New Starter Form is completed and attached to vFire helpdesk tickets for all new starters.	31/08/2024	Low	G
Progress: Documentation completed awaiting publication.				
IT General Controls 4/7/24	2024: IT General Controls:5 Management will communicate the importance of notifying IT of upcoming leavers in a timely manner via raising a support ticket to ensure leavers' accounts are promptly disabled.	31/07/2024	High	C
Progress:				
IT General Controls 4/7/24	2024: IT General Controls:6 Management will introduce a formal process for the	30/09/2024	Medium	G



	periodic review of user access levels across the organization.			
Progress: Review of permissions occurs Monthly for Admins and with general users anytime there is a change.				
IT General Controls 4/7/24	2024: IT General Controls: 7 Management will ensure the RBFRS ICT Password Policy is updated to reflect the Service's policy on maximum password age. Management will then ensure that the configured password policy is aligned to the documented password policy.	31/07/2024	Medium	C
Progress: Password Ageing removed in line with NFCC guidance, policy updated awaiting publication.				



GDPR Compliance Update

Oversight of GDPR Compliance specifics to comply with audit requirements.

Measure	Q1	Q2	Q3	Q4
<p>Objective: GDPR Training Compliance</p> <p>Monitoring the annual completion of the mandatory Protecting Information Course.</p>	G			
<p>Reports are received from L&D on a quarterly basis to Information Governance (IG) and then IG send departmental reports to Heads of Service on the compliance of their teams.</p> <p>Q1 saw the compliance for RBFPS increase to 80% which is a great achievement on where we were compared to when we were audited at the end of last year – 52%. Target is 90-95% compliance.</p> <p>IG will be working with L&D in the coming weeks to reset the counter as September is currently the annual timeframe for retaking the Protecting Information course.</p>				
<p>Objective: Data Breaches/Near Misses</p> <p>Reporting of data breaches and near misses to include those that are reported to the Information Commissioners Office (ICO).</p>	G			
<p>Overall, in quarter one, 15 Data Breach reports were received. Out of those 15, 9 were confirmed data breaches which were mitigated quickly; 2 were near misses and 4 were not data breaches. None of the breaches required reporting or consultation with the Information Commissioners Office.</p> <p>In IG we are seeing an increase in the number of breaches reported, and are pleased to see that, especially considering staff are logging breaches even when they are not sure. It best to err on the side of caution and let IG reach a determination.</p>				
<p>Objective: Compliance with Data Subject Requests (SARs)</p> <p>Completing the Data Subject Requests (SARs) within the permitted time frames.</p>	G			
<p>Overall, in Q1 we received 5 SARs, and all were completed within the allowable 1-month timeframe, which equates to 100% compliance.</p>				



Objective: Progress with programme of Data Retention audits Having a complete set of published Retention Schedules and keeping them up to date and auditing that data is retained in line with retention schedules.	A			
<p>Q1 – we have 30 Retention Schedules in the Service. 13 of those schedules currently need updating by their respective owners. Departmental Retention Schedule owners will be receiving daily updates for those 13 who are out of date, and IG will continue to work with owners to get all schedules updated and published.</p> <p>We have worked with the Finance Department on the first audit of retention during Q3 last year, which led to 27 bags of confidential waste.</p> <p>Once we have all schedules updated, we will reconvene auditing, although we will do audits for those that have up-to-date retention schedules where time allows.</p>				



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

C	Project complete
G	Project on Track
A	There are issues with the project but these are being managed
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NS	Project not yet due to start

Section One: Effectiveness							
Improvement	Delivered via	Status					
		End 23/24		Q1	Q2	Q3	Q4
Prevention evaluation to better understand benefits	Service Plans (Service Delivery & Collaboration and Policy)	G		G			
Prevention quality assurance	Collaboration and Policy Service Plan	C		G			
Protection quality assurance	Collaboration and Policy Service Plan	C					
Addressing the burden of false alarms	Collaboration and Policy Service Plan	G		G			
Keeping the public informed during ongoing incidents	Corporate Services Service Plan	C					
Effective system to use for learning and debriefs	Collaboration and Policy Service Plan	C					
Post Incident prevention activity	Collaboration and Policy Service Plan	C					
Up to date site specific risk information		C					
MDTs		C					
Response Model		G		G			
Section two: Efficiency							
Improvement	Delivered via	Status					



		End 23/24		Q1	Q2	Q3	Q4
Best use of available technology	ICT Strategy	C					
Productive Workforce		G		G			
Section three: People							
Improvement	Delivered via	Status					
		End 23/24		Q1	Q2	Q3	Q4
Values and behaviours understood and demonstrated	HR & L&D Service Plan	C					
Effective use of competence recording system	HR & L&D Service plan	C					
Effective grievance procedures in place	HR & L&D Service plan	C					
Staff are confident in using feedback mechanisms	Corporate Services Service plan	C					
Process to identify, develop and support high-potential staff and aspiring leaders	HR & L&D Service plan	G		G			
Absence/Attendance procedures		G		G			
Workforce Planning		A		G			
Tools and opportunities to increase diversity		G		G			
Understanding and application of PDRs		G		G			



Fire Standard Implementation Tracking

Key - Project or Action Plan Status

C	Project complete
G	Project on Track
A	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
Standards in progress	1	Emergency Response Driving	Becci Jefferies	Becci Jefferies	C	Feb-21	C	C	C	Implementation Tool fully compliant.
	2	Operational Response - Preparedness	Tom Brandon	Andy Stockwell	C	Feb-21	C	C	A=	Gap analysis completed and final draft being taken to SLT for sign off on the 31st July. Implementation tool will then be populated with actions to be complete. Owners to be agreed.
	3	Operational Response - Competence	Becci Jefferies	Becci Jefferies	C	Feb-21	C	C	G =	Action Plan in progress.
	4	Operational Response - Learning	Jim Powell		C	Feb-21	C	C	C	Action plan completed - moved into BAU. Next steps to determine BAU review cycle
	5	Code of Ethics	Nikki Richards	Lucy Greenway	C	May-21	C	C	G =	Action plan in progress. Last elements of training being worked on.
	6	Community Risk Management Planning	Nikki Richards	Tim Readings	C	May-21	C	C	A=	Re-evaluation being done on the new published CRMP against the fire standard to identify any further actions. Once completed, implementation tool to be updated. In progress, elements of existing gap analysis and implementation



										<p>tool remain relevant as per previous IRMP. Needs significant overhaul however am confident that our evolving CRMP process is aligned to good practice.</p> <p>CRMP Fire Standard gap analysis has been revised. This now needs to feed into an update of the implementation tool.</p>
7	Protection	Dave Crease	Matt Hoult	C	Sep-21	C	C	G=	<p>FS Implementation Tool now populated and pending review by AM P&P 16/07/24.</p>	
8	Prevention	Dave Crease	Matt Hoult	C	Jul-21	C	C	G =	<p>FS Implementation Tool updated and pending review by AM P&P 16/07/24.</p>	
9	Safeguarding	Jim Powell	Darci Hellend	C	Jan-22	C	C	C	<p>Action Plan in completed.</p>	
10	Fire Investigation	Dave Crease	Tim Benham	C	Apr-22	C	C	A=	<p>Business Case delayed until February SLT Meeting in agreement with new AM P&P Dave Crease.</p> <p>Tier 2 Fire Investigation project work is currently on pause until the recommendations and scope of the Thames Valley Forensic Fire Investigation Unit are known from the first-year soft state review.</p>	



										Tier 1 Fire Investigation work in response to the Fire Standard is to be continued by Tim Benham and will be reported into PPAB as per discussions with Dave Crease. This work is in regard to Quality Assurance and Operational Training courses.
11	Emergency Preparedness and Resilience	Jim Powell	Alison Hazelton	C	May-22	C	C	A=		Implementation tool developed. Evidence for some sections to be added by end of April 2024. Resourcing remains an issue in completion of work.
12	Data management	Paul Bremble	Becca Chapman	C	Aug-22	C	C	G=		Gap analysis was postponed until NFCC guidance published. Guidance is now (Jan 2024) available on NFCC website. Gap Analysis approved by SLT in June 2024. Implementation Plan now being written.
13	Leading and Developing People	Wayne Bowcock	Becci Jefferies	C	Dec-22	C	C	G=		Implementation tool setup and actions being progressed
14	Leading the Service	Wayne Bowcock	Becci Jefferies	C	Dec-22	C	C	G=		Initial Gap analysis complete and owners assigned to individual actions. SLT agreed gap analysis and implementation tool being prepared
15	Fire Control	Jim Powell	Simon Harris	G	Mar-23	G =	G=	G=		TVFCS Control Fire Standard will be taken to TVFCS JCG in September 2024 for sign off and



										agreement of activity prioritisation within the TVFCS Service plan
16	Communication & Engagement Consultation	Paul Bremble	Jo Watson	G	Mar-23	C	C	G=	09/07/24 Temporarily on hold while Jo is out of the workplace. Meeting to be booked in with Paul Bremble when she returns. Fire standard published 31st March 2023 and gap analysis. GAP Analysis went to SLT on 14th June and was approved. Implementation tool to be completed by end of Apr 2024.	
17	Internal Governance and Assurance	Paul Bremble	Angela Smith	C	Jun-24	NS	NS	NS	GAP analysis being drafted	
18	Digital and Cyber	Lukasz Wrona		C	Sept-24	NS	NS	NS	Issued 10 th September 2024, GAP analysis has been drafted.	
19	Procurement and Commercial	Conor Byrne		C	Sept-24	NS	NS	NS	Issued 10 th September 2024, GAP analysis has been drafted.	



APPENDICES

Appendix A – Additional Data

Equality, Diversity and Inclusion Data

Measure	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2024/25 YTD	Previous year (23/24) to date	Number of authorised posts at end Q1 2024/25
STAFF IN POST							
Wholetime	367				367	363	373*
On-call	62				62	63	65
Control	41				41	41	39
Green Book	184				184	171	188
Total Number of Staff in Post	654				654	638	665

*363 if you remove x10 resilience firefighters

STAFF TURNOVER

Wholetime	12				12	15
On-call	2				2	5
Control	0				0	0
Green Book	7				7	5
Total Number of Leavers (Heads)	21				21	25
Staff in Post (SIP)	654				654	638
Percentage of Leavers vs. SIP	3.21%				3.21%	3.91%

FEMALE STAFF PERCENTAGE:

Wholetime	7.4%				7.4%	6.1%
On-call	8.1%				8.1%	12.7%
Control	65.9%				65.9%	68.3%
Green Book	60.3%				60.3%	56.7%
Total	25.99%				25.99%	24.29%



ETHNICITY (PERCENTAGE OF STAFF NON WHITE BRITISH):

Wholetime	4.4%				4.4%	3.9%
On-call	9.7%				9.7%	3.2%
Control	9.8%				9.8%	7.3%
Green Book	19.6%				19.6%	14.6%
Total	9.48%				9.48%	6.9%

STAFF ETHNICITY PROFILE:

Ethnicity	Wholetime	On-call	Control	Green Book	All Staff
White British	351	56	37	148	592
Other Ethnicity	16	6	4	36	62
Total	367	62	41	184	654

STAFF AGE PROFILE:

Age Group	Wholetime	On-call	Control	Green Book	Total
25 and Under	27	5	6	18	56
26 - 35	97	19	14	32	162
36 - 45	126	23	8	38	195
46 - 55	103	9	10	55	177
56 - 65	14	6	3	37	60
66 and Over	0	0	0	4	4
Total	367	62	41	184	654

STAFF GENDER PROFILE:

Gender	Wholetime	On-call	Control	Green Book	All Staff
Female	27	5	27	111	170
Male	339	57	14	73	483
Other	1	0	0	0	1
Total	367	62	41	184	654

STAFF DISABILITY PROFILE:

Number of employees who have declared a disability	Q1	Q2	Q3	Q4	2024/25 YTD	n/a New	YTD Q1 23/24
Wholetime	21				21		21
On-Call	0				0		1
Control	2				2		2
Green Book	12				12		7
Total	35				35		31



Appendix B – 2024-25 Areas of Focus

- **People:** We will support our staff by providing a safe and inclusive environment for them to thrive in, building a diverse organisation that is engaged with, and accessible to, our communities.
- **Culture:** We will continue to embed our One Team culture, to ensure it is visible both within and outside the service to inspire trust, confidence and pride amongst our staff and within our communities.
- **Capability:** We will continue to lead and manage RBFRS in accordance with good practice and national professional standards and we will continuously improve, learning from events and holding ourselves to account
- **Collaboration:** We will continue to explore collaboration opportunities to ensure we deliver effective and efficient services to the people we serve.
- **Prevention:** We will reduce the risk to our communities through our partnership duties and prevention education activities, ensuring that our services are accessible to all.
- **Protection:** We will support those with responsibility for premises to understand their duties in ensuring the safety of all people using buildings covered by the [Building Safety Act 2022](#) and [Regulatory Reform \(Fire Safety\) Order 2005](#), whilst ensuring that our services are accessible to all.
- **Response:** We will ensure that our people are trained and resources are located to provide the most effective response and to have a positive impact on incidents in our communities. •
- **Resilience:** We will ensure we are resilient and work with our partners to promote and build resilience in the communities we serve.
- **Sustainability:** We are committed to ensuring that we provide a financially sustainable Service and take meaningful action to help address the climate emergency.



Appendix C – 2024-25 Performance Measures and Definitions

Service Provision

	Measure	2024/25 Target	Definition/ Rationale
1	Number of fire deaths	0	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	31 max	The number of non-fatal casualties requiring hospital treatment that occur as a result of a fire. The target is a 10% reduction on the five-year average.
3	Number of deliberate primary fires	125 max	The total number of primary fires that have been started deliberately. The target is a 5% reduction on the five-year average.
4	Number of deliberate secondary fires	233 max	The total number of secondary fires that have been started deliberately. The target is a 5% reduction on the five-year average.
Prevention			
5	Increase the number of Referrals for Safe and Well Visits received from our partners	10%	We 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	100%	Safe and Well Referrals are risk assessed, with each category of risk having an expected timescale for completion. Cases where there is a threat of arson are the highest risk.
7	Percentage of Very High-Risk Safe and Well Referrals completed within 72 hours	40%	Safe and Well Referrals are risk assessed, with each category of risk having an expected timescale for completion. Very High-Risk referrals have a timescale of 72 hours. Over the duration of the CRMP period (2023 to 2027) we aim to bring the proportion completed in timescale up to 50%
8	Percentage of High Risk Safe and Well Referrals completed within 14 days	57%	Safe and Well Referrals are risk assessed, with each category of risk having an expected timescale for completion. High-Risk referrals have a timescale time of 14 days.



			Over the duration of the CRMP period (2023 to 2027) we aim to bring the proportion completed in timescale up to 70%
Protection			
9	Percentage of Fire Safety Audits of premises identified as High or Very High Risk in our Risk-Based Inspection Programme completed in timescale.	monitor	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	60% max	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. If we are successfully targeting our resources at the riskiest properties, we would expect to see a high percentage that are not 'Broadly Compliant'.
11	Percentage success when cases go to court	80%	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	95%	Statutory fire consultations have a legally defined timeframe in which they must be completed. Types of consultation include licensing and building regulations.
Response			
13	Percentage of occasions where the first fire engine arrives at an emergency incident within 10 minutes from time the emergency call was answered	75%	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 incident. We aim to attend 75% of emergency incidents in under 10 minutes.
14	Percentage of wholetime frontline pumping appliance availability	97.4%	This measure shows the percentage of time that our wholetime pumping appliances are available for mobilisation. Reasons for unavailability include mechanical defects and crewing.



15	Percentage of hours where there is adequate crewing on on-call frontline pumping appliances (based on 24/7 crewing)	50%	This is the percentage of hours where there are sufficient 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.
16	Percentage of time that 14 or more pumping appliances are available	100%	This monitors our CRMP commitment to ensure a minimum of 14 pumping appliances are available and includes wholtime and on-call appliances.
Resilience			
17	Percentage of visits to Very High, High and Medium Operational Risk sites completed in timescale	100%	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.
18	Number of Service Delivery Hub exercises completed	12	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.
Efficiency			
19	Percentage of Automatic Fire Alarm calls where RBFRS did not attend	30% (min)	In some circumstances we are able to seek confirmation before attending an Automatic Fire Alarm Call, enabling us to be more efficient.
Customer Experience			
20	Percentage of respondents experiencing a domestic fire satisfied with the service received	100%	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 respondents experiencing a commercial fire satisfied with the service received	95%	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 Fire Safety Audit service they received	90%	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	Percentage of respondents satisfied with the Safe and Well service received	100%	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	Monitor	The number of complaints made to RBFRS about any aspect of our service or staff.
25	Number of compliments received	Monitor	The number of compliments received by RBFRS about any aspect of our service or staff.



Corporate Health

	Measure	2024-25 Target	Definition/ Rationale
Human Resources and Learning & Development			
25	Percentage of working time lost to sickness across all staff groups	5%	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.
26	Percentage of eligible staff with Personal Development Reviews	100%	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.
27	Number of formal grievances	Monitor	The number of formal grievances raised by staff under the Grievance, Bullying and Harassment Policy.
Health and Safety			
28	Number of RIDDOR accidents and diseases	Max 4	RIDDOR (Reporting of Injuries Diseases and Dangerous Occurrences Regulations) are more serious injury accidents and diseases.
Finance and Procurement			
29	Percentage of spend subject to competition	85%	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.
30	Compliant spend as a percentage of overall spend	100%	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).
Freedom of Information			



31	Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act, Environmental Regulations or Data Protection Legislation)	0	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).
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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	
BA	Breathing Apparatus	
BAU	Business As Usual	
BCF	Behavioural Competency Framework	
BFBC	Bracknell Forest Borough Council	
BME	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	
COMAH	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	



HMEPA	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-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	
OTB	Over the Border	
OTP	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 Attributes	
PRF	Personal Record File	
PSAA	Public Sector Audit Appointments	
PSO	Programme Support Office	
QCF	Qualifications Credit 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 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	
SIRO	Senior Information Risk Officer	
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 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 22	Station 22 – Theale	Wholetime
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)	



Appendix E – Home Office Incident Type Definitions

Primary fires are potentially more serious 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
- any fire involving fatalities, casualties or rescues
- any fire attended by five or more pumping appliances

Primary fires are split into four sub-categories:

- **Dwelling fires** are fires in properties that are a place of residence i.e. places occupied by households such as houses and flats, excluding hotels/hostels and residential institutions; dwellings also includes non-permanent structures used solely as a dwelling, such as houseboats and caravans
- **Other buildings fires** are fires in other residential or non-residential buildings; other (institutional) residential buildings include properties such as hostels/hotels/B&Bs, nursing/care homes, student halls of residence etc; non-residential buildings include properties such as offices, shops, factories, warehouses, restaurants, public buildings, religious buildings etc
- **Road vehicle fires** are fires in vehicles used for transportation, such as cars, vans, buses/coaches, motorcycles, lorries/HGVs etc; 'Road vehicles' does not include aircraft, boats or trains, which are categorised in 'other outdoors'
- **Other outdoors fires** are fires in either primary outdoor locations (that is, aircraft, boats, trains and outdoor structures such as post or telephone boxes, bridges, tunnels etc.), or fires in non-primary outdoor locations that have casualties or five or more pumping appliances attending

Purpose-built flat/maisonette fires are split into three sub-categories:

- fires in purpose-built low-rise (1-3 storeys) flats
- fires in purpose-built medium-rise (4-9 storeys) flats
- fires in purpose-built high-rise (10+ storeys) flats

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.

Chimney fires are fires in buildings where the flame was contained within the chimney structure and did not involve casualties, rescues or attendance by five or more pumping appliances. Chimneys in industrial buildings are not included and are included under primary fires.

Accidental fires include those where the motive for the fire was presumed to be either accidental or not known (or unspecified).




Deliberate fires include those where the motive for the fire was ‘thought to be’ or ‘suspected to be’ deliberate. This includes fires to an individual’s own property, others’ property or property of an unknown owner. Despite deliberate fire records including arson, deliberate fires are not the same as arson. Arson is defined under the Criminal Damage Act of 1971 as ‘an act of attempting to destroy or damage property, and/or in doing so, to endanger life’.

Late fire calls are fires attended by an FRS which were known to be extinguished when the call was made (or to which no call was made) and the fire came to the attention of the FRS by other means (e.g. press report or inquest). Such fires are recorded if an attendance is made (even if for inspection only) but are not recorded if no attendance is made.

Fatal fires are those that result in at least one fatality that would not have otherwise occurred had there not been a fire.

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FIRE AND RESCUE SERVICE

-  RoyalBerksFRS
-  @RBFRSOfficial
-  RoyalBerkshireFire
-  Royal Berkshire Fire & Rescue Service
-  rbfrs.co.uk