



# Quarterly Performance Report

Q3 2024-2025 October - December





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## Contact Us

### Accessibility

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### 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](http://rbfrs.co.uk)

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

 Call us: 0118 945 2888

 Write to us at: Newsham Court, Pincent's Kiln, Calcot, Reading, Berkshire, RG31 7SD



## Introduction

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

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 Three Summary



1,767

Total number of emergency incidents in Berkshire



73.2%

% of occasions we responded to emergency incidents within 10 minutes



4.8%

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



79.1%

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



9

Number of complaints received



7.7%

% of working time lost to staff sickness across all groups



100%

Compliant spend as a % of overall spend





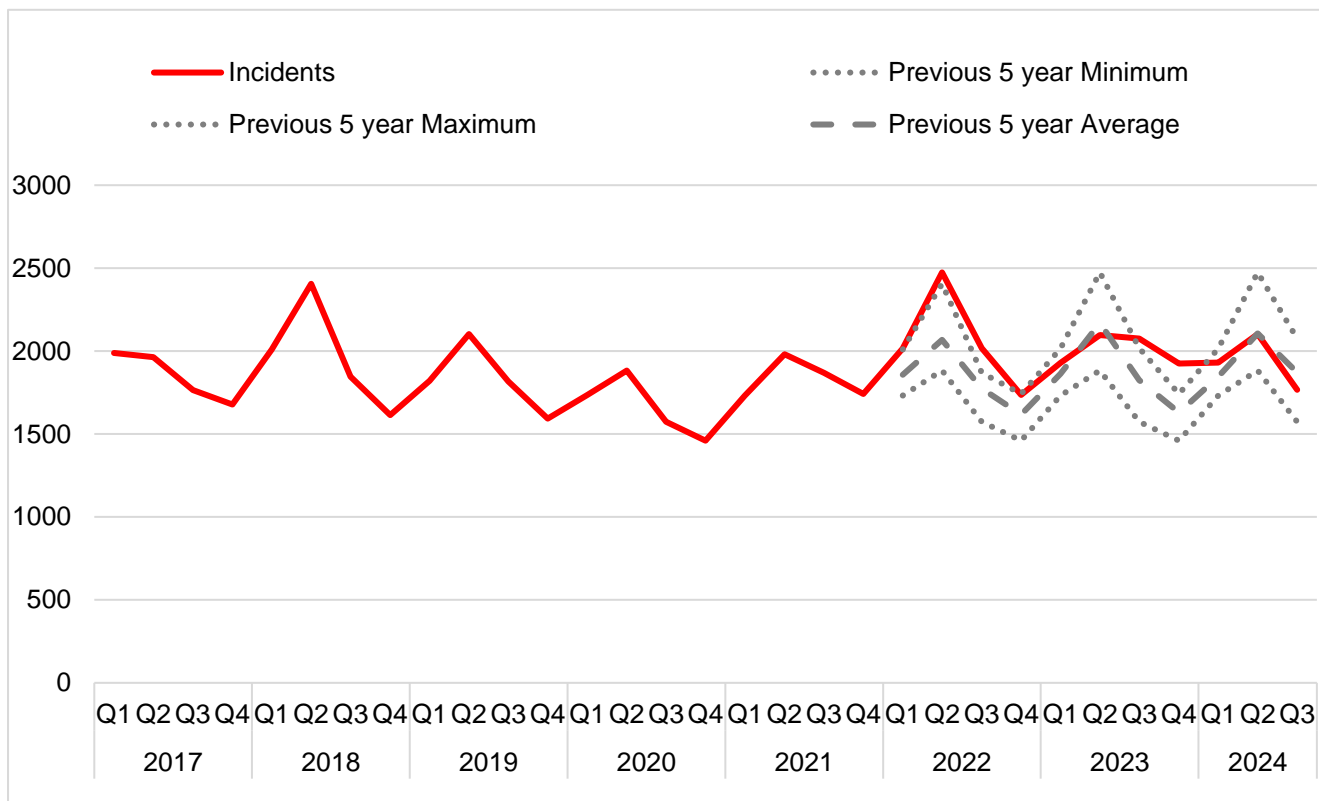
## Quadrant One – Service Provision

### Incident Trends

We responded to 1,767 emergency incidents in Berkshire in Quarter 3 2024/25, a reduction in the number of incidents from the same period last year.

The chart below shows the trend in incidents over time. For the most recent quarters it 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.

### Total Number of Incidents



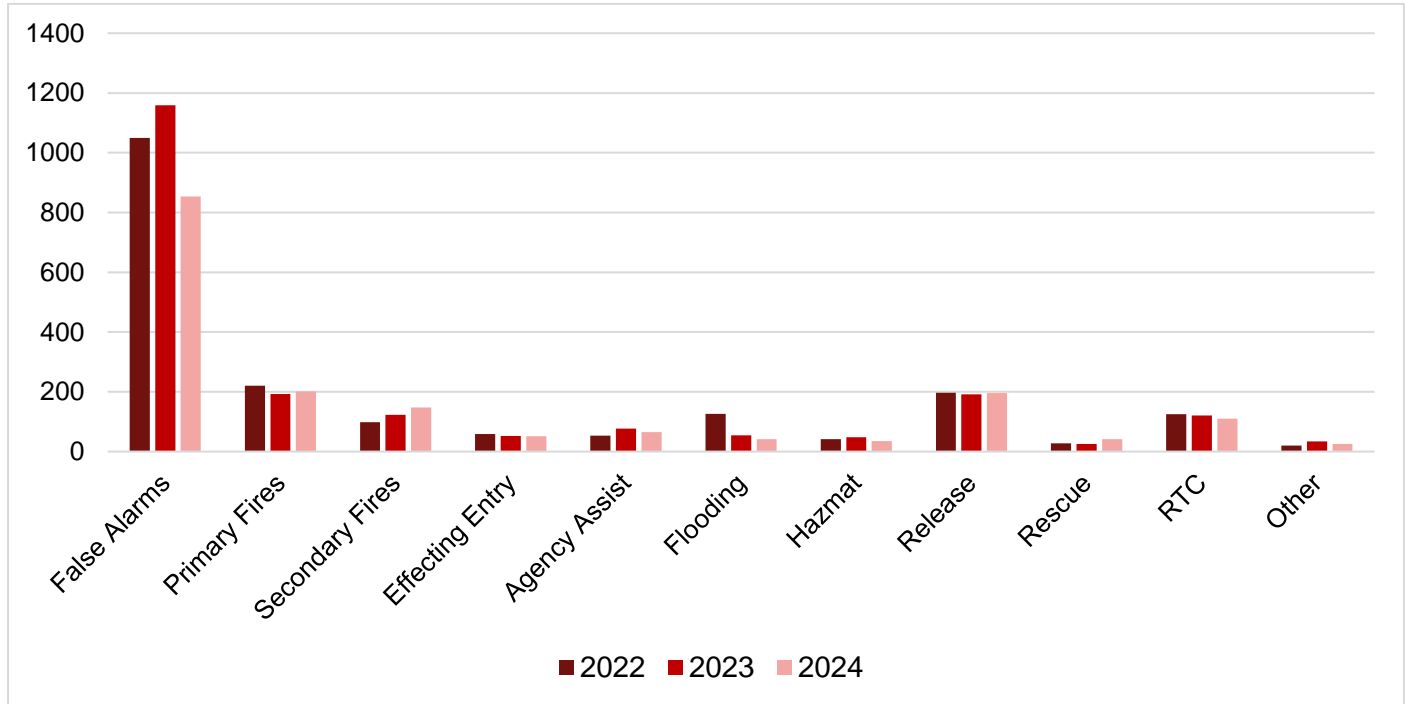
The number of incidents in Quarter 3 is very similar to the five-year average for this time of year, showing a similar pattern of a fall in incident numbers.





The chart below shows the breakdown of incident types attended, noting a fall in the number of False Alarms attended. The new Automatic Fire Alarm (AFA) policy was introduced on 20<sup>th</sup> September 2024 to focus resources more efficiently. The impact already indicates attendance to fewer false alarm incidents. A comprehensive evaluation plan is in place to look at the impact of the new policy in more detail over the next two years.

### Total Incidents Attended by type





## Service Provision Data Summary

<b>Overall Measures</b>					
<b>1. Number of Fire Deaths</b>			<b>2024/25 Target: 0</b>		
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	2	1	0	1	3
Target (max)	0	0	0	0	0
2024/25 Actual	1 ↑	1 ↔	0 ↔		2 ↑
Year-to-date there have sadly been 2 fire fatalities recorded. In Q3, no fire related fatalities.					
<b>2. Number of non-fatal fire casualties</b>			<b>2024/25 Target: 31 max.</b>		
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	7	16	8	7	31
Target (max)	7	8	8	8	23
2024/25 Actual	17 ↓	15 ↑	11 ↓		43 ↓
<p>The number of non-fatal casualties decreased compared to Q1 and Q2, however Q3 exceeded targets for both the quarter and year-to-date.</p> <p>Kitchen fires presented as the main cause of fire-related injury in Q3 for 6 of 11 casualties. Whilst no incident resulted in life changing injury, cooking is clearly the biggest ignition risk in domestic homes. This has been flagged to prevention managers to monitor and address.</p> <p>Incidents resulting in injuries were followed up with appropriate post-fire prevention activities, often involving a joint response between prevention teams and frontline crews. Prevention managers continually monitor these activities to ensure that any opportunity to engage with the community after an incident is utilised to provide reassurance and advice.</p>					



3. Number of deliberate Primary Fires				2024/25 Target: 135 max.	
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	20	26	25	29	71
Target (max)	31	31	31	32	93
2024/25 Actual	21 ↓	26 ↔	19 ↑		66 ↑

Across services, primary deliberate fires, including fatal fires have increasingly been linked to those with complex mental health needs. Internally In response to this, there is a robust process of complex case meetings to reflect the more complex nature of the referrals received.

An upward trend at Q3 has been noted for Reading. Whilst low in numbers, this is being monitored. No clear patterns are currently identified.

An increase was observed in the rough sleeper population causing primary and secondary fires. We are taking actions with significant prevention investment underway, including pioneering efforts to assist and help with the challenges posed by the rough sleeper population. This work is new to the fire sector and lasting positive results in this area are known to be hard to come by.

Prevention teams and partner agencies are working on measures to address these issues. Prevention efforts continue such as with safeguarding, partnership working with Anti-Social Behaviour (ASB), Problem Solving Tasking Group (PSTG), Thames Valley Police (TVP) teams and post-fire prevention activities undertaken where appropriate.

4. Number of deliberate Secondary Fires				2024/25 Target: 233 max.	
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	68	65	39	15	172
Target (max)	77	81	34	41	192
2024/25 Actual	53 ↑	51 ↑	31 ↑		135 ↑

Significant falls in deliberate secondary fire numbers were observed in West Berkshire and Reading, whereas Wokingham saw an increase to 8 incidents when compared to the previous quarter.

Following review, incidents localised to Woodley accounted for almost half of recorded incidents. Partnership working with TVP and PSTG has led to prompt intervention with suspected culprits by TVP. Hub prevention managers attend the Antisocial Behaviour in parks and open spaces meeting, alongside problem solving tasking group meetings and there is close working outside of these meetings with the community safety officer and TVP where necessary. The Rough Sleeping and Youth populations continue to contribute to such fires. Arson awareness boards continue to be placed at hotspots / areas of concern.



**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 Q3
Previous Year (2023/24) % change	18.4%	13.5%	8.6%	-1.4%	13.2%
Target % change	10%	10%	10%	10%	10%
2024/25 Actual Number	1184	1166	1194		3544
2024/25 % change	12.4% ↓	15.9% ↑	4.8 ↓		10.8% ↓

Particular success in Reading has come through ongoing work with the care commissioning team ensure agencies continue to attend Adult at Risk Programmes (ARPs) and refer clients. In West Berkshire there is agreement to focus energy on increasing referrals via several avenues which are currently being implemented.

Focus on Slough continues with work to engage partners, including liaison with Slough’s Community Safety Manager and Chair resulting in RBFRS securing a two-page plan in the Slough Community Safety Plan 2025-2028. Q3 showed some positive signs for Slough with a 4.8% increase in referrals.

**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 Q3
Previous Year (2023/24)	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%
2024/25 Actual	100% ↔	100% ↔	100% ↔		100% ↔

Performance across TOA referrals remains exceptional, with 100% of 21 referrals completed within 48 hours. This reflects the dedication and commitment from the Safeguarding Team, Duty Officers, Safe and Well Technicians and Crews to provide an efficient response supporting victims to keep safe throughout Berkshire.

This measure excludes referrals where visit in response to a Threat of Arson is documented as not possible within that timeframe, e.g. where there is a risk to staff/victim, not appropriate to attend in marked vehicles, victim suggested a safer date. A total of 25 Threat of Arson referrals were completed in Q3. Of these, three visits followed arson-related incidents and 22 referrals from external agencies such as TVP, Probation and Berkshire Women’s Aid. Actions included fitting of additional smoke detection at 10 address and arson proof letterboxes at 18 properties. No incidents have been recorded following the completion of a Threat of Arson Safe and Well Visit at any of the 25 addresses, to date.



7. Percentage of Very High Risk Safe and Well Referrals completed within 72 hours					2024/25 Target: 40%
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	37.5%	49.0%	32.7%	30.2%	40%
Target	40%	40%	40%	40%	40%
2024/25 Actual	31.0% ↓	29.4% ↓	16.2% ↓		24.8% ↓

8. Percentage of High Risk Safe and Well Referrals completed within target time					2024/25 Target: 57%
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	43.1%	52.5%	52.2%	52.6%	49.3%
Target	57%	57%	57%	57%	57%
2024/25 Actual	44.3% ↑	43.1% ↓	48.1% ↓		43.7% ↓

In most cases where visits not completed by the target deadline, this was at the request of the recipients themselves – e.g. requesting alternate visit dates to allow family members or support workers to attend, if not for declining visits entirely.

Slough, Windsor and Maidenhead and Bracknell Forest completed no Very High Risk referrals in timescale, a total small number of 7 referrals was received across the unitaries. All 7 were contacted within the required time scales but attended outside of time scale at the request of the recipient. These measures do not exclude referrals from the total count even where the recipient has requested a visit is completed outside the target timescale.

In Bracknell Forest, positive examples of cross departmental working saw a proportion of visits allocated to crews. Safe and Well performance will continue to be scrutinised in detail internally to ensure all opportunities to complete safe and well visits within the required timeframes are considered.



**Protection Measures**

**9. Percentage of Fire Safety Audits of premises identified as High or Very High Risk in our Risk-Based Inspection Programme completed in timescale. 2024/25 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	-	-	-	-	-
Target	-	-	-	-	-
2024/25 Actual	-	22.4%*	10.4%		15.0%

\*The due dates and targets were set for this measure in July, hence reporting commences from Q2.

To date, as per September and December the number is weighted to activity at the end of the quarters. The number completed in timescale will be monitored. An increased focus to address the risk posed by High-Rise Residential Buildings (HRRBs) requiring remediation has created challenges in balancing work priorities with the Risk-Based Inspection Programme (RBIP) and case management for the Business Safety Regulator. This reactive work and these factors has limited the level of activity addressing the Risk-Based Inspection Programme. A new risk will also be added to the risk register to reflect this.

Mentoring rotas have been established to ensure qualified staff work with those in development to address the RBIP.

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

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	69.6%	62.4%	65.3%	76.1%	66%
Target	60%	60%	60%	60%	60%
2024/25 Actual	75.1% ↓	78.9% ↓	79.1% ↓		77.5% ↓

\*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.

Q3 has continued the trend of high numbers of broadly compliant results from fire safety inspections. The prime reason for this is the high development profile of our inspectors that creates a bias towards simple premises.

In Q2 and Q3 the Protection Teams have and continue to experience capacity issues. Several staff will become competent in April 2025, increasing capacity and resilience across various areas of work, notably to address the different types of premises.

Premises being proactively inspected from the RBIP because they are scored as "very high" and "high", are often returning broadly compliant results. Due to the nature of the risk of the premises and the high frequency of visits they are often well managed and as such are broadly compliant. In addition to the RBIP we are continually monitoring our highest risk buildings in interim measures. These will not feature in audit outcomes as they are ongoing but will likely result in formal action.



<b>11. Percentage success when cases go to court</b>					<b>2024/25 Target: 80%</b>
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	0 cases	0 cases	0 cases	0 cases	0 cases
Target	80%	80%	80%	80%	80%
2024/25 Actual	100% (1 case)	0 cases	0 cases		100% (1 case)
No cases proceeded to court in Q3: one prosecution case open, was adjourned in January due to the defendant taking legal advice. This is expected to move to Q4.					
<b>12. Percentage of Statutory fire consultations completed within the required timeframes</b>					<b>2024/25 Target: 95%</b>
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	97.0%	98.4%	95.5%	96.4%	97%
Target	95%	95%	95%	95%	95%
2024/25 Actual	99.2% ↑	99.6% ↑	95.8% ↑		99.4% ↑
Target has once again been met, with a slight reduction from previous quarters due staff sickness and absence, including family bereavement which affected capacity to complete audits in time. This is not systemic issues, but human factor with an overall proven consistency in meeting and even exceeding target expectation.					





**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 Q3
Previous Year (2023/24)	74.6%	72.9%	71.5%	70.1%	73%
Target	75%	75%	75%	75%	75%
2024/25 Actual	74.7% ↑	68.5% ↓	73.2 ↑		72.0% ↓

Planned operational training can reduce cover on station grounds, leading to response time failures with appliances travelling across station grounds and has been noted also where host appliances are already attending another incident. West Berkshire continues to present our biggest challenge, with extended rural areas presenting longer response times. Low On-call availability in the West also has a direct impact on this.

**14. Percentage of wholetime frontline pumping appliance availability**      **2024/25 Target: 97.4%**

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	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% ↑	95.2% ↓	96.7% ↓		96.5% ↑

It is expected the service shall experience less appliance degradations in Q4 as a result of the 10 additional firefighters, who commenced midway through Q3. This is expected to improve appliance availability and response times. Shortages in specialist qualifications on the Aerial Ladder Platform (ALP) caused a couple of these (with the pump crew having to switch over on to the ALP). Some instances of critical specialist training also resulted in appliances coming off the run on occasion.



<b>15. Percentage of hours where there is adequate crewing on On-call frontline pumping appliances (based on 24/7 crewing)</b>					<b>2024/25 Target: 50%</b>
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	46.5%	38.4%	33.5%	41.5%	39.5%
Target	50%	50%	50%	50%	50%
2024/25 Actual	34.1% ↓	35.5% ↓	24.% ↓		31.4% ↓

The trend continues to be below the collective On-call crewing target, with location and cyclical nature of staffing impacting the levels of On-call availability.

Following retirement of the Watch Manager, Hungerford’s availability was impacted – actions ahead include a temporary appointment of a Watch Manager, Fire Fit and recruitment activities planned for Q4. Lambourn’s availability continues to be challenging similarly, Mortimer has been impacted by the unavailability due to illness. Maidenhead availability in Q3 has struggled to reach double figures, partly due to leave but also due to almost 40% of the station being at the start of their careers.

Forward planning and succession plans are in progress across On-call stations.

<b>16. Percentage of time that 14 or more pumping appliances are available</b>					<b>2024/25 Target: 100%</b>
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	-	-	-	-	-
Target	100%	100%	100%	100%	100%
2024/25 Actual	91.2%	70.1%	82.6%		81.3%

A 12.5% improvement was seen in Q3 from Q2 figures. Despite on call availability being reduced, our overall performance in this area increased significantly from Q2. The reduced On-call availability may have limited the improvements seen to our 14-appliance target. Efforts are underway to improve the On-call crewing picture for Q4.



**Resilience Measures**

<b>17. Percentage of visits to Very High, High and Medium Operational Risk sites completed in timescale</b>						<b>2024/25 Target: 100%</b>
	Q1	Q2	Q3	Q4	Year to Q3	
Previous Year (2023/24)	57.7%	80.0%	83.3%	56.0%	74.6%	
Target	100%	100%	100%	100%	100%	
2024/25 Actual	71.0% ↑	54.7% ↓	57.3% ↓		59.8% ↓	

The overall process of recording and managing Risk Assessments is proving challenging. Consideration is in place to provide assured data capture for crews to include commentary regarding attempted contact or reasons for delays in completing visits. This is under review.

<b>18. Number of Service Delivery Hub exercises completed</b>						<b>2024/25 Target: 12</b>
	Q1	Q2	Q3	Q4	Year to Q3	
Previous Year (2023/24)	4	1	4	3	9	
Target	3	3	3	3	9	
2024/25 Actual	3 ↓	3 ↑	3 ↑		9 ↑	

Service delivery teams, supported by the Operational Learning and Assurance team, plan and deliver exercises aligned to the Annual Exercise Plan. The outcomes of the exercises and the progress against the plan are monitored at the Operational Learning and Assurance Board. The service continues to perform well against this measure overall. Changes have been made to streamline the post exercise debrief process to support completion and timely submission of reports, this change appears to have made a positive impact and will continue to be monitored.

<b>19. Percentage of Automatic Fire Alarm calls where RBFRS did not attend</b>						<b>2024/25 Target: 30% min.</b>
	Q1	Q2	Q3	Q4	Year to Q3	
Previous Year (2023/24)	25.7%	25.8%	24.8%	25.1%	25.4%	
Target (min)	30%	30%	30%	30%	30%	
2024/25 Actual	24.9% ↓	32.7% ↑	51.5% ↑		37.0% ↑	

The percentage of Automatic Fire Alarm (AFA) calls that RBFRS did not attend has remained relatively steady, fluctuating slightly around the 5-year average of 24.3%. This indicates consistent performance over the past five years under the previous policy and captures the impact of the previous policy change in 2022.

The new AFA policy was introduced on 20 September 2024. Following the implementation of the new AFA policy, the percentage of calls where RBFRS did not attend has increased significantly to 51.5%. This represents more than a 100% increase compared to the 5-year average.

The rise in the percentage for Q3 2024 reflects a deliberate and successful effort to focus resources more efficiently, attending fewer false alarms. This indicates improved adherence to policy guidelines and suggests the wider Thames Valley adoption has contributed to effective policy delivery by TVFCS. The new policy appears to have had a positive impact on reducing RBFRS attendance at AFA calls. A comprehensive evaluation plan is in place to look at the impact of the new policy in more detail over the next two years, with formal reporting to Fire Authority at 12 and 24 months.



<b>Customer Experience Measures</b>					
<b>20. Percentage of respondents experiencing a domestic fire satisfied with the service received</b>					<b>2024/25 Target: 100%</b>
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	100%	100%	100%	No returns	100%
Target	100%	100%	100%	100%	100%
2024/25 Actual	100% ↔	100% ↔	100% ↔		100% ↔
<b>21. Percentage of respondents experiencing a commercial fire satisfied with the service received</b>					<b>2024/25 Target: 95%</b>
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	100%	100%	100%	No returns	100%
Target	95%	95%	95%	95%	95%
2024/25 Actual	100% ↔	100% ↔	100% ↔		100% ↔
<b>22. Percentage of respondents satisfied with the Fire Safety Audit service they received</b>					<b>2024/25 Target: 90%</b>
	Q1	Q2 <sup>1</sup>	Q3	Q4	Year to Q3
Previous Year (2023/24)	100%	90.9%	N/A	N/A	94.7%
Target	90%	90%	90%	90%	90%
2024/25 Actual	100% ↔	No responses received	No responses received		100% ↔
<sup>1</sup> The Fire Safety Audit surveys are now conducted via a QR code and an online form.					
<b>23. Percentage of respondents satisfied with the Safe and Well service received</b>					<b>2024/25 Target: 100%</b>
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	100%	100%	98.8%	100%	100%
Target	100%	100%	100%	100%	100%
2024/25 Actual	98.9% ↓↔	100% ↔	100% ↔		99.5% ↓



24. Number of complaints received				2024/25 Target: Monitor	
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	7	6	6	2	19
Target	-	-	-	-	-
2024/25 Actual	1 ↑	6 ↔	9 ↓		16 ↑

Year to date, the service received a total of 16 complaints. In Q3 the reasons for complaint included customer service, operational activity, accountability and accidental damage during an incident.

25. Number of compliments received				2024/25 Target: Monitor	
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	4	4	5	8	13
Target	-	-	-	-	-
2024/25 Actual	7 ↑	12 ↑	10 ↑		29 ↑

Compliment to Safe and Well Technicians:

- 3 (to the same individual)

Compliment to crew(s):

- 5 (following incidents)

Other Compliment:

- 2 (from outside agencies to Business Support)



## Quadrant Two – Corporate Health

### HR Highlights

Both the levels of days lost to sickness and percentage of working time lost to sickness has increased this quarter.

The top three reasons for sickness absence during Q3 were Mental Health, Musculoskeletal (MSK) and Respiratory. All absences increased this quarter apart from Gastro and MSK. Although MSK reduced it remains one of the top three reasons for absence in terms of number of days lost.

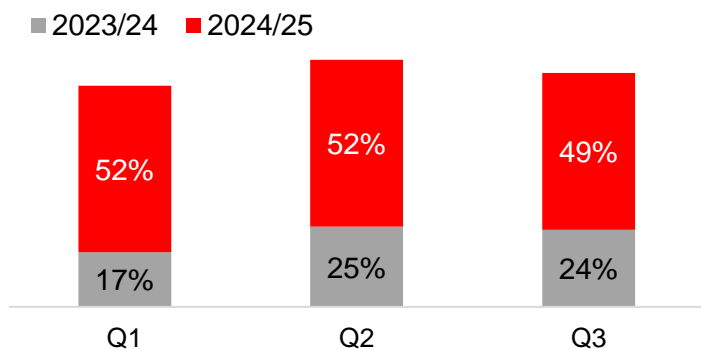
Health Partners (Occupational Health) benchmarking data shows for the rolling 12 months to the end of December 2024, 27% of RBFRS cases related to MSK issues. This compares to 29% for their emergency services clients and 26% across their client base. Both RBFRS and emergency services clients showed a reduction in MSK cases for the same period last year. For RBFRS this reflects the decrease in MSK absence from Q2 and compared to Q3 last year.



## Addressing Sickness Absence

Mental Health Absence continues to increase and accounted for around half of all days lost for sickness absence:

### % Days Lost due to Mental Health<sup>1</sup>



### Employee Relations cases

The volume of Employee Relations cases increased notably in Q3. Year-to-date, Employee Relations cases account for 25% of all mental health days lost.

Health Partners (Occupational Health) benchmarking data shows for the rolling 12 months to the end of December 2024 41% of RBFRS cases related to mental health issues. This compares to 32% for their emergency services clients and 32% across their client base. The gap between RBFRS and other emergency services clients and the client base is widening. This may reflect the number of mental health absences linked to employee relations cases.

Developing a preventative approach – ensuring staff can quickly and easily access support for their mental health - is crucial to managing mental health absence and promoting recovery.

HR continue to support investigating officers to conclude investigations within the specified timeframes - to prevent undue stress arising from a protracted process. To minimise impact to the individual and organisation, actions include:

- » Welfare Officers assigned to staff involved, to ensure they receive appropriate support for their mental health.
- » Mediation is provided as appropriate to expedite the return-to-work on conclusion of cases where relationship challenges are cited.
- » Regular time secured with the lead Occupational Health Physician for case conferences to build supportive return-to-work plans.

<sup>1</sup> out of all sickness absence





## Structured Professional Support (SPS)

The SPS trialled in Q3 and aimed to provide individuals the space to explore any issues - professional or personal that may affect their wellbeing.

- » The trial was available to all flexi-duty officers in a direct response to high levels of mental health absence.
- » Recognising that the nature of work may negatively impact mental health, other high-risk roles were also offered SPS sessions.
- » Through application of stress risk assessments and appropriate rehabilitation plans, issues could be addressed early, to build resilience, protect future wellbeing and to reduce absence.

Early take up has been positive. All those engaged requested a second session. The trial will be evaluated quantitatively and qualitatively to consider further roll out to other high-risk roles.

A number of individuals (12 of 20) absent in Q2 returned to work during Q3 and will be supported to return in a structured and considered manner.

A report on performance – Discipline and Complaints Effectiveness - is provided to the Audit and Governance Committee every six months.



## Revenue Budget – Q3 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 detailed in the **Revenue Position** on page 26 and shows an anticipated surplus of £120,000 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.
- » Station staff salary costs have been less than budgeted for the period, even with the 17 new recruits that joined in February (who went to stations in May), due to the number of leavers and retirements.
- » The 18 new recruits taken on in July have joined stations in November – at which point stations were at establishment (including the crewing buffer of 10 additional firefighters budgeted). The proportion of firefighters in development is higher than in the budget. Overall, there is a forecast net cost savings on station salaries of around £473,000.
- » The overtime budget was set at a lower level, in anticipation that the implementation of Priority Project 6 (of CRMP) and the additional ten firefighter buffer would help lead to reduced overtime. The delay in the implementation of Priority 6, the time taken to recruit additional firefighters and pressure on the overtime budget to cover sickness, firefighters on light duties and additional overtime for training has had an impact on overtime costs. The overtime forecast is showing at £566,000 over budget for the year.
- » On-call stations are currently showing a net negative variance across the county, with a net variance of £92,000, with Lambourn being £38,000 of this amount.
- » The Green book pay award was finalised at an average of 3.38% against the budget of 3.75% - an estimated saving against the budget of £33,000. This is part of the Non-Stations Employee forecast underspend of £58,000, which includes various vacancies, but is partly offset by higher officer overtime.



### **Utilities:**

Reductions in gas and electricity prices are anticipated to save around £26,000 against the original budget. In addition, credits of £25,000 have been received from the water supply company due to corrections to meter readings.

### **Occupational Health:**

Costs are forecast to be £46,000 higher than budget 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:**

The forecast overspend includes internal and external audit costs forecast to be a total of £37,000 higher than budgeted.

### **Pension costs:**

£35,000 higher due to additional Injury award costs.

### **Grants:**

The main variance relates to the Pension Grant to cover additional pension costs, which has come in £87,000 higher than budgeted.

### **Interest receivable:**

We have been able to invest at higher fixed rates with current and anticipated interest from money on deposit forecast to yield around £820,000 for the full year.



## Revenue Position Q3 2024/25

	Annual Budget £'000	Q1, Q2 & Q3 Outturn £'000	Forecast to YE £'000	Fcast - Budget Variance £'000
<b>EMPLOYEES</b>				
STATIONS	20,743	15,420	20,783	40
NON-STATIONS	14,596	10,773	14,538	(58)
TRAINING	776	446	795	19
OTHER	309	248	324	15
	<b>36,424</b>	<b>26,887</b>	<b>36,440</b>	<b>16</b>
<b>PREMISES</b>				
REPAIRS & MAINTENANCE	1,002	702	1,047	45
RATES	968	850	971	3
CLEANING	294	219	304	10
UTILITIES	735	447	684	(51)
	<b>2,999</b>	<b>2,218</b>	<b>3,006</b>	<b>7</b>
<b>SUPPLIES</b>				
INSURANCE	437	437	444	7
EQUIPMENT	646	348	671	25
IS EQUIPMENT & LICENCES	1,003	741	1,048	45
CLOTHING/PPE	373	250	380	7
COMMUNICATIONS	913	661	932	19
OCCUPATIONAL HEALTH	268	227	314	46
PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTIONS	142	108	159	17
COMMUNITY FIRE SAFETY SUPPLIES	149	93	149	0
SUPPLIES OTHER	249	192	267	18
	<b>4,180</b>	<b>3,057</b>	<b>4,364</b>	<b>184</b>
<b>CONTRACTS</b>				
CONTRIBUTION TO TVFCS	1,063	778	1,057	(6)
LEGAL	50	41	51	1
OTHER CONTRACTS (incl. Professional Services)	1,171	703	1,222	51
	<b>2,284</b>	<b>1,522</b>	<b>2,330</b>	<b>46</b>
<b>TRANSPORT</b>				
VEHICLE RUNNING COSTS	796	523	821	25
TRAVEL	232	189	250	18
	<b>1,028</b>	<b>712</b>	<b>1,071</b>	<b>43</b>
<b>PENSIONS</b>				
PENSIONS	518	379	553	35
	<b>518</b>	<b>379</b>	<b>553</b>	<b>35</b>



<b>INCOME</b>				
GRANTS	(1,769)	(1,621)	(1,870)	(101)
RENTAL INCOME	(239)	(167)	(220)	19
TVFCS RECHARGE INCOME	(429)	(322)	(429)	0
INCOME OTHER	(544)	(142)	(553)	(9)
	<b>(2,981)</b>	<b>(2,252)</b>	<b>(3,072)</b>	<b>(91)</b>
<b>NET COST OF SERVICES</b>	<b>44,452</b>	<b>32,523</b>	<b>44,692</b>	<b>240</b>
DEBT CHARGES INTEREST	333	167	333	0
INVESTMENT INTEREST	(467)	(620)	(820)	(353)
REVENUE FUNDING OF CAPITAL	1,847	0	1,847	0
APPROPRIATION TO/(FROM) RESERVES	(751)	0	(751)	0
FINANCING COSTS	550	0	550	0
<b>NET EXPENDITURE</b>	<b>45,964</b>	<b>32,070</b>	<b>45,851</b>	<b>(113)</b>
GOV GRANTS/PRECEPTS	(45,964)	(40,174)	(45,971)	(7)
<b>(SURPLUS)/DEFICIT BEFORE USE OF RESERVES</b>	<b>0</b>	<b>(8,104)</b>	<b>(120)</b>	<b>(120)</b>



## Equality, Diversity and Inclusion Objectives

	End 23/24	Q1	Q2	Q3	Q4
<p><b>Objective: Increasing the diversity of staff at all levels</b></p> <p>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	G	G	
<p>SLT agreed to embed the Summer Internship scheme annually within business-as-usual activity following the successful three-year pilot which completed at the end of in Q2. This marks promising steps to increase our staffing diversity. Success was proven with one of the 2024 interns applying for and securing the Business Support Apprentice role. Previous interns continue to show interest in other roles within RBFRS with applications for roles such as Wholetime and Fire safety, albeit none recruited to date.</p> <p>Wholetime Firefighter recruitment concluded in December 2024. The successful cohort comprised 25% female - compared to 5% of successful candidates for previous intake. For all other groups whether this be individuals with a disability or from an ethnic minority there has been negligible difference.</p> <p>For positive action to support women to progress within the organisation, it was agreed that RBFRS would continuously secure spaces on the Women in the Fire Service (WFS) Leadership Programme and to hold four spaces on the WFS Training and development weekend in Summer 2025.</p> <p>In Q3, 12 Discover a Career as a Firefighter sessions took place. The registration diversity decreased since the introduction of the sessions this time last year. A review of the sessions is planned for the end of Q4 to establish effectiveness. Of successful applicants in December 2024, 33.3% attended Discover a Career as a Firefighter sessions.</p>					
<p><b>Objective: Leadership and corporate commitment</b></p> <p>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	G	G	
<p>Delivery of our purpose and vision has been reviewed. The Culture Plan and framework identify three key values - Safe, Supportive and Inclusive. The Culture Plan sits alongside the CRMP to deliver RBFRS priorities, across different workstreams across the organisation to strive towards a better culture. The Culture Plan is due to be launched more widely in Q4 following the Leadership Forums. A culture edition of the Shout was published as a resource for employees to understand the work that is happening across the organisation to support our culture and drive change.</p>					



EDI (Equality, Diversity and Inclusion) and Cultural Awareness training continues to be rolled out across the workforce. At the end of Q3, 15.7% of staff had completed the training.

In November, members of staff across the service attended the [Asian Fire Service Association](#) AFSA Winter Conference providing the opportunity to bring back learnings and best practice from across the sector to RBFRS.

The EDI Steering Group requires a review to ensure its objectives are being met and there is accountability for EDI related activity in all areas of the organisation.

Equality monitoring data - aligned to new 'answer' options - has been completed by the majority of staff. This will allow us to have a better understanding of the diversity of our staff across the organisation.

In response to changes in legislation with the Workers Protection Act, RBFRS hosted a webinar to inform staff. This noted how to challenge and report sexual harassment in the workplace. In addition, a risk assessment was completed with an action plan to ensure we are adhering to legislation and keeping staff safe.

**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	G	G	
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Stations continue to work towards their new objectives under the [new EDI accountability](#) by creating long term sustainable relationship within their communities. A particular area of focus across the county is reaching those who are not in mainstream education setting and focussing on those that are homeschooled is of particular focus, opening. This provides new routes into community members to of the community to not only display potential careers but provide critical fire safety information's and also career potential.

Addressing loneliness and better connecting communities, Crowthorne continues to host its happiness hubs offering a place to visit for a chat, cup of tea and chat to help community members.

Christmas provided the opportunity to support local charities. Seasonal initiatives to support people this Christmas included delivery of gifts to children at Wexham Park hospital on Christmas Day. The service supported the Homeless Shoe Box appeal this year to continue its relationship alongside Slough Homeless Concern where crews from Slough have been supporting at their evening dinner events throughout the year.

This quarter, the service began opening mass casualty and other exercises to invite the wider community to get involved and build on relationships. This included students from Bracknell College undertaking the Level 3 uniform protective services courses along with makeup and media students from Guildford college.





<p>Progress may still be made in this area to ensure all stations are completing community engagement activity countywide remains a priority. A review of the Red Watch Based Station Manager (WBSM) accountability and objectives set this year will be reviewed in Q4 to evaluate its effectiveness.</p>						
<p><b>Objective: Building on our inclusive culture</b></p> <p>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.</p>		G	G	G	G	
<p>In November, the service sent 4 employees (comprising both green and grey book staff) to the Asian Fire Service Association (AFSA) Winter Conference, with the theme of “Listen and Lead – Cultivating the courage to change through a listening culture”, which focussed on workplace culture in Fire and Rescue Services across the UK.</p> <p>Staff continue to book onto RBFRS EDI and Cultural Awareness training which provides employees with an understanding of EDI, improved cultural awareness and action planning surrounding EDI.</p> <p>Work on our stations and training centre continued. We are on track to ensuring all stations have separate male and female sleeping, washing and sanitary areas and where possible individual occupancy and gender neutral.</p> <p>A Lunch and Learn session hosted by Inclusive Employers was held in October to provide an introduction to neurodiversity and how to support neurodivergent colleagues.</p> <p>RBFRS held its first Women in the Fire Service Coffee morning in December. This open invitation to all staff to attend was formed to identify how we can better support women in the organisation and host events. A committee has been set up as an outcome of this.</p>						

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



## Corporate Health Data Summary

Human Resources and Learning & Development					
26. Percentage of working time lost to sickness across all staff groups					2024/25 Target: 5% max
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	4.0%	4.8%	6.9%	6.3%	5.2%
Target	5.0%	5.0%	5.0%	5.0%	5.0%
2024/25 Actual	5.4% ↓	6.6% ↓	7.7% ↓		5.9% ↓

### Sickness by Contract Type

Wholetime and Control saw an increase this quarter (Wholetime by 19% and Control 16%).

In comparison to the same period last year, sickness days lost has increased for both On-call and Wholetime.

#### Wholetime absence

- » This has increased from 1204 days to 1487 this quarter and is due to Musculoskeletal (MSK), Mental Health, Respiratory and Endocrine increasing. It is 28% higher than the same period last year (1074 days).
- » Mental Health in this staff group has increased again by 10% this quarter and is 79% higher than the same time last year. Days lost continue to increase but the number of episodes has reduced this quarter from 28 to 22 in this absence category. See Mental Health section for more information.
- » Gastro has seen a reduction in this staffing group.

#### On-call absence

- » Reduced this quarter but is higher than the same period last year (by only 4 days).
- » As per Q2, this quarter only saw sickness days lost to 3 headlining categories: MSK, Respiratory and Gastro. There were no Mental Health cases in this staffing group this quarter which is consistent with the same period last year. The reduction is due to both On-call Mental Health cases reported last quarter returning to the workplace within the same period during Q2.

#### Green Book

- » Reduced this quarter but slightly higher than the same period last year where Mental Health, MSK, Respiratory and Gastro were high. Respiratory, Gastro and Viruses have all increased this quarter when compared to Q2.
- » Days lost to Mental Health, decreased again this quarter. Episodes remain the same but only two of the 8 individuals were off last quarter and have since returned to the workplace. 6 new cases opened for Green Book staff this quarter: 3 have returned, 3 remain absent.

#### Control sickness

- » Increased this quarter but lower than the same period last year.
- » Respiratory and skin conditions have seen an increase compared to Q2 but respiratory is lower than last year.
- » Mental Health, Gastro and ENT have seen increases this quarter and higher than last year. Headache has reduced this quarter but lower than last year



## Mental Health

Mental Health sickness days lost increased again this quarter.

Further analysis shows:

- » 49% of all sickness days lost this quarter were Mental Health related.
- » The biggest categories of mental health absence this quarter were work-related stress, depression, anxiety, PTSD and non- work-related stress.
- Wholetime and Control days lost to mental health increased this quarter.

During Q3 the following activities were undertaken against the mental health action plan:

- » Ongoing delivery of Mental Health Awareness (part 2) training – 462 staff have received the training to date.
- » 20 Mental Health First Aiders completed refresher training in December.
- » World Mental Health Day was supported in October.
- » There were two requests for Trauma Support sessions during this quarter, one was delivered. For the other support was offered by other means.

## Musculoskeletal (MSK) Sickness

Musculoskeletal (MSK) sickness days has reduced this quarter.

Further analysis shows:

- » Top three reasons for MSK absence were lower limb, upper limb and back
- » MSK Sickness levels decreased across all contract types apart from Wholetime
- » MSK absence is lower compared to the same quarter last year
- » Seven long term MSK sickness cases and four individuals have returned to the workplace

MSK absence remains one of the top three highest causes of sickness absence, consistent with other Fire and rescue Services.

## Respiratory

An increase in Respiratory sickness this quarter both in terms of episodes and days lost. This is comparable to the same period last year.

## HR Support

In this last quarter face-to-face meetings have been held with employees and managers, including support to complete stress risk assessments. Some mental health cases have been linked to employee relation cases where individuals have returned to work but the impact will be noted in Q4.

Quarterly Hub and TVFCS meetings have taken place. Some follow up meetings were brought forward to keep a close eye on sickness so further discussions can be had to support returns to work. Welfare support is regularly given and signposting to sources of support remains ongoing with regular check ins on individuals who may have been struggling.



**Human Resources and Learning & Development**

<b>27. Percentage of eligible staff with Personal Development Appraisals</b>		<b>2024/25 Target: 100%</b>			
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	62.5%	86.0%	92.0%	94.0%	92.0%
Target	100%	100%	100%	100%	100%
2024/25 Actual	32.0% ↓	76.0% ↓	81% ↓		81% ↓

At Q3 564 staff were eligible to have received a Personal Development Review (PDR) meeting between April and July 2024. The percentage of eligible staff receiving a PDR meeting this quarter is 81% (455 staff). This is a decrease from the same quarter last year (92%).

The deadline for completion of PDR meetings this year was July 2024. Of the meetings that have taken place, 66% (372) of completed PDR forms have been returned to HR. Managers continue to have access to reports to monitor performance locally and HR are contacting Managers on a regular basis to ensure meetings have been recorded accurately and that paperwork has been returned.

88 employees were exempt if they were: new employees, absent from the workplace.

NB: Dual contract employees only require one PDR; they are counted once.

<b>28. Number of formal grievances</b>		<b>2024/25 Target: Monitor</b>			
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	2	3	4	8	9
Target (max)	-	-	-	-	-
2043/25 Actual	5 ↓	11 ↓	4 ↔		20 ↓

Source: Data supplied by HR

In Q3, 4 formal complaints, matched the same period the previous year; year to date this is an increase. No specific rationale for the increase in complaints could be identified. Where actions are identified, these are addressed as appropriate, in a timely manner. An effective Discipline and Grievance action plan continues to be monitored and updated in line with any national recommendations or reports. The next discipline and grievance effectiveness report and analysis will be completed in Q1 (2025/26). A 6 monthly update report analysing the effectiveness of grievance and disciplines is to be presented to Audit and Governance in Q4.

**Health and Safety**

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

Source: Data supplied by Health & Safety



**Finance and Procurement**

**30. Percentage of spend subject to competition**

**2024/25 Target: 85%**

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	80.5%	85.1%	91.6%	87.6%	86.4%
Target	85%	85%	85%	85%	85%
2024/25 Actual	89.9% ↑	91.3% ↑	91.9% ↑		91.0% ↑

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

1. First Product: supply of bespoke bags to store equipment and other items in appliances.
2. 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.
3. The Windsor Leadership – Proprietary leadership course that can only be provided by the supplier to maintain standardised course.

**31. Compliant spend as a percentage of overall spend**

**2024/25 Target: 100%**

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	98.8%	100%	100%	100%	99.6%
Target	100%	100%	100%	100%	100%
2024/25 Actual	100% ↑	100% ↑	100% ↑		100% ↑

Compliant spend met the required target of 100% in Q3

**Freedom of Information**

**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 Q3
Previous Year (2023/24)	0	0	0	0	0
Target	0	0	0	0	0
2024/25 Actual	0 ↔	0 ↔	0 ↔		0 ↔

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

**33. Monitoring the annual completion of the mandatory Protecting Information Course**

**2024/25 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	--	--	--	--	--
Target	95%	95%	95%	95%	95%
2024/25 Actual	60%	71%	68%		66%

Quarterly reporting of compliance with the Protecting Information course is monitored by the quarterly reports received from L&D. The latest figures were sent to Heads of Service at the end of January. Annual reminders were switched on by L&D from 1<sup>st</sup> September 2024 ensuring people will receive a notification when it is time to retake. Compliance is monitored as those receiving 80% and higher on the quiz.



<b>34. Reporting of data breaches and near misses to include those that are reported to the ICO</b>				<b>2024/25 Target: Monitor</b>	
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	--	--	--	--	--
Target	0	0	0	0	0
2024/25 Actual	0	0	0		0
7 breaches were reported during Q3, 4 were near misses, 3 confirmed breaches, none of the 3 met the criteria for reporting to the Information Commissioners Office.					
<b>35. Completing the Data Subject Requests (SARs) within the permitted time frames</b>				<b>2024/25 Target: Monitor</b>	
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	--	--	--	--	--
Target	100%	100%	100%	100%	100%
2024/25 Actual	100%	100%	100%		100%
5 SARs received during Q3, all completed within the specified time permitted.					
<b>36. 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</b>				<b>2024/25 Target: Monitor</b>	
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2023/24)	--	--	--	--	--
Target	100%	100%	100%	100%	100%
2024/25 Actual	57%	63%	60%		60%
There are 8 schedules still in draft, several of which are near publication. 4 of the active schedules are past their review date – Information Governance Officers will chase those that need updating while continuing to work with those Departments who have schedules in draft.					



## 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 to assess progress against the projects and objectives set in our 2024-25 Annual Plan are included under this section for:

- » Community Risk Management Plan (CRMP)
- » People Strategy Reporting
- » Strategic Asset Investment Framework (SAIF)





## Community Risk Management Plan (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.

<b>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.</b>						
	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	G	G		
We will develop our water rescue capability to respond to the impact of climate change.	G	G	G	G		
We will develop our wildfire capability to respond to the impact of climate change.	R	G	A	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	A	A <sup>1</sup>		
Work on alternative energy systems has paused due to a lack of available personnel to undertake the tasks, due to long term sickness absence. It is anticipated that this will be reestablished in Q4.						
<b>Priority 2: We will develop a Risk Based Prevention Programme to target those most vulnerable and at risk from emergency incidents</b>						
	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*	NS*	NS*		
We will continue to work with our partner agencies to ensure high quality referrals for the most vulnerable.	G	G	G	G		
Data and local knowledge in prevention	G	G	G	G		
*Changed to NS from a previous amber due to the conscious decision to manage workloads and prioritise activity.						



<b>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</b>						
	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	G	G		
Undertake a review of the utilisation and resilience of our Flexi Duty Officer arrangements.	R	A	A	G		
Review 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	NS	NS	NS	NS		
Special appliances review	NS	NS	NS	NS		
Learning from the review of flexi duty officer arrangements and the intelligence from the CRMP Evidence Base has been drawn into a new programme of work. A CRMP Priority 3 programme team has been established and will commence work on a review of the RBFRS response model in Q4.						
<b>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</b>						
	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	G	C		



<b>Priority 5: We will develop our Service to reduce the impact of fire safety issues in commercial buildings.</b>						
	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	G	G	
We will evaluate the changes we have made to our call challenge policy and review our response	G		G	G	G	
Sprinklers			G	G	G	
Building Safety Regulator			G	G	G	
New Ways of working			NS	NS	NS	
<b>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</b>						
	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	G	G	



## People Strategy Reporting

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. The People Strategy was published in April 2024. Work is ongoing to structure and shape the delivery plan and the below represents an initial progress review on associated activities.

<b>Objective 1: We are one Team and we all contribute to the delivery of our services to the public, all staff should feel safe to come to work and maintaining public trust and confidence is essential. How we work together is important. We will maintain our zero tolerance to harassment, bullying and we extend that to include victimisation. We will increase ways to make staff feel safe and provide tools and support to help staff to speak out. We will review and further embed the use of behavioral competencies making it easier to understand and more widely use</b>					
	Q1	Q2	Q3	Q4	
Effective grievance and discipline action plan implementation (including Misconduct recommendations)	G	G	G		
Review of performance management processes. Action plan detailing priorities linked to misconduct review	G	G	G		
Establish values and plan for communication and engagement across organisation	G	G	G		
Behavioral competency framework review and implementation. Includes design, engagement, socialisation of new framework	NS	NS	G		
<b>Objective 2: We will seek to attract and retain a professional, talented and diverse workforce. We will work with employees and representative bodies to make our workplaces inclusive for all, ensuring we balance needs of the individual with managing risk to the community.</b>					
	Q1	Q2	Q3	Q4	
Neuro inclusion action plan looking at actions to support neurodivergent staff in all aspects of work	G	G	G		
Disability work with me: Support to individuals with disabilities	G	G	G		
Review of developments and needs to improve recruitment and retention. Review data and information to help inform decisions	G	G	G		
Conduct a review of the current Employee Value Proposition (EVP), gathering data on employee perceptions, benchmarking against sector standards, and developing recommendations to strengthen the EVP	NS	NS	NS		
Direct Entry Scheme provides an alternative route of entry into the role of Station Manager.	NS	NS	NS		



**Objective 3: We will increase the diversity of our operational workforce by 100% in the next three years to better reflect the communities we serve. We recognise that diversity is not just related to gender and ethnicity, we want to improve diversity of thought and experience ensuring we are an inclusive employer for all. This will help improve equality of access to services for all our communities.**

	Q1	Q2	Q3	Q4
Development of a culture dashboard to support RBFRS understand and measure impacts on culture	NS	NS	NS	
Review the EDI objectives to comply with the Public Sector Equality Duty. Conducting consultation with the public and FA approval	NS	NS	NS	
Production of EDI data to support organisational monitoring and decision making	G	G	G	
Sexual harassment awareness within the service of the duty and acceptable behaviours	NS	NS	G	

**Objective 4: We will empower our staff to develop, grow and understand their role in the organisation. We will recognise good performance, and effectively manage poor performance. We will create pathways for career progression for all staff groups and develop tools to manage talent.**

	Q1	Q2	Q3	Q4
Developing Potential Strategy to implement an effective talent management process <sup>1</sup>	G	G	A	
Introduce the Coaching and Mentoring Strategy and associated training	G	G	G	
Create clear pathways for development for key areas such as L&D and green book departments <sup>2</sup>	G	G	A	
Review Development and Assessment Pathways (DAPS) to ensure the structure and output of development and assessment pathway is meeting need, is effective and designed to support development timescales.	NS	NS	NS	
Review the promotion process to ensure that it is fit for purpose	G	G	G	
Redesign PDR process to take account of Behavioural Competency Framework (BCF) changes and embedded and effective.	G	G	G	
Introduce succession planning to ensure better workforce management and development of staff aiding business continuity.	G	G	G	
Reward (recognising performance)	NS	NS	NS	

<sup>1</sup> The Talent Management pilot has concluded, the data and feedback analysis is being collated to inform the findings and recommendations in an evaluation report. This finalisation of this work has been delayed due to absence / capacity across the Resourcing and Development team. Next steps will be informed by the report.

<sup>2</sup> A planned approach has been agreed for the creation of Professional and Support Services Development and Assessment Pathways, work has commenced on DAPs for Prevention roles. Progress on this area of work has been slowed to accommodate other high priority work on the Service Plan because of absence / capacity across the Resourcing and Development team.



<b>Objective 5: We recognise the value of the On-call duty system. We will ensure our process and procedures support the attraction and retention of staff, which will enable us to better manage risk across Berkshire</b>					
	Q1	Q2	Q3	Q4	
On-call working group action plan: review action plan to prioritise work packages to support On-call staff development	G	G	G		
Speed up the process of On-call becoming part of the crew. Review if there is appetite for skills-based mobilising and develop plan	A	A	A		
On-call retention of staff	G	G	G		
<b>Objective 6: We will continue to invest in leadership across the organisation. We will increase opportunities to bring together leaders from across the service to close the gaps and improve levels of trust. We will share leadership experience and learning wisely inside and outside the sector.</b>					
	Q1	Q2	Q3	Q4	
Utilise the engagement opportunities and leadership sessions to support organisational development in line with the Safe, Supportive and Inclusive values. Includes watch/team culture development.	G	G	G		
Consider the leadership development requirements of SLT and develop and discharge a plan	NS	NS	NS		
Leading the Service fire standard analysis to inform action plan	G	G	G		
Leading and Developing People Fire Standard	G	G	G		
Review the leadership provision within RBFRS to ensure effective and meets emerging organisation need	G	G	G		
Assess and determine how visible leadership can be measured. Trusted leadership.	NS	NS	NS		
<b>Objective 7: Developing and maintaining skills and knowledge across our operational workforce is a priority. We will increase the variety of training delivery methods available to make it easier to access resources. We will improve tracking tools for learners and increase capacity to provide greater assurance that learning objectives are being met.</b>					
	Q1	Q2	Q3	Q4	
Officer Training Programme (OTP) Review: Commission new review of OTP and introduce changes agreed through SDS to provide interim solutions and guidance	A	A	A		
Conduct a review of the training programme for On-call to ensure that staff can access the training they need in the quickest time possible.	NS	NS	NS		
Operational competency fire standard action plan	G	G	G		
Initiate a review of how operational training is delivered	G	G	G		
Workforce planning task and finish group and associated action plan	G	G	C		



**Objective 8: Health, Safety and Wellbeing remain a priority for us. We will work with staff, representative bodies and experts, to implement our new Safety, Health and Wellbeing Strategy to deliver safe and healthy people, places and processes.**

	Q1	Q2	Q3	Q4
Health, Safety and Wellbeing Action Plan	G	G	G	
To roll out mental health trauma related training to improve awareness and early interventions	G	G	G	
Review the Trauma Support provision to ensure approach used is still fit for purpose/effective.	NS	NS	NS	
Evaluate data from the Strength Test pilot to determine future practice/requirements	NS	NS	G	
Sickness Working Group action plan	G	G	G	



## 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, training centre and HQ, fleet and equipment, and our ICT systems. All together, they represent a major capital investment programme.

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





Fleet and Equipment						
		Status				
		End 23/24	Q1	Q2	Q3	Q4
Fleet: Appliances	On Track	G	A	A	G	
	On Budget	G	A	A	G	
Fleet: Special Appliances	On Track	G	G	C	C	
	On Budget	G	G	C	C	
Fleet: Other Ancillary Vehicles	On Track	G	G	G	A	
	On Budget	G	G	G	G	
Equipment	On Track	G	G	G	G	
	On Budget	G	G	G	G	

ICT						
		Status				
		End 23/24	Q1	Q2	Q3	Q4
Hardware	On Track	A	G	G	G	
	On Budget	G	G	G	G	
Software	On Track	G	G	A	G	
	On Budget	G	G	A	A	
Networks	On Track	R	A	R	G	
	On Budget	R	A	G	G	
Services	On Track	G	G	G	G	
	On Budget	G	G	A	G	
ESMCP	On Track	R	R	R	R	
	On Budget	R	R	R	R	



## Quadrant Four – Assurance

### Corporate 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.

This section includes:

- » Strategic Risks
- » Service Plan Risks
- » Project Risks

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.

### 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

Quarterly Risks as presented in the following pages were updated end-February 2025.



## Strategic Risks

### Q3 Updates:

- » Risk 798 Environmental/Sustainability: Current risk score **increased** by 1 (17 to 18).
- » Risk 891 FDO numbers, skills & knowledge: Current risk score **increased** by 2 (21 to 23).
- » Risk 879 Organisational Capacity: Current risk score **reduced** by 1 (22 to 21).
- » Risk 931 Industrial Action: Current risk score **reduced** by 3 (21 to 18).
- » **New Risk:** Risk 962 Grenfell Inquiry Recommendations

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 organisational 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 organisational 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	18	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
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	21	13



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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 organisational reputation.	23	23	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
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



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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 therefore 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
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



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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	18	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
962	Grenfell Inquiry Recommendations	If we do not react accordingly to the recommendations from the Grenfell Tower Inquiry and review regional arrangements in line with suggested national standards, which is likely given the ongoing development of the suggested areas we need to review in light of these recommendations, then we can expect to fail to adhere to this national guidance which is significant in respect to both our response to public safety and organisational reputation.	24	21	15





## Service Plan Risks

### Q3 Updates:

- » **New risk:** Risk 943 PSDS sustainability programme requiring more RBFRS funding.
- » **New risk:** Risk 960 Short term loss of power management
- » **Closed risk:** Risk 853 IBIS capability
- » **Closed risk:** Risk 882 Building Safety Regulator
- » **Closed risk:** Risk 903 NILO Resilience

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



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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
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
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



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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
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



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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
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
943	PSDS sustainability programme requiring more RBFRS funding	Unforeseen infrastructure, building fabric or building structural issues leading to insufficient funding within the RBFRS element of the Public Sector Decarbonisation Scheme sustainability programme.	18	20	12
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	10



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
960	Short term loss of power management	If mains power is lost to a site that has no fixed standby power generation, then there is risk that systems will shut down once UPS degrade, and operational capability affected.	20	17	12

### 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.

Audit title and date	Audit Action	Date due (revised if applicable)	Priority	Status
<b>Health &amp; Safety</b> 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
<b>Progress:</b> Progress: 29/10/24 Eight have completed the IOSH MS course during Q2. R&D are currently working on booking in those who need a refresher.				
<b>Facilities Management</b> 10/03/2023	2022: FM3a We will ensure that the Pre-Planned Maintenance (PPM) is formally reviewed and monitored with progress notes and actions recorded against the PPM.	30/04/2023	Low	G
<b>Progress:</b> 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. Estates Manager has now left the service this will be picked back up by the FM.				
<b>Facilities Management</b> 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
<b>Progress:</b> We will ensure that defects are appropriately monitored, tracked and implemented in accordance with the prioritisation schedule where possible.				
<b>Facilities Management</b> 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	C
<b>Progress:</b> 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.				



Audit title and date	Audit Action	Date due (revised if applicable)	Priority	Status
<b>Risk Management and Governance</b> 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	C
<b>Progress:</b> 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.				
<b>Community Risk Management Plan</b> 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
<b>Progress:</b> Policy has been drafted by PB and is being reviewed to ensure all areas have been covered.				
<b>Community Risk Management Plan</b> 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.	30/08/24	Medium	A
<b>Progress:</b> 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.				
<b>GDPR</b> 11/01/2024	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.	31/03/2024	High	C
<b>Progress:</b> A new template that aligns with the ICO template exists and has been in place since March. A process that ensures documents are current exists and IG personnel will assist all departments with their Data Map.				
<b>GDPR</b> 11/01/2024	2024: GDPR: 4a The Records Retention Policy and Document Management Policy and Procedure will be updated.	31/12/2024	Low	G
<b>Progress:</b> On track				





Audit title and date	Audit Action	Date due (revised if applicable)	Priority	Status
GDPR 11/01/2024	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.	30/06/2024	Medium	<b>R</b>
<b>Progress:</b> Unaccepted staffing issues in IG have caused this item slip.				
GDPR 11/01/2024	2024: GDPR: 7 The Data Protection Policy will be updated.	31/03/2024	Low	<b>G</b>
<b>Progress:</b> On track.				
GDPR 11/01/2024	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	30/06/2024	Medium	<b>A</b>
<b>Progress:</b> Due to unforeseen staffing issues, the progress of this item has been delayed. Aiming to complete by August.				
GDPR 11/01/2024	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.	30/06/2024	Medium	<b>G</b>
<b>Progress:</b> IG determine the lawful basis and we have documented internally what we use. Policy states to engage with IG, detail will be added to the Data Protection policy to cover the detail asked by the auditor. Realigning to GDPR 7.				
GDPR 11/01/2024	2024: GDPR: 10b The consent management policy and procedure will be updated.	30/06/2024	Medium	<b>G</b>
<b>Progress:</b> 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. Aligning with the date for GDPR 7.				
GDPR 11/01/2024	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).	30/06/2024	Medium	<b>A</b>





<b>Progress:</b> FORM updates for consent are currently being reviewed. Revised date end August.				
<b>Audit title and date</b>	<b>Audit Action</b>	<b>Date due (revised if applicable)</b>	<b>Priority</b>	<b>Status</b>
<b>GDPR</b> 11/01/2024	2024: GDPR: 11a The Information Security and Data Breach Policy will update the policy around Data breaches.	31/12/2024	Low	<b>C</b>
<b>Progress:</b> On track.				
<b>Sickness Absence</b> 15/01/2024	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.	30/09/2024	Low	<b>G</b>
<b>Progress:</b> At the end of Q1 107 managers had received some absence management input. Further courses are scheduled for Q2/Q3.				
<b>IT General Controls</b> 04/07/2024	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	<b>C</b>
<b>Progress:</b> Policy Documents updated. awaiting publication for completion.				
<b>IT General Controls</b> 04/07/2024	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	<b>G</b>
<b>Progress:</b> Documentation completed awaiting publication.				
<b>IT General Controls</b> 04/07/2024	2024: IT General Controls: 6 Management will introduce a formal process for the periodic review of user access levels across the organisation.	30/09/2024	Medium	<b>C</b>
<b>Progress:</b> Review of permissions occurs Monthly for Admins and with general users anytime there is a change.				
<b>Driving Licence Checks</b> 31/10/24	2024: Driving Licence Checks: 1 Form 144 will be completed, detailing the training requirements for the individual.	30/11/2024	Medium	<b>G</b>



<b>Progress:</b> Awaiting update				
<b>Audit title and date</b>	<b>Audit Action</b>	<b>Date due (revised if applicable)</b>	<b>Priority</b>	<b>Status</b>
<b>Driving Licence Checks</b> 31/10/24	2024: Driving Licence Checks: 3 We will develop a process for sharing compliance and/or the escalation of concerns with driving licence checks and performance with regards to training through existing internal meetings. This will be done on a scheduled basis e.g. quarterly, six monthly.	31/12/2024	Low	<b>G</b>
<b>Progress:</b> Awaiting update				
<b>Driving Licence Check</b> 31/10/24	2024: Driving Licence Checks: 3 We will develop a process for sharing compliance and/or the escalation of concerns with driving licence checks and performance with regards to training through existing internal meetings. This will be done on a scheduled basis e.g. quarterly, six monthly.	31/12/2024	Low	<b>G</b>
<b>Progress:</b> Awaiting update				



## 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 tracked through this report.

Our latest HMICFRS report was published in January 2023.

Actions and progress are below.

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	C		
Prevention quality assurance	Collaboration and Policy Service Plan	C		G	C		
Protection quality assurance	Collaboration and Policy Service Plan	C					
Addressing the burden of false alarms	Collaboration and Policy Service Plan	G		G	C		
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	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	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	G	G	
Absence/Attendance procedures		G		G	C		
Workforce Planning		A		G	G	G	
Tools and opportunities to increase diversity		G		G	G	G	
Understanding and application of PDRs		G		G	G	G	



## Fire Standard Implementation Tracking

### Standards in Progress

	Fire Standard	Owner	Manager	FS consultation	FS publication date	Gap analysis	SLT Review	Action Plan progress
1	Emergency Response Driving	Becci Jefferies	Becci Jefferies	C	Feb-21	C	C	C
2	Operational Response - Preparedness	Tom Brandon	Andy Stockwell	C	Feb-21	C	C	A
3	Operational Response - Competence	Becci Jefferies	Becci Jefferies	C	Feb-21	C	C	G
4	Operational Response - Learning	Jim Powell		C	Feb-21	C	C	C
5	Code of Ethics	Nikki Richards	Lucy Greenway	C	May-21	C	C	G
6	Community Risk Management Planning	Nikki Richards	Tim Readings	C	May-21	C	C	A
7	Protection	Dave Crease	Matt Hout	C	Sep-21	C	C	G
8	Prevention	Dave Crease	Matt Hout	C	Jul-21	C	C	G
9	Safeguarding	Jim Powell	Darci Hellend	C	Jan-22	C	C	C
10	Fire Investigation	Dave Crease	Tim Benham	C	Apr-22	C	C	A
11	Emergency Preparedness and Resilience	Jim Powell	Alison Hazelton	C	May-22	C	C	A



12	Data management	Paul Bremble	Becca Chapman	C	Aug-22	C	C	R
13	Leading and Developing People	Wayne Bowcock	Becci Jefferies	C	Dec-22	C	C	G
14	Leading the Service	Wayne Bowcock	Becci Jefferies	C	Dec-22	C	C	G
15	Fire Control	Jim Powell	Simon Harris	G	Mar-23	G	G	NS
16	Communication & Engagement Consultation	Paul Bremble	Jo Watson	G	Mar-23	C	C	G
17	Internal Governance and Assurance	Paul Bremble	Angela Smith	C	Jun-24	G	C	NS
18	Digital and Cyber	Lukasz Wrona		C	Sep-24	NS	NS	NS
19	Procurement and Commercial	Conor Byrne		C	Sep-24	NS	NS	NS



## APPENDICES

- » Appendix A - Equality, Diversity and Inclusion Data
- » Appendix B - 2024-25 Areas of Focus
- » Appendix C - 2024-25 Performance Measures and Definitions
- » Appendix D - Glossary
- » Appendix E - Home Office Incident Type Definitions



## Appendix A - 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 Q3 2024/25
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### STAFF IN POST

Wholetime	367	381	376		376	360	374 (364 if you remove x10 Resilience FF's)
On-call	62	61	62		62	55	65
Control	41	41	41		41	42	39
Green Book	184	186	190		190	176	197
<b>Total</b>	<b>654</b>	<b>669</b>	<b>669</b>		<b>669</b>	<b>633</b>	<b>675</b>

### STAFF TURNOVER

Wholetime	12	3	7		23	28
On-call	2	2	2		6	16
Control	0	0	0		0	2
Green Book	7	11	4		22	25
Total Number of Leavers (Heads)	21	16	13		50	71
Staff in Post (SIP)	654	669	669		662	635
<b>Percentage of Leavers vs. SIP</b>	<b>3.2%</b>	<b>2.4%</b>	<b>1.9%</b>		<b>7.6%</b>	<b>11.2%</b>

### FEMALE STAFF PERCENTAGE:

Wholetime	7.4%	7.1%	7.2%		7.2%	6.9%
On-call	8.1%	8.2%	8.1%		8.1%	9.1%
Control	65.9%	65.9%	65.9%		65.9%	66.7%
Green Book	60.3%	60.2%	60%		60%	60.2%
<b>Of Total Staff</b>	<b>26.0%</b>	<b>25.5%</b>	<b>25.9%</b>		<b>25.9%</b>	<b>25.9%</b>

### ETHNICITY (PERCENTAGE OF STAFF NON-WHITE BRITISH):

Wholetime	4.4%	4.5%	4.5%		4.5%	4.4%
On-call	9.7%	11.5%	11.3%		11.3%	3.6%
Control	9.8%	9.8%	9.8%		9.8%	7.1%
Green Book	19.6%	19.4%	20%		20%	15.9%
<b>Of Total Staff</b>	<b>9.5%</b>	<b>9.6%</b>	<b>9.9%</b>		<b>9.9%</b>	<b>7.7%</b>





**Staff Ethnicity Profile:**

Ethnicity	Wholetime	On-call	Control	Green Book	Total [All Staff]
White British	359	55	37	152	603
Other Ethnicity	17	7	4	38	66
<b>Total</b>	<b>376</b>	<b>62</b>	<b>41</b>	<b>190</b>	<b>669</b>

**STAFF AGE PROFILE:**

Age Group	Wholetime	On-call	Control	Green Book	Total [All Staff]
25 and Under	29	6	6	21	62
26 - 35	102	19	14	33	168
36 - 45	121	23	8	40	192
46 - 55	111	9	10	56	186
56 - 65	13	5	3	36	57
66 and Over	0	0	0	4	4
<b>Total</b>	<b>376</b>	<b>62</b>	<b>41</b>	<b>190</b>	<b>669</b>

**STAFF GENDER PROFILE:**

Gender	Wholetime	On-call	Control	Green Book	Total [All Staff]
Female	27	5	27	114	173
Male	348	57	14	76	495
Other	1	0	0	0	1
<b>Total</b>	<b>376</b>	<b>62</b>	<b>41</b>	<b>190</b>	<b>669</b>

**STAFF DISABILITY PROFILE:**

Number of employees who have declared a disability	Q1	Q2	Q3	Q4	2024/25 YTD	n/a New	YTD Q2 23/24
Wholetime	21	21	22		22		22
On-Call	0	0	1		1		0
Control	2	2	2		2		2
Green Book	12	13	14		14		10
<b>Total</b>	<b>35</b>	<b>36</b>	<b>39</b>		<b>39</b>		<b>34</b>



## Appendix B - 2024-25 Areas of Focus

In order to achieve the Strategic Commitments we have made to the people of Royal Berkshire, our plan for 2024-2025 sets out how we will achieve these and highlights areas of focus. These are aligned to our overarching principles: Sustainability, Culture, Capability and Risk Management.

### Principle: Culture

- » 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.

### Principle: Capability

- » 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.

### Principle: Risk Management

- » 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.

### Principle: Sustainability

- » 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%	<p>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.</p> <p>Over the duration of the CRMP period (2023 to 2027) we aim to bring the proportion completed in timescale up to 70%</p>
<b>Protection</b>			
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	<p>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.</p>
10	Percentage of Fire Safety Audits with a 'Broadly Compliant' result	60% max	<p>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'.</p>
11	Percentage success when cases go to court	80%	<p>RBFRS prosecute serious cases following Fire Safety Audits. A successful outcome at court is a finding or admission of guilt.</p>
12	Percentage of statutory fire consultations completed within the required timeframes	95%	<p>Statutory fire consultations have a legally defined timeframe in which they must be completed. Types of consultation include licensing and building regulations.</p>



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 wholetime 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.



<b>Corporate Health</b>			
<b>Measure</b>		<b>2024/25 Target</b>	<b>Definition/Rationale</b>
<b>Human Resources and Learning &amp; Development</b>			
26	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.
27	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.
28	Number of formal grievances	Monitor	The number of formal grievances raised by staff under the Grievance, Bullying and Harassment Policy.
<b>Health and Safety</b>			
29	Number of RIDDOR accidents and diseases	Max 4	RIDDOR (Reporting of Injuries Diseases and Dangerous Occurrences Regulations) are more serious injury accidents and diseases.
<b>Finance and Procurement</b>			
30	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.
31	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			
32	Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation (Freedom of Information Act, Environmental Regulations or Data Protection Legislation)	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).
33	Monitoring the annual completion of the mandatory Protecting Information Course	95%	RBFRS are required to adhere to Data Protection and GDPR legislation. How to protect the data we use daily is a responsibility that we are audited on with regards to compliance. This measure monitors quarterly compliance of Service Personnel with passing the Protecting Information Course.
34	Reporting of data breaches and near misses to include those that are reported to the ICO	0	RBFRS are required to conform to Data Protection and GDPR legislation. This measure monitors the reporting of data breaches and near misses, specifically those that are reported to the Information Commissioners Office
35	Completing the Data Subject Requests (SARs) within the permitted time frames	100%	RBFRS are required to adhere to Data Protection and GDPR legislation. This measure monitors completion of Data Subject Requests (SARs) within the permitted timeframe, 1 month, or 2 months with an agreed extension.
36	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	100%	RBFRS are required to conform to Data Protection and GDPR legislation. This measure monitors compliance to having published, accurate Retention Schedules that are kept up to date and in line with our Records Retention and Disposal Policy.





## 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	
BESS	Battery Energy Storage Systems	
BFBC	Bracknell Forest Borough Council	
BME	Black and Minority Ethnic	
BMKFRS	Buckinghamshire & Milton Keynes Fire & Rescue Service	
BPI	Business Process Improvement	
BSR	Building Safety Regulator	
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	
CSP	Community Safety Partnership	
DAPs	Development and Assessment Pathways	
DCFO	Deputy Chief Fire Officer	
DIM	Detection Identification Monitoring	Mobilised from Oxfordshire Fire and Rescue Service
DPA	Data Protection Act	



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



<b>HMICFRS</b>	His Majesty's Inspectorate of Constabulary & Fire and Rescue Services	As at 2019, with context to the HMICFRS Action Plan this read: "Her Majesty's Inspectorate of Constabulary & Fire and Rescue Services"
<b>HMO</b>	House of Multiple Occupancy	
<b>HoS</b>	Head of Service	
<b>HR and L&amp;D</b>	Human Resources and Learning and Development	
<b>HRRBs</b>	High Risk Residential Buildings	
<b>HRU</b>	Heavy Rescue Unit	Attends road traffic collisions of 3 or more cars HGVs
<b>HSE</b>	Health and Safety Executive	
<b>IBIS</b>	Incident & Building Information System	The ICT system where all incident and building information is held.
<b>ICO</b>	Information Commissioner's Office	
<b>ICT</b>	Information Communication Technology	
<b>ICU</b>	Incident Control Unit	Large bus mobilised on 7 pump or more incidents
<b>IEC</b>	Immediate Emergency Care	
<b>IG</b>	Information Governance	
<b>IRMP</b>	Integrated Risk Management Plan	
<b>IRS</b>	Incident Recording System	
<b>ITHC</b>	Information Technology Health Checks	
<b>JESIP</b>	Joint Emergency Services Interoperability Principles	
<b>JO</b>	Junior Officer	
<b>JY</b>	Juliet Yankee	RBFRS call sign in Control for all appliances
<b>L&amp;D</b>	Learning and Development	
<b>L1</b>	Level 1 Officer	Incident Command Level - Crew and Watch Manager
<b>L2</b>	Level 2 Officer	Incident Command Level - Station Manager/Group Manager A
<b>L3</b>	Level 3 Officer	Incident Command Level - Group Manager A & B
<b>L4</b>	Level 4 Officer	Incident Command Level - Area Manager and Principal Officer
<b>LGPS</b>	Local Government Pension Scheme	
<b>LFB</b>	London Fire Brigade	
<b>LGV</b>	Light Goods Vehicle	
<b>LMS</b>	Learning Management System	
<b>LPP</b>	Light Portable Pump	



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



<b>PP&amp;R</b>	Prevention, Protection & Resilience	
<b>PQA</b>	Personal Qualities and Attributes	
<b>PRF</b>	Personal Record File	
<b>PSAA</b>	Public Sector Audit Appointments	
<b>PSO</b>	Programme Support Office	
<b>PSTG</b>	Problem Solving Tasking Group	
<b>QCF</b>	Qualifications Credit Framework	
<b>RA</b>	Risk Assessment	
<b>RBFA</b>	Royal Berkshire Fire Authority	
<b>RBIP</b>	Risk Based Inspection Programme	
<b>RBWM</b>	Royal Borough of Windsor and Maidenhead	
<b>RDS</b>	Retained Duty System	
<b>RIDDOR</b>	Reporting of Injuries Diseases and Dangerous Occurrences Regulations	
<b>RIEPO</b>	Risk Information and Emergency Planning Officer	
<b>RMS</b>	Remotely Managed Stations	
<b>RRT</b>	Risk Reduction Team	
<b>RTC</b>	Road Traffic Collision	
<b>RTW</b>	Return To Work	
<b>S&amp;W</b>	Safe and Well visit	
<b>SAG</b>	Safety Advisory Group	
<b>SAIF</b>	Strategic Asset Investment Framework	
<b>SARs</b>	Subject Access Requests	Data subject requests
<b>SCAS</b>	South Central Ambulance Service	
<b>SCC</b>	Strategic Command Centre	
<b>SCG</b>	Strategic Coordinating Group	
<b>SDMT</b>	Service Delivery Management Team	
<b>SECTU</b>	South East Counter Terrorism Unit	
<b>SIRO</b>	Senior Information Responsible Officer	
<b>SJCC</b>	Staff Joint Consultative Committee	
<b>SLT</b>	Senior Leadership Team	
<b>SM</b>	Station Manager	
<b>SPB</b>	Strategic Performance Board	
<b>SPS</b>	Structured Professional Support	
<b>Stn 1</b>	Station 1 – Caversham Road	Wholetime
<b>Stn 2</b>	Station 2 – Wokingham Road	Wholetime
<b>Stn 3</b>	Station 3 – Dee Road	Station closed in 2021
<b>Stn 4</b>	Station 4 - Newbury	Wholetime
<b>Stn 5</b>	Station 5 - Hungerford	Retained (On Call)
<b>Stn 6</b>	Station 6 - Lambourn	Retained (On Call)
<b>Stn 7</b>	Station 7 – Pangbourne	Station closed in 2021
<b>Stn 9</b>	Station 9 – Wargrave	Station closed in 2020
<b>Stn 10</b>	Station 10 – Wokingham	Wholetime



<b>Stn 11</b>	Station 11 – Mortimer	Retained (On Call)
<b>Stn 14</b>	Station 14 – Ascot	Satellite Station (24 hours per day, 7 days per week)
<b>Stn 15</b>	Station 15 – Crowthorne	Retained (On Call)
<b>Stn 16</b>	Station 16 – Bracknell	Wholetime
<b>Stn 17</b>	Station 17 – Slough	Wholetime
<b>Stn 18</b>	Station 18 – Langley	Wholetime
<b>Stn 19</b>	Station 19 – Maidenhead	Wholetime
<b>Stn 20</b>	Station 20 – Whitley Wood	Wholetime
<b>Stn 21</b>	Station 21 – Windsor	Satellite Station (24 hours per day, 7 days per week)
<b>Stn 22</b>	Station 22 – Theale	Wholetime
<b>TCG</b>	Tactical Coordinating Group	
<b>TCR</b>	Training Course Request	
<b>TIC</b>	Thermal Image Camera	
<b>TOA</b>	Threat of Arson	
<b>TRI</b>	Training Records Indicator	
<b>TVFCS</b>	Thames Valley Fire Control Service	
<b>TVP</b>	Thames Valley Police	
<b>UA</b>	Unitary Authority	
<b>USAR</b>	Urban Search and Rescue	
<b>WAH</b>	Working at Height	
<b>WBDC</b>	West Berkshire District Council	
<b>WDS</b>	Wholetime Duty System	
<b>WBSM</b>	Watch Based Station Manager	
<b>WM</b>	Watch Manager	
<b>WRT</b>	Water Rescue Team	
<b>WT</b>	Wholetime	
<b>WYPF</b>	West Yorkshire Pension Fund	



## 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 include 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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