



# Quarterly Performance Report

Q2 2025-2026 July – September





## Contact Us

### 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](https://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, Pincents Kiln, Calcot, Reading, Berkshire, RG31 7SD

### Accessibility

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



# Contents

<b>Introduction</b>	<b>5</b>
» About Us	5
» Our Commitments	6
» Key to Colours, Status, Ratings and Symbols	8
<b>Quadrant One – Service Provision</b>	<b>9</b>
» Service Provision Summary	10
» Incident Trends	11
» Corporate Measures: Service Provision Data Summary	13
<b>Quadrant Two – Corporate Health</b>	<b>21</b>
» Corporate Health Summary	21
» HR Support for Staff	22
» Benchmarking Data	23
» Corporate Measures: Corporate Health Data Summary	24
» Revenue Budget & Position	29
» Forecast revenue outturn - Revenue Position Quarter 2 2025/26	31
» Equality, Diversity and Inclusion Objectives	33
<b>Quadrant Three – Priority Programmes</b>	<b>35</b>
» Community Risk Management Plan	36
» Culture Plan	40
» Strategic Asset Investment Framework	48



---

<b>Quadrant Four – Assurance .....</b>	<b>50</b>
>> Corporate Risk Register .....	51
>> Audit Plan .....	62
>> HMICFRS Action Plan .....	67
>> Fire Standard Implementation Tracking.....	68
<b>Appendices .....</b>	<b>69</b>
>> Appendix A - Home Office Incident Type Definitions .....	70
>> Appendix B - Performance Measures and Definitions .....	72
>> Appendix C - Equality, Diversity and Inclusion Data .....	78
>> Appendix D - Glossary.....	81



# Introduction

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

## About Us

Royal Berkshire Fire Authority (RBFA) is a combined fire authority, from six unitary authorities within Royal Berkshire (Bracknell Forest, Reading, Royal Borough of Windsor and Maidenhead, Slough, West Berkshire and Wokingham). It is the responsibility of RBFA to provide an effective and efficient fire and rescue service for communities across Berkshire.

Royal Berkshire Fire and Rescue Service (RBFRS) provides services across the County of Berkshire.

Our [Annual Plan](#) 2025-26 highlighted areas of focus in order to achieve the Strategic Commitments made to the people of Royal Berkshire in our Community Risk Management Plan (CRMP).

The Strategic Commitments are aligned to our four overarching principles:

- » Culture
- » Capability
- » Risk management
- » Sustainability

To achieve our purpose, we place the community at the heart of all that we do to deliver:

- » Prevention
- » Protection
- » Response
- » Resilience



[Return to Contents Page](#)



## Our Commitments

These align to our overarching principles: Risk Management, Sustainability, Culture and Capability.

### 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.

### 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.

[Return to Contents Page](#)





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.

Every year, we set corporate measure targets for our performance to ensure we are delivering what we have promised in our strategic commitments. Our Corporate Measures directly align to our plan, our core duties and responsibilities.

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.

Each quarter, we monitor our Performance against all elements of the Annual Plan through the Strategic Performance Board. This supports decision-making across the organisation. Key data is then provided formally within this report for the Audit and Governance Committee to scrutinise.



## Key to Colours, Status, Ratings and Symbols

### Performance Measures

	Target exceeded by more than 10%	Comparison with target number or percentage
	Target met or exceeded by up to 10%	
	Target missed by up to 10%	
	Target missed by more than 10%	
	NA (non-applicable) or data accuracy issues affect confidence in reporting	Comparison of current year against the previous year
↑	Improvement in performance from equivalent period the previous year	
↔	Maintenance of performance from equivalent period the previous year	
↓	Decline in performance from equivalent period the previous year	

### Priority Programme, Audits and other Project Status

R	Issues are having an impact on delivery
A	There are issues with the project but these are being managed
G	Project on Track
C	Project complete
NS	Project not yet started <b>or</b> not 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

[Return to Contents Page](#)





## Quadrant One – Service Provision

Service Provision monitors the service we provide to the public.

Performance is monitored in relation to attendance at incidents, types of incidents, Prevention activities and fire safety in commercial buildings.

Further detail outlining incident types is available via [Appendix A - Home Office Incident Type Definitions](#).

For Service Provision Measure Definitions, go to [Appendix B - Performance Measures and Definitions](#).

[Return to Contents Page](#)



## Service Provision Summary



**67.3%**

% Occasions we responded to emergency incidents within 10 minutes



**2,083**

Total number of emergency incidents in Berkshire



**187**

Total number of Fire Safety Audits completed



**1,477**

Safe and Well Visits completed in Berkshire



**13%**

% increase in the number of partner referrals received



**100%**

Referrals for threat of or incidence of arson, completed within 48 hours



**13**

Number of compliments received



**3**

Service delivery Hub exercises completed



**4**

Number of complaints received

[Return to Contents Page](#)



## Incident Trends

In Quarter 2 2025/26 we responded to 2,083 emergency incidents in Berkshire – an increase of 152 compared to the same quarter last year.

Figure 1 below shows the 5-year trend in incidents over time. It includes the five-year maximum, minimum and average incident levels for comparison. Q2 is close to the five-year average for this time of year, albeit this figure is drawn from values including 2022 which recorded the highest count of incidents. Q2 was a dry, warmer-than-usual period. The increase in emergency incidents attended saw a peak in July, falling notably in count by September.

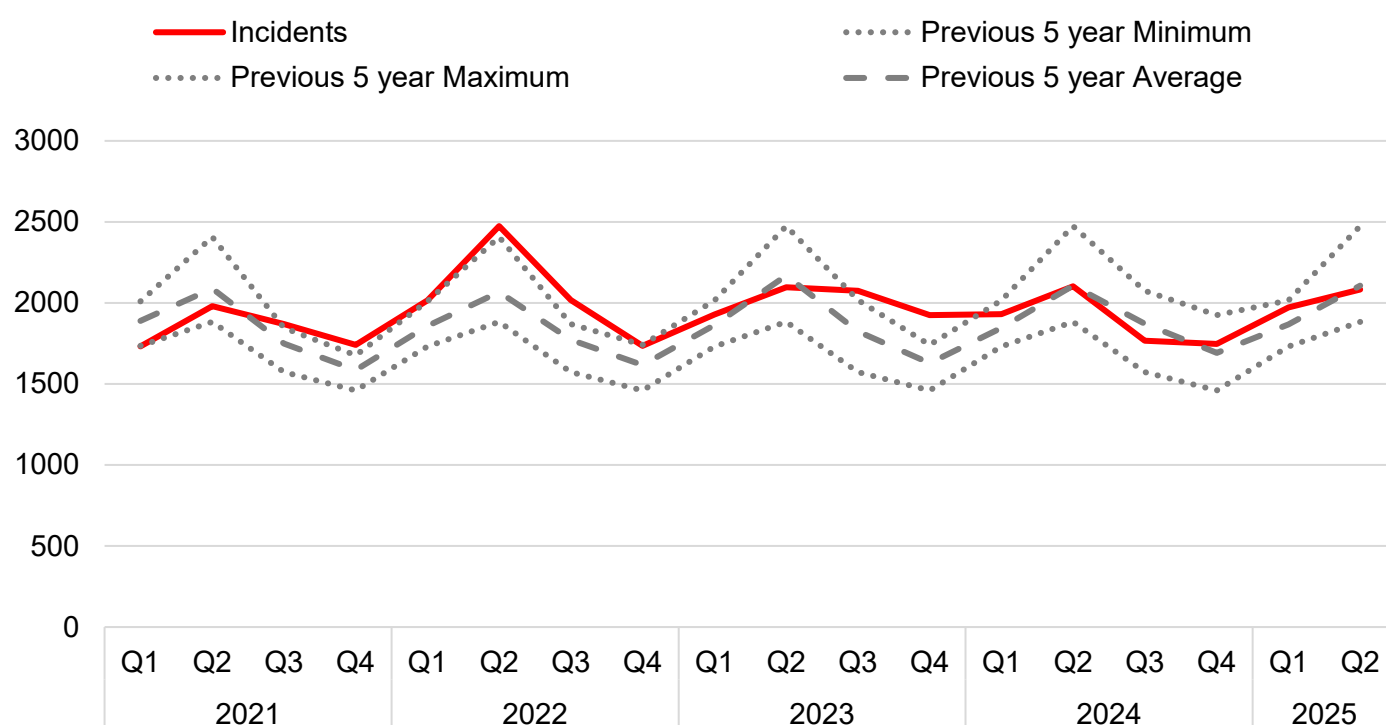


Figure 1: Total Number of Incidents

Whilst compared to Q2 2024, the total number of Primary fires for Q2 reduced from 232 to 201 incidents, overall the incidents where there was a fire increased. It is noted that the breakdown of incident types impacts on resource demand, with location, duration at scene, appliance numbers all affected. At the start of Q2 we saw the increase in Secondary<sup>1</sup> fires sustained (although levels dropped in August and September Q2 numbers remained higher than the last two years).

<sup>1</sup> Secondary fires are defined as generally small outdoor fires, not involving people or property. For more information about incident types see: [Appendix A - Home Office Incident Type Definitions](#).

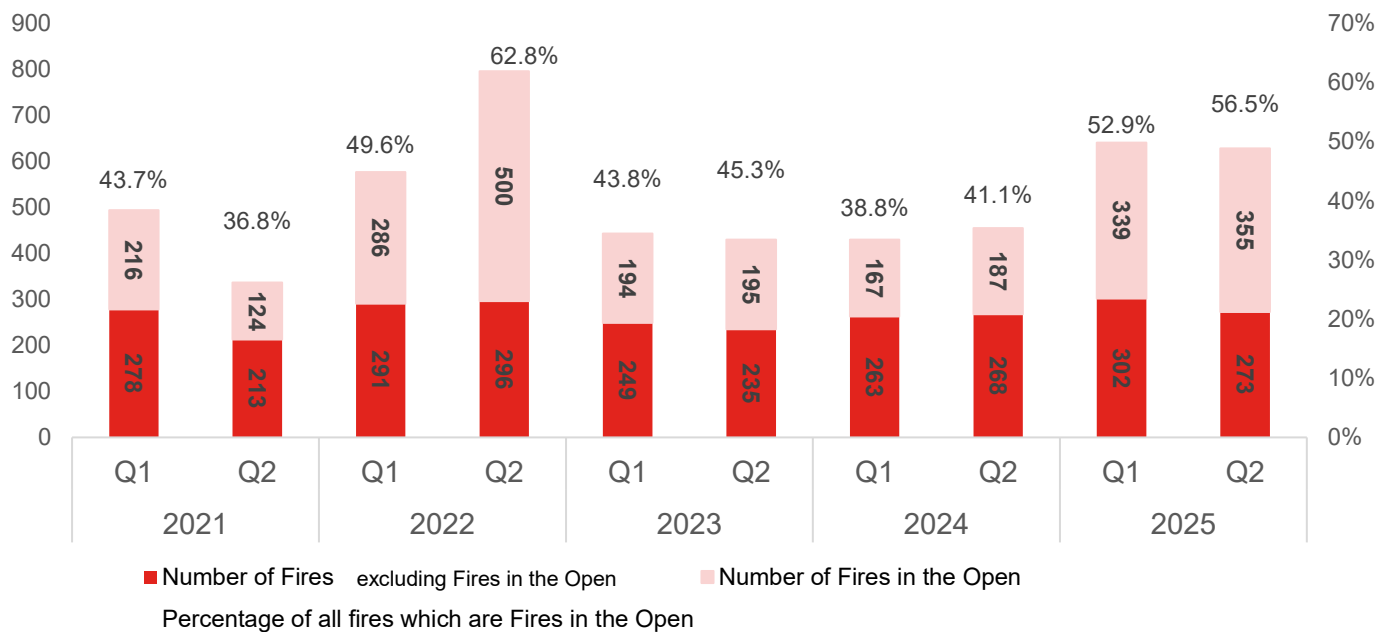
[Return to Contents Page](#)



The chart below shows the Q1 and Q2 overall fire figures with the percentage of which are classed as “fires in the open” (note this is not all Secondary fires). The chart shows the last 4 years alongside the current reporting year. The percentage of fires which are in the open has increased in 2025/26 as has the volume of fires overall, within our incident levels.

## Number of fires in Q1 and Q2 since 2021

Column split with Fires (excluding Fires in the Open and Fires in the Open).



[Return to Contents Page](#)



## Corporate Measures: Service Provision Data Summary

Corporate Measure 1: Number of Fire Deaths				2025/26 Target: 0	
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	1	1	0	1	2
Target (max)	0	0	0	0	0
2025/26 Actual	2 ↓	0 ↑			2 ↔
No fire deaths were recorded during Q2.					

Corporate Measure 2: Number of non-fatal fire casualties				2025/26 Target: 34 max	
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	17	15	11	6	32
Target (max)	9	7	9	9	16
2025/26 Actual	7 ↑	7 ↑			14 ↑
<p>Non-fatal fire casualties decreased compared to the previous year, with injuries resulting from various incident types, including a commercial fire, a boat fire, two bonfires, a kitchen fire, and a house fire. Prevention or protection activity followed, with one incident raising awareness to teams to monitor boat-related incidents to assess need for broader prevention work.</p> <p>Prevention managers continually monitor post-fire prevention activities, particularly those involving a joint response between prevention teams and frontline crews, to ensure opportunity to provide reassurance and advice with the affected community after an incident engage. The Serious Fire Incident Review (SFIR) process has proven useful in flagging any gaps. A review of the SFIR process over the last year will be completed in November.</p>					

[Return to Contents Page](#)



Corporate Measure 3: Number of deliberate primary fires					2025/26 Target: 112 max
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	21	26	19	15	47
Target (max)	28	29	28	27	57
2025/26 Actual	27 ↓	22 ↑			49 ↓
<p>Incidences of deliberate Primary fires were highest in Reading and West Berkshire. As with Q1, for Q2 the most significant trend was vehicle-related (cars and motorcycles). This quarter, most arson-suspected vehicle fires appeared to be abandoned vehicles in remote locations. In response to the deliberate vehicle fire issue, prevention teams are proactively engaging with councils, community safety partnerships and Thames Valley Police (TVP) neighbourhood policing teams to identify hotspots and take preventative action. This underscores the importance of enhancing our collaborative efforts with partners through the Community Safety Partnerships (CSPs), which are currently undergoing review and restructuring.</p>					

Corporate Measure 4: Number of deliberate secondary fires					2025/26 Target: 207 max
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	53	51	32	42	104
Target (max)	53	52	51	51	105
2025/26 Actual	70 ↓	62 ↓			132 ↓
<p>Incidences of deliberate Secondary fires were highest in West Berkshire and Bracknell Forest. Young people engaging in antisocial behaviour (ASB) continued to drive a number of deliberate secondary fires. Across all hubs, targeted prevention work continues, including hotspot signage and collaboration with Community Safety Partnerships (CSPs) to identify trends and implement swift interventions. Police reported a rise in nitrous oxide in Bracknell that is significantly feeding ASB activity. TVP are making active efforts to curb this issue.</p> <p>Internally, we acknowledged that a small number of incidents were recorded as deliberate secondary fires but are actually private homes having bonfires. By nature, these are 'accidental' because such incidents are not considered to be deliberate attempts to cause damage. Communications and training took place to confirm how such incidents should be recorded. An investigation aims to clarify how many incidents this affects. Early indications suggest re-categorisation will not dramatically reduce the numbers for Q1 and Q2.</p>					



**Prevention Measures****Corporate Measure 5: Increase the number of Referrals for Safe and Well Visits received from our partners****2025/26 Target: 5%**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	12.4%	16.0%	4.8%	36.9%	14.2%
Target	5%	5%	5%	5%	5%
2025/26 Actual Number	1,343	1,320			2,663
2025/26 % change	13.4% ↑	13.0% ↓			13.2% ↓

The number of referrals received from our partners remains high. Conversations and our focus is moving toward the improving the quality of referrals received to better enable us to manage demand and reach those at risk in the areas we serve.

**Corporate Measure 6: Percentage of Safe and Well referrals, where there has been a threat or incidence of arson, completed within 48 hours****2025/26 Target: 100%**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	100.0%	100.0%	100.0%	100.0%	100.0%
Target	100.0%	100.0%	100.0%	100.0%	100.0%
2025/26 Actual	100.0% ↔	100.0% ↔			100.0% ↔

**Corporate Measure 7: Percentage of Very High-Risk Safe and Well Referrals completed within 72 hours****2025/26 Target: 45%**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	31.0%	28.6%	16.2%	28.2%	29.2%
Target	45%	45%	45%	45%	45%
2025/26 Actual	35.7% ↑	20.0% ↓			28.3% ↓

**Corporate Measure 8: Percentage of High Risk Safe and Well Referrals completed within 14 days****2025/26 Target: 64%**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	44.2%	43.3%	47.5%	47.4%	43.7%
Target	64.0%	64.0%	64.0%	64.0%	64.0%
2025/26 Actual	51.5% ↑	39.3% ↓			45.2% ↑

Completion of Very High and High Risk Safe and Well referrals within set timeframes continues to be logistically challenging because these interventions often require the presence of a partner agency or family member. When Very High and High referrals are received, technicians focus on making early contact attempts to understand the specific requirements. Q2 saw 72.5% of Very High risk referrals and 80% High risk referrals completed over all of those that were due.

Hub and Prevention Managers meet monthly to review and assess the risk of outstanding complex referrals, to consider the most appropriate course of action. Our Safeguarding team also attend to support and provide insight.

[Return to Contents Page](#)

**Protection Measures****Corporate Measure 9: Proportion of Fire Safety Audits conducted against premises identified as High or Very High-Risk in our Risk Based Inspection Programme completed in timescale.****2025/26 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	n/a	22.4%	10.4%	0.0%	22.4%
2025/26 Actual	0.0%	25.0% ↑			18.2% ↓

Risk Based Inspection Programme (RBIP) timeframes show a disproportionate number of premises as 'overdue' due to the manner of timeframe allocation calculated from the property's last inspection. Whilst premises may appear as 'overdue', the Protection teams proactively managing workloads to prioritise high and very high-risk premises. A total of 186 Fire Safety Audits overall were completed this quarter.

Teams are continuing to support the remediation efforts of High-Rise Residential Buildings (HRRBs), with the recent inclusion of Medium Rise Residential Buildings (MRRBs). This is an ongoing area of work that continues to demand resources from teams. The Mentoring Scheme has supported Level 4 FSIs in observed inspections. Trainees and dual contract staff have contributed through shadow audits and solo weeks. Engineering referrals continue to affect completion timelines, with efforts underway to better reflect these delays in IBIS data.

Due to the risks to the service and ability to meet our legal responsibilities, we are adapting our focus toward more targeted, risk-driven work, which means balancing enforcement with proactive planning to improve RBIP outcomes.

**Corporate Measure 10: Number of Fire Safety Audits completed****2025/26 Target:  
Measure of volume**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	205	204	151	113	409
Target	~	~	~	~	~
2025/26 Actual	167 ↓	186 ↓			354 ↓

Consultation and licence application activity has also been significant across the hubs. The West Hub completed 126 consultations, with eight exceeding deadlines due to factors such as training, workload prioritisation, engineering referrals, and administrative issues. Central Hub completed 52 consultations with a 93% completion rate, slightly below the 95% target, with delays attributed to and referral challenges. East Hub completed 70 consultations with a 94% completion rate, with delays caused by work prioritisation.

[Return to Contents Page](#)



Corporate Measure 11a: Percentage success when cases go to court					2025/26 Target: 80%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	100%	0	0	0	100%
Target	80%	80%	80%	80%	80%
2025/26 Actual	No cases	No cases			No cases

Corporate Measure 11b: Number of informal actions taken as a result of Protection intervention					2025/26 Target: Measure of volume
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	42	44	39	90	86
Target	~	~	~	~	~
2025/26 Actual	39 ↓	29 ↓			68 ↓

Corporate Measure 11c: Number of formal actions taken as a result of Protection intervention					2025/26 Target: Measure of volume
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	10	2	1	6	12
Target	~	~	~	~	~
2025/26 Actual	12 ↑	9 ↑			21 ↑
<p>Formal enforcement activity from complaints rose significantly in Q2, impacting inspection outcomes and resource allocation. Formal enforcement activity has notably increased in the West Hub, resulting in five Enforcement Notices, one Prohibition Notice, and one prosecution case. This shift in focus has led to a reduction in routine inspections, as FSIs concentrate on serious cases, some of which are progressing toward prosecution. In the East Hub, two active prosecutions are underway.</p>					

Corporate Measure 12: Percentage of statutory fire consultations completed within the required timeframes					2025/26 Target: 95%
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	99.2%	99.6%	96.1%	93.7%	99.4%
Target	95%	95%	95%	95%	95%
2025/26 Actual	94.4% ↓	93.2% ↓			93.8% ↓

**Response Measures****Corporate Measure 13: Percentage of occasions where the first fire engine arrives at an emergency incident within 10 minutes from time the emergency call was answered****2025/26 Target: 75%**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	74.7%	68.5%	73.2%	72.2%	71.4%
Target	75.0%	75.0%	75.0%	75.0%	75.0%
2025/26 Actual	71.0% ↓	67.3% ↓			69.1% ↓

Q2 continued to see hot and dry weather patterns experienced through Q1. This significantly impacted incident activity. A notable increase in fires in the open, placed additional pressure on operational resources, affecting response times and other critical activities, including risk visits and Safe and Well checks.

**Corporate Measure 14: Percentage of wholetime frontline pumping appliance availability****2025/26 Target: 97.4%**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	97.7%	95.2%	96.7%	98.1%	96.4%
Target	97.4%	97.4%	97.4%	97.4%	97.4%
2025/26 Actual	96.7% ↓	96.3% ↑			96.5% ↑

**Corporate Measure 15: Percentage of hours where there is adequate crewing on on-call frontline pumping appliances (based on 24/7 crewing)****2025/26 Target: 50%**

	Q1 <sup>2</sup>	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	34.1%	35.5%	24.7%	36.6%	34.8%
Target	50.0%	50.0%	50.0%	50.0%	50.0%
2025/26 Actual	34.3% ↑	32.8% ↓			33.9% ↓

**Corporate Measure 16: Percentage of time that 14 or more pumping appliances are available****2025/26 Target: 100%**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	91.2%	70.1%	82.6%	96.7%	80.6%
Target	100.0%	100.0%	100.0%	100.0%	100.0%
2025/26 Actual	90.1% ↓	84.8% ↑			87.4% ↑

Appliance availability is looking positive, improving from 98 appliances degraded during Q2 last year to 51 for the same period this year.

Much of this improvement is due to the 10 additional firefighters that the Fire Authority approved in 2023/24. There is ongoing work to reduce the number of staff extractions which impact availability, for example, the review of the leave policy for station-based staff aims to alleviate the inefficiencies created by marked peaks and troughs in the level of staff absences throughout the year. Other actions include an increased focus on the management of staff on long term sick and light duties, greater collaboration between departments to minimise the number of extractions due to training and a review of development paths to competence.

<sup>2</sup> Q1 is the cumulative figure for April and May – due to a systems update, data was not available for June at time of recording stats. An action was raised for to fix this. At time of this report publication, this had not been resolved.



## Resilience Measures

### Corporate Measure 17: Percentage of visits to Very High, High and Medium Operational Risk sites completed in timescale

2025/26 Target: 100%

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	71.0%	54.7%	58.4%	18.3%	61.1%
Target	100.0%	100.0%	100.0%	100.0%	100.0%
2025/26 Actual	72.5% ↑	53.1% ↓			59.7% ↓

Completion of site visits remains below target, with only 59.7% of visits to Very High, High and Medium Operational Risk sites completed within timescale. Persistent issues include on-call crew availability, delayed record returns, and administrative inefficiencies. Digitalisation efforts are underway, with a pilot due in late 2025. It is anticipated that this work will improve the work flow of risk information leading to increased confidence.

### Corporate Measure 18: Number of Service Delivery Hub exercises completed

2025/26 Target: 12

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	3	3	3	2	6
Target	3	3	3	3	3
2025/26 Actual	2 ↓	3 ↔			5 ↓

Although, one hub exercise was deferred in Q1 (planned for delivery later this year), Q2 met target.

### Corporate Measure 19: Percentage of Automatic Fire Alarm calls where RBFRS did not attend

2025/26 Target: 45% min

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	24.9%	32.7%	51.5%	52.6%	29.1%
Target	45.0%	45.0%	45.0%	45.0%	45.0%
2025/26 Actual	55.9% ↑	55.6% ↑			55.7% ↑

Non-attendance at automatic fire alarm calls has exceeded the target in both quarters this year. This follows the introduction of a revised Thames Valley AFA call challenge procedure. Increasing levels of call challenge mean that there is an increase in the available time for fire crews to carry out other high value activities. An evaluation is in progress to review the impact of policy change.

[Return to Contents Page](#)

**Customer Satisfaction Measures****Corporate Measure 20: Percentage of respondents experiencing a fire, fire safety audit, or a safe and well visit, satisfied with the service received****2025/26 Target: 95%**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	99.1%	98.9%	91.0%	9.1%	90.4%
Target	95.0%	95.0%	95.0%	95.0%	95.0%
2025/26 Actual	98.9% ↓	100.0% ↑			99.0% ↑

**Corporate Measure 21: Number of complaints received****2025/26 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	1	6	9	6	7
Target	~	~	~	~	~
2025/26 Actual	9 ↓	4 ↑			13 ↓

**Corporate Measure 22: Number of compliments received****2025/26 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	7	12	10	8	19
Target	~	~	~	~	~
2025/26 Actual	12 ↑	13 ↑			25 ↑





## Quadrant Two – Corporate Health

Corporate Health performance is monitored in relation to human resources and learning and development, health and safety and finances within RBFRS, to ensure the organisation is being run safely, efficiently and is cost effective.

For Corporate Health Measure Definitions, go to [Appendix B - 2025-26 Performance Measures and Definitions](#)

### Corporate Health Summary



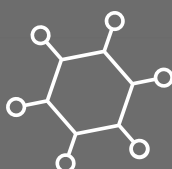
**100%**

Compliant spend as a %  
of overall spend



**4.9%**

% of working time lost to  
staff sickness across all  
groups



**2**

Number of RIDDOR  
accidents and diseases



**100%**

Completion of Data  
Subject Requests (SARs)  
within the permitted time  
frames

[Return to Contents Page](#)



### HR Support for Staff

Earlier in the year a light duties pool went live. This pool allows the individual to do meaningful work whilst on light duties which will have a positive effect on their mental health. Individuals in the pool are being assigned work to support functions across the service. Time is given to ensure full rehabilitation. There has been a decrease in sickness as several long-term sick employees have returned to the workplace and remain on light duties. Revised rehabilitation plans should be completed to support their return.

Long-term sickness cases in the East Hub have reduced with most individuals returned to the workplace, some on light duties. Regular reviews remain in place with the East and reviews are held with the other hubs to review long term sickness, light duties and where sickness triggers have been met. We currently have two medical capability cases, one of which is progressing to its later stages of the medical capability process.

Quicker escalation for GP fit notes occurs through the management chain where documentation remains outstanding. Return to work is a part of the sickness workshop which reiterates the administrative process.

Welfare support and signposting to sources of support remains ongoing with regular check ins on individuals who may have faced challenges, personally or work-related.

On occasions where funding is provided to support trauma therapy to aid an employee's recovery, there has been liaison with Finance to ensure correct arrangements are in place to meet our Service obligations whilst supporting individuals.



## Benchmarking Data

Health Partners (Occupational Health) benchmarking data shows for the rolling 12 months to the end of September 2025, 27% of RBFRS cases related to MSK issues. This compares to 32% for their emergency services clients and 26% across their client base.

MSK was the primary diagnosis in 36% of cases, in July 2025 dropping to 20% in September 2025. This decrease in primary diagnosis by OH is mirrored in our decrease in MSK absence in Q2.

The figure for RBFRS has decreased by 5% consistent with the reduction in sickness absence and the return to work of some long-term cases.

### Sickness Absence across other Fire and Rescue Services

NFCC have recently taken over the production of these quarterly statistics and have not included the days lost to sickness comparison charts of other Fire and Rescue Services. The report does breakdown sickness by contract type. As this is new data, the following is based on Q1 25/26.

#### Percentage of working time lost Q1 25/26

<i>Contract</i>	<i>Average across All FRS</i>	<i>RBFRS</i>	<i>Ranking</i>
<i>Wholetime</i>	4.86	5.08	15 <sup>th</sup> highest / 38
<i>Control</i>	4.90	9.48	5 <sup>th</sup> highest / 31
<i>Green Book</i>	3.30	4.01	14 <sup>th</sup> highest / 39

#### Top 3 reasons by Contract Type

<i>Contract Type</i>	<i>All FRS Top 3</i>	<i>RBFRS Top 3</i>
<i>Wholetime</i>	Mental Health, MSK and Gastro	Mental Health, MSK and Gastro
<i>Control</i>	Mental Health, MSK and Gastro	Mental Health, MSK and Skin Conditions
<i>Green Book</i>	Mental Health, MSK and Hospital/Op	Mental Health, MSK and Gastro

In comparison to other FRS the RBFRS most common sickness absence reasons are similar.

- » Mental Health and MSK consistently appear across all contract types in both datasets.
- » Gastrointestinal issues are common in Wholetime roles
- » Skin Condition and Hospital/Post Op are more common in Green Book and Control roles.

[Return to Contents Page](#)



## Corporate Measures: Corporate Health Data Summary

### Human Resources and Learning & Development

**Corporate Measure 23: Percentage of working time lost to sickness across all staff groups**

**2025/26 Target: 5% max**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	5.4%	6.6%	7.7%	6.6%	5.9%
Target	5.0%	5.0%	5.0%	5.0%	5.0%
2025/26 Actual	5.3% ↑	4.9% ↓			5.1% ↓

Q2 saw a decrease in the number of days and percentage of working time lost to sickness this quarter - Control by 47%, On-Call by 49%, Green Book 44%. Wholetime increased by 11%. The top three reasons for sickness absence were Mental Health, MSK and Other sickness. These reasons will fluctuate seasonally.

### Sickness by Contract Type

#### Wholetime

- » Absence increased from 880 to 985 days this quarter, due to MSK, Mental Health and Gastro increasing. This is 18% lower than the same period last year (1,204 days).
- » Mental Health increased 11% this quarter. The number of episodes is consistent from last quarter, but positively this is 51% lower than the same time last year and lower overall compared to last year.
- » Nine new wholetime mental health cases - three were long and six short term cases.
- » Gastro sickness recorded 32 episodes. Health and Safety confirmed that no periods of absence related to gastro following any water rescue courses. HR and H&S teams will monitor this ongoing.
- » Nineteen individuals remain absent at the end of the quarter equating to 437 days. (10 Long - 375 days and 9 short - 62 days).

#### On-Call

- » On-Call absence decreased this quarter and is lower than the same period last year (126 days).
- » Sickness days were lost to three headlining categories: MSK, Respiratory and Gastro.
- » There were no Mental Health cases in this staffing group this quarter.

#### Green Book

- » Sickness absence for Green Book has decreased and is lower than the same period last year.
- » Overall a decrease in total days lost to this staffing group; Respiratory and Gastro increased when compared last quarter.
- » Gastro equated to eight cases. One long, seven short with seven individuals returned to the workplace.
- » MSK cases shows three individuals were off last quarter.
- » Mental Health cases decreased again this quarter. Of the three cases, all were long term. Two individuals have returned to the workplace.
- » Three individuals remain off sick at the end of the quarter with MSK, Gastro and Headache related sickness (2 Long - 106 days and 1 short – 4 days).

[Return to Contents Page](#)



### Control sickness

- » Control sickness decreased this quarter and is lower compared to the same period last year.
- » MSK, Respiratory, Skin, Mental Health and Gastro all reduced.
- » Headache days lost had a small increase this quarter.

### Mental Health

Mental Health sickness days lost reduced again this quarter.

- » 34% of all sickness days lost this quarter were Mental Health related.
- » Key categories of this absence: work-related stress, other, stress non-work-related and mental exhaustion.
- » Wholetime increased, Control and Green Book reduced, none within the On-Call staff.

During Q2 the following activities were undertaken against the mental health action plan:

- » Ongoing delivery of Mental Health Awareness (part 2) training.
- » World Suicide Prevention Day supported in September.
- » One Trauma Support session.
- » Eight Structured Professional Support sessions through Health Assured.

### Musculoskeletal (MSK) Sickness

Musculoskeletal (MSK) sickness days reduced this quarter.

- » The top three reasons for MSK absence were shoulder, lower limb and other.
- » MSK Sickness levels reduced for Green Book, Control and On-Call, increased for Wholetime.
- » MSK absence is higher when compared to the same quarter last year.
- » Sixteen long term MSK sickness cases during Q2, fifteen have returned to the workplace.
- » Consistent with other Fire and Rescue Services, MSK absence remains one of the top three highest causes of sickness absence.

### Respiratory

A 5% reduction from last quarter is consistent with the same period last year where there was a decrease. If trends continue, we expect to see respiratory absence increase from Q2 to Q3.



Corporate Measure 24: Percentage of eligible staff with Personal Development Reviews		2025/26 Target: 100%			
		Status as at Q2			
Previous Year (2024/25)		76%			
Target		100%			
2025/26 Actual		66% ↓			
Source: Data calculated and supplied by HR					
A total of 641 staff were eligible to have received a Personal Development Review (PDR) meeting between June and August 2025. Dual contract employees only require one PDR and therefore have only been counted once.					
13 employees were exempt for the following reasons:					
» new employees					
» absences from the workplace					
419 (66%) of active staff are recorded as having had their PDR at the end of the quarter. This is lower than the same period last year (76% Q2 24/25). Of these, 222 completed PDR forms have been returned to HR. Q2 saw a significant increase in more meetings, following a Q1 reminder to Managers requesting that Firewatch was updated. Managers 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.					
Corporate Measure 25: Number of formal grievances		2025/26 Target: Monitor			
	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	5	11	4	2	16
Target (max)	-	-	-	-	-
2025/26 Actual	4 ↓	3 ↓			7 ↓
Source: Data supplied by HR					
For this quarter, three complaints have been received. No specific trends identified. Seven complaints were received through SaySo. Of these, some related to the same area of concern.					

[Return to Contents Page](#)



**Health and Safety****Corporate Measure 26: Number of RIDDOR accidents and diseases****2025/26 Target: 4 max**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	1	0	1	1	1
Target (max)	1	1	1	1	4
2025/26 Actual	2 ↓	2 ↓			4 ↓

Source: Data supplied by Health & Safety

One RIDDOR report related to BA use in a dirty atmosphere – all events of this type must be reported. The second RIDDOR was an injury that led to more than 7 days sickness absence. The injury was classed as moderate and investigated.

In Q2 there were 12 injury accidents (8 minor and 4 moderate), one less than the last quarter and equal to the number reported in Q2 2024/25.

One individual incurred two injuries in the period; these are being reviewed and support offered to the individual by the Health and Wellbeing Team.

Near misses decreased from 16 in Q1 to 7 in Q2.

**Finance and Procurement****Corporate Measure 27: Percentage of spend subject to competition****2025/26 Target: 85%**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	89.9%	91.3%	91.9%	92%	90.6%
Target	85%	85%	85%	85%	85%
2025/26 Actual	84.3% ↓	90.4% ↓			87.6% ↓

- » ADT Fire – Close protocol smoke alarms in HQ that can only be maintained by ADT
- » High-tech - Training in height and related equipment provided by the supplier. Waiver put in place as changing supplier would mean additional cost to replace the training provision along with the equipment costing Authority additional cost for replacement.
- » DA Technologie – Emergency repair of the fire house in Whitley Wood Fire Station. Without the repair work, the training could not be provided and there is a risk to life and property.
- » Xact Consultancy – Fire Safety Training course for Protection Officers. Waivers agreed as the contract ended in September 2024 and in order to maintain same level of training and qualification, a waiver was agreed as that can only be provided by Xact Consultancy.
- » Cadcorp – supplier own perpetual licences for Cadcorp products which provide specialist analytical functions. Cadcorp are the only company which can provide Support and Maintenance for their software.

**Corporate Measure 28: Compliant spend as a percentage of overall spend****2025/26 Target: 100%**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	100%	100%	100%	100%	98.8%
Target	100%	100%	100%	100%	100%
2025/26 Actual	99.3% ↓	100% ↔			99.7% ↓

[Return to Contents Page](#)

**Freedom of Information**

**Corporate Measure 29: Number of Information Commissioner assessments finding that the Service has breached Information Rights Legislation\***

**2025/26 Target: 0**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	0	0	0	0	0
Target	0	0	0	0	0
2025/26 Actual	0 ↔	0 ↔			0 ↔

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

**Corporate Measure 30: Monitoring the annual completion of the mandatory Protecting Information Course**

**2025/26 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	60%	71%	68%	56%	65.5%
Target	95%	95%	95%	95%	95%
2025/26 Actual	54% ↓	77% ↑			65.5% ↔

Targeted focus has contributed to the uplift for this year and against the previous year, same quarter.

**Corporate Measure 31: Reporting of data breaches and near misses to include those that are reported to the ICO**

**2025/26 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	0	0	0	0	0
Target	0	0	0	0	0
2025/26 Actual	0 ↔	0 ↔			0 ↔

Staff demonstrated the confidence to report honestly and transparently. Six requests were logged, none required reporting the ICO.

**Corporate Measure 32: Completing the Data Subject Requests (SARs) within the permitted time frames**

**2025/26 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%
2025/26 Actual	100% ↔	100% ↔			100% ↔

**Corporate Measure 33: 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**

**2025/26 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q2
Previous Year (2024/25)	57%	63%	60%	43%	60%
Target	100%	100%	100%	100%	100%
2025/26 Actual	63% ↑	69% ↑			66% ↑

Progress is underway for improvement for Q3.

[Return to Contents Page](#)



### Revenue Budget & Position

The 2025/26 Revenue Budget agreed by Fire Authority in February 2025 was set at £47.965m. The budget was set with no addition to or need to draw on the Budget Contingency Reserve.

The forecast revenue outturn for 2025/26 is shown on the next pages. This shows expenditure to be in line with budget.

Variances against individual revenue lines are explained below.

#### » Employee costs

- The Grey book pay award from 1 July 2025 was agreed at 3.2%. This compares to a budget assumption of 2%, resulting in an additional spend pressure of £229,000 over the original budget. Reserves were set aside to meet these costs and added to the budget for 2025/26.
- The Stations budget included a buffer of an additional ten firefighters. The actual numbers of staff on wholtime stations were below the budgeted number in Q1.
- The proportion of firefighters at development level is higher than in the budget. There is a forecast cost saving of around £240,000 on wholtime stations for the year.
- The overtime forecast is £390,000 over budget for the year, due to the under establishment in Q1 and pressure on the overtime budget to cover sickness, firefighters on light duties and additional overtime for training.
- On-call stations are currently showing a net negative variance across the county, with a net variance of £93,000, with Lambourn being £55,000 of this amount.
- The Green book pay award has now been finalised, similarly at 3.2%. This compares to a budget assumption of 2%, resulting in an additional spend pressure of £115,000. Reserves were set aside to meet these costs and have been added to the budget for 2025/26. Vacancies in various departments has resulted in a net negative variance of £278,000.

#### » Clothing and PPE

The costs on the PPE contract are anticipated to be higher than budget by £42,000 for the year. Non-PPE clothing is anticipated to be £42,000 higher than budget.

The costs on the PPE contract are anticipated to be higher than budget by £30,000 for the year.

[Return to Contents Page](#)



### » Communications

The Home Offices charges for the Airwave system are forecast to be £289,000 less than budgeted.

### » Other Suppliers

Includes additional costs of:

- £28,000 on food and catering
- £8,000 for hydrant repairs
- £10,000 on archiving and storage costs

### » Cross border

Costs (included in '**Other Contracts**') forecast to be £14,000 higher, and income (in '**Income other**') £16,000 higher.

### » Income other

Includes £58,000 received on an un-budgeted legal settlement.

### » Appropriations to Reserves

The use of reserves to cover the unbudgeted elements of the pay awards was adjusted noting the favourable variances for the year. This means the use of reserves is £288,000 less than budget.

the use of reserves to cover the unbudgeted elements of the pay awards has been adjusted to take into account the favourable variances for the year. Use of reserves is £408,000 less than budget.



## Forecast revenue outturn - Revenue Position Quarter 2 2025/26

	Annual Budget £'000	Q2 Outturn £'000	Forecast to YE £'000	Fcast - Budget Variance £'000
<b>EMPLOYEES</b>				
STATIONS	22,033	11,088	22,090	57
NON-STATIONS	15,913	7,682	15,635	(278)
TRAINING	707	252	709	2
OTHER	342	176	355	13
	<b>38,995</b>	<b>19,198</b>	<b>38,789</b>	<b>(206)</b>
<b>PREMISES</b>				
REPAIRS & MAINTENANCE	814	381	832	18
RATES	988	579	988	0
CLEANING	299	136	311	12
UTILITIES	587	245	587	0
	<b>2,688</b>	<b>1,341</b>	<b>2,718</b>	<b>30</b>
<b>SUPPLIES</b>				
INSURANCE	438	265	438	0
EQUIPMENT	580	263	591	11
IS EQUIPMENT & LICENCES	1,252	727	1,266	14
CLOTHING/PPE	423	226	453	30
COMMUNICATIONS	937	163	636	(301)
OCCUPATIONAL HEALTH	348	212	348	0
PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTIONS	140	110	159	19
COMMUNITY FIRE SAFETY SUPPLIES	110	47	121	11
SUPPLIES OTHER	228	135	257	29
	<b>4,456</b>	<b>2,148</b>	<b>4,269</b>	<b>(187)</b>
<b>CONTRACTS</b>				
CONTRIBUTION TO TVFCS	1,128	555	1,123	(5)
LEGAL	50	31	50	0
OTHER CONTRACTS (incl. Professional Services)	1,154	1,085	1,171	17
	<b>2,332</b>	<b>1,671</b>	<b>2,344</b>	<b>12</b>
<b>TRANSPORT</b>				
VEHICLE RUNNING COSTS	825	432	844	19
TRAVEL	225	146	236	11
	<b>1,050</b>	<b>578</b>	<b>1,080</b>	<b>30</b>

[Return to Contents Page](#)



	£'000	£'000	£'000	£'000
<b>PENSIONS</b>				
PENSIONS	510	266	510	0
	<b>510</b>	<b>266</b>	<b>510</b>	<b>0</b>
<b>INCOME</b>				
GRANTS	(1,929)	(1,493)	(1,933)	(4)
RENTAL INCOME	(264)	(131)	(264)	0
TVFCS RECHARGE INCOME	(456)	(228)	(456)	0
INCOME OTHER	(526)	(585)	(601)	(75)
	<b>(3,175)</b>	<b>(2,437)</b>	<b>(3,254)</b>	<b>(79)</b>
<b>NET COST OF SERVICES</b>	<b>46,856</b>	<b>22,765</b>	<b>46,456</b>	<b>(400)</b>
DEBT CHARGES INTEREST	329	127	329	0
INVESTMENT INTEREST	(604)	(269)	(598)	6
REVENUE FUNDING OF CAPITAL	1,516	0	1,516	0
APPROPRIATION TO/(FROM) RESERVES	(675)	0	(267)	408
FINANCING COSTS	543	0	543	0
<b>NET EXPENDITURE</b>	<b>47,965</b>	<b>22,623</b>	<b>47,979</b>	<b>14</b>
GOV GRANTS/PRECEPTS	(47,965)	(28,634)	(47,979)	(14)
<b>(SURPLUS)/DEFICIT BEFORE USE OF RESERVES</b>	<b>0</b>	<b>(6,011)</b>	<b>0</b>	<b>0</b>

[Return to Contents Page](#)





## Equality, Diversity and Inclusion Objectives

Objective: Increasing the diversity of staff at all levels	End 24/25		Q1	Q2
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.	G		G	G
<p>The fourth iteration of the positive action programme welcomed four interns from ethnic minority backgrounds for five weeks during July and August. The scheme continues to thrive. One intern expressed interest in a long-term career with the Service.</p> <p>Recruitment opened for the next intake of firefighter apprentices. The Discover a Career as a Firefighter initiative remains effective, with three former summer interns applying for wholetime roles.</p> <p>The Service hosted four Change100 interns across various departments, supporting university graduates with disabilities or long-term conditions.</p> <p>A gap analysis launched to evaluate and enhance the Service's approach to positive action, with a focus on attracting more women and ethnic minority individuals into operational roles. Completion is expected in Q3.</p>				

Objective: Leadership and corporate commitment	End 24/25		Q1	Q2
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.	G		G	G
<p>Work continued to draft our refreshed Equality Objectives for 2026. Initial consultation took place service wide. Draft objectives were approved by SLT for wider consultation in Q3, subject to Fire Authority approval.</p> <p>Following the recent Supreme Court ruling, conversations have continued to ensure our workplaces are accessible for all and promote psychological safety. Progress continued against actions identified in the Sexual Harassment Risk Assessment, with a focus to create safer and more respectful environments.</p> <p>A video message from the Chief Fire Officer was shared with staff to mark National Inclusion Week, offering personal insight into what inclusion means to him and why it is vital in the workplace.</p> <p>Staff attended at AFSA and delivered a workshop on the Service internship schemes demonstrating best practice in this area as part of our positive action programme.</p>				

[Return to Contents Page](#)



Objective: Improving our service delivery by creating strong links with our community	End 24/25		Q1	Q2
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.	A		A	A
<p>We are working to ensure that attendance at community events is balanced, purposeful, and aligned with both our organisational objectives and strategic commitments. This is part of our ongoing review of the event booking process. A need remains to establish a robust mechanism for capturing community engagement activity across the organisation. This will help ensure that all stations and watches are actively contributing to proactive engagement, particularly with communities that are both at greater risk and underrepresented.</p> <p>Q2 Community Engagement Highlights:</p> <ul style="list-style-type: none"><li>» A crew participated in a Kenyan Family Fun Day in Reading.</li><li>» Several crews celebrated Raksha Bandhan with the Slough Hindu community.</li><li>» A visit to Aisha Mosque included sharing information on Wholetime recruitment.</li><li>» Attendance at Children's hospice fete.</li></ul> <p>Looking ahead, there is a clear need - built into the drafted Equality Objectives - to differentiate between community engagement and 'targeted' community engagement. We must ensure that individuals understand this distinction and are attending a diverse range of events to effectively deliver appropriate fire safety messaging to all communities, using their understanding of the local community to do this.</p>				

Objective: Building on our inclusive culture	End 24/25		Q1	Q2
We will continue taking action to ensure we have a culture where everyone feels valued and is treated with dignity and respect and support all staff to contribute to the creation of an inclusive working environment.	G		G	G
<p>EDI and Cultural Awareness Training continued to be delivered to all staff. The Neurodiversity Network hosted a Create Conversations morning with Guest Speaker Rich Ferriman. The session had high levels of engagement and extremely positive feedback from attendees particularly about the ability to have open and honest conversations with colleagues. Work is being undertaken alongside the Dignified Workspace Standard to include a review of wellbeing and quiet spaces for our staff. Work has continued to review our overall adjustments process throughout employment to ensure employee can achieve their best at work. This will inform our adjustments policy.</p>				

Tables containing relevant Equality, Diversity and Inclusion data are in [Appendix B - Equality, Diversity and Inclusion Data](#).

[Return to Contents Page](#)



## 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 [Annual Plan](#) are included under this section for:

- >> [Community Risk Management Plan](#)
- >> [Culture Plan](#)
- >> [Strategic Asset Investment Framework](#)

## Key to Colours, Ratings and Symbols

### Priority Programme and other Project Status

R	Issues are having an impact on delivery
A	There are issues with the project but these are being managed
G	Project on Track
C	Project complete
NS	Project not yet started <b>or</b> not due to start

[Return to Contents Page](#)



## Community Risk Management Plan

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 majority of actions against our CRMP commitments published in our 2023-24 Annual are currently on track or complete.

The below two Priorities status showed as ‘**Amber**’ (A) as at the end of Q2:

	End 24/25		Q1	Q2
<b>Priority 1:</b> 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	A <sup>1</sup>		G <sup>1</sup>	A <sup>1</sup>
<b>Priority 3:</b> 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	G		G	A

The next pages detail all progress against our CRMP commitments.

[Return to Contents Page](#)



<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 24/25	Q1	Q2
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
We will develop our water rescue capability to respond to the impact of climate change.	G	G	C
We will develop our wildfire capability to respond to the impact of climate change.	G	G	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.	A <sup>1</sup>	G <sup>1</sup>	A <sup>1</sup>
<sup>1</sup> Work on alternative energy systems has restarted with focus and scope being defined and the working group meeting quarterly – scope is still being defined. A review of the wildfire season will take place in Q3 with learning fed back into the service. Our water rescue capability has been uplifted and has transitioned to BAU. The Strategic Assessment of Risk and associated Matrix of Mitigations and Interdependencies is being created which will help inform Priority 1.			

<b>Priority 2: We will develop a Risk Based Prevention Programme to target those most vulnerable and at risk from emergency incidents</b>	End 24/25	Q1	Q2
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 <sup>1</sup>	NS <sup>1</sup>	G
We will continue to work with our partner agencies to ensure high quality referrals for the most vulnerable.	C	C	C
Data and local knowledge in prevention	C	C	C
<sup>1</sup> The new CRMP Board is examining interdependencies and identifying workstreams that will allow the final strands of P2 and P5 to begin and progress.  Work has begun on a Strategic Assessment of Risk and the output of this will form part of the evidence base to develop our Risk Based Prevention Programme.  Completed activities have transitioned to business as usual.			

[Return to Contents Page](#)



<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 24/25		Q1	Q2
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	C
Appliance Availability, will look to generate the evidence to review the requirements, define extractions and refine what RBFRS need to enhance the availability of 19 fire engines by reviewing ridership factor and making recommendations to mitigate the effects of extractions in the long term to support the Organisation in achieving the current requirement of the CRMP.	G		G	A
Define the level of command resource required to provide an effective and efficient response to foreseeable incidents such as fires, road traffic collisions and other emergencies within Berkshire and what arrangements must be made to meet the full range of service delivery risks, local and national resilience duties.	G		G	G
We will identify the specialist capabilities needed from both station-based and non-station-based operational staff (e.g., flexi-duty officers). This includes understanding which capabilities are critical, which are needed in the longer term, and how to crew these specialist roles.	G		G	G
Following the delivery of the identify phase report, work began on improving availability through identified extraction factors including drafting a new leave policy to go live at the start of Q3, however this has fallen behind schedule and is anticipated to go live in November. An interim position increasing the FDO numbers to 24 has been agreed which allows time to develop full options for how to provide a suitable, effective, efficient and resilient command model that meets the needs of the service.				

<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 24/25		Q1	Q2
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.	C		C	C

[Return to Contents Page](#)



<b>Priority 5: We will develop our Service to reduce the impact of fire safety issues in commercial buildings.</b>	End 24/25		Q1	Q2
We will evaluate our new Risk-Based Inspection Programme to ensure we are targeting the premises with the greatest risk	G		G	G
We will evaluate the changes we have made to our call challenge policy and review our response	G		G	C
Sprinklers	C		C	C
Building Safety Regulator	C		C	C
New Ways of working	NS		NS	NS
<p>The new CRMP Board is examining interdependencies and identifying workstreams that will allow the final strands of P2 and P5 to begin and progress.</p> <p>Work has begun on a Strategic Assessment of Risk and the output of this will form part of the evidence base to develop our Risk Based Inspection Programme.</p> <p>Evaluation of the call challenge policy was completed in Q1 and will transition to business as usual in Q2.</p>				

<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 24/25		Q1	Q2
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.	C		C	C
<p>Priority 6 has now transitioned to Business as Usual and is monitored by the Operational Support and Improvement Team.</p>				

[Return to Contents Page](#)



## Culture Plan

The Culture Plan contains five key pillars of work for Places, Processes and systems, Communications and engagement, Governance and structure, and People.

Work is ongoing to structure and shape the delivery plan.

This section outlines four of these areas:

- » **Places**
- » **Processes and systems**
- » **Communications and engagement**
- » **People**

The below represents the progress review on associated activities. Where applicable, any status 'Not Started' (NS), 'Red' (R) or 'Amber' (A) is highlighted as captured end-Q2.

### » **Places Pillar**

Our working environment can influence our behaviours and therefore our culture. This area of work draws together work of our facilities, estates and sustainability teams, particularly focusing on establishing better dignified spaces. Management of this work is through the Places programme governance and reported under the [Strategic Asset Framework](#) section.





## » Process and Systems Pillar

We have an ambitious efficiency and productivity programme. The way we interact with systems and processes affects the way we work with each other and with our communities. We want to liberate time to ensure we have capacity to deal with new and emerging risks. We want leaders to have time to lead and develop staff.

Under this pillar, project status as captured end-Q2 is detailed below, ordered by RAG status:

Project	Aim	Q1	Q2
<b>Staff Development System</b>	The overarching aim of this project is to implement a transparent, integrated and intuitive system to facilitate organisational growth, development and performance.	R	R
<b>PRF Digitalisation</b>	The project will; deliver a digital solution for Personal Record Files (PRFs) removing the need for paper filing	R	On Hold
<b>Finance System Replacement</b>	The Finance System Replacement Project will implement a new and modern finance system, to replace Sage 1000 and V1. The project will review and refresh processes and procedures, introducing new ways of working in Finance and Procurement, and introducing automation where possible.	R	A
<b>Microsoft 365</b>	Leverage Microsoft 365 products across the Service, establish a clear governance structure and optimise the utilisation of available apps. The project will implement a framework for prioritising and delivering changes, including process changes to maximise benefit realisation.	A	A
<b>Risk Management Solution</b>	To identify, implement and evaluate improvements and new ways of working, ensuring robust processes and governance are in place to maintain accurate data.	G	G
<b>Power Bi Pilot</b>	The project will complete a proof of concept using the 72D Risk Visits and use the results of these to determine how to build capability and capacity more broadly across the organisation	C	
<b>Asset Management</b>	This project aims to increase capacity by delivering an efficient and quicker equipment audit process with improved tracking.	C	

[Return to Contents Page](#)



## » Communications and Engagement

Our staff survey told us that 39% of staff thought our communications were good. Sharing information accurately and effectively, and in a timely manner is critical, particularly for an organisation with the continuous improvement agenda.

A revised Communication and Engagement Strategy is in progress, which captures the feedback we have received from across the Service.

All aspects of this plan are currently 'Green' (G) or complete.

<b>Objective 1: Create and deliver engaging and inclusive internal and external communications, through a multi-channel approach.</b>	Q1	Q2
Review existing social media channels to ensure they continue to positively drive engagement with communities.	G	G
Develop our stakeholder mapping tool to align our activity with the differing levels of stakeholder interaction, communication and engagement needs.	NS	G
Ensure that we improve the accessibility of our comms, duly considering groups protected by the Equality Act (2010).	NS	G
Provide clarity to our workforce on what communications channels are available and suitable for the variety of audiences we need to reach.	NS	G
Review and build our community contacts and relationships to ensure we are offering equal access to our services across the County through our communications.	NS	G
<b>Objective 2: Build an informed and engaged workforce.</b>	Q1	Q2
Ensure open and honest, two-way communications and engagement channels are in place to gauge staff morale and have strategies to address any areas of concern.	G	G
Review how the Senior Leadership Team engagements operate to further support relationship building and trust, seeking to address feedback shared through staff survey results.	G	G
Establish an ongoing engagement programme plan across the Service to drive professional discussion and conversation.	NS	NS
<b>Objective 3: Utilise and embrace new technology to drive effective communications and engagement.</b>	Q1	Q2
Increase engagement and improve communication with on-call colleagues.	G	G
Develop the website and intranet to utilise new tools available and streamline processes for end users.	G	G
Explore the possibility of digitising the majority of our channels to align to our sustainability strategy and data we are seeing nationally around news consumption.	NS	G
Develop and implement appropriate additional external channels and consolidate internal communications channels to more efficiently and effectively drive discussion and engagement across all teams, utilising new and existing systems.	NS	NS

[Return to Contents Page](#)



<b>Objective 4: Effectively measure the success of communications and engagement activity.</b>
Develop an evaluation framework for all communications and engagement activities carried out to ensure it meets the objectives.
Develop a communications and engagement dashboard, using learning to improve.

Q1	Q2
G	G
C	

<b>Objective 5: Ensure appropriate training and development is in place to support our workforce to deliver the Communications and Engagement Strategy.</b>
Ensure appropriate policies and procedures are in place to enable staff to effectively communicate in line with expected standards.
Provide access to continuing professional development (CPD) and access to resources and equipment to enable an efficient and effective Communications and Engagement Team to respond to planned campaign based, crisis and reputational communications. Support the Senior Leadership Team to be prepared to respond to the media demand during a major incident or critical event.

Q1	Q2
G	G
NS	NS



## >> People Pillar

This area of work includes our People Strategy which has eight objectives covering key areas of focus for us as an organisation. Our Health, Safety and Wellbeing Strategy is included within this area in support of safe and healthy people, places and processes.

The below highlights the Objectives with the relevant tracking status as up to end Q2.

<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 and 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
	G	G
	C	
	C	
Effective grievance and discipline action plan implementation (including Misconduct recommendations)		
Review of performance management processes. Action plan detailing priorities linked to misconduct review		
Behavioral competency framework review and implementation. Includes design, engagement, socialisation of new framework		

<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
	G	G
	G	1
	2	
Neuro inclusion action plan looking at actions to support neurodivergent staff in all aspects of work		
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		
Direct Entry Scheme provides an alternative route of entry into the role of Station Manager.		
Review of developments and needs to improve recruitment and retention. Review data and information to help inform decisions	C	
<sup>1</sup> Work paused as at Q2 on the Direct Entry Scheme in line with the NFCC position		
<sup>2</sup> Work paused as at Q1 whilst focus is in delivering a new payroll system		

[Return to Contents Page](#)



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

<b>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.</b>		Q1	Q2
Introduce the Coaching and Mentoring Strategy and associated training <sup>1</sup>		A	A
Create clear pathways for development for key areas such as L&D and green book departments <sup>2</sup>		A	A
Introduce succession planning to ensure better workforce management and development of staff aiding business continuity.		A	A
Developing Potential Strategy to implement an effective talent management process <sup>3</sup>		G	G
Redesign PDR process to take account of Behavioural Competency Framework (BCF) changes and embedded and effective.		G	G
Review Development and Assessment Pathways (DAPS) to ensure the structure and output of development and assessment pathway is meeting need		NS	NS
Reward (recognising performance)		NS	NS

<sup>1</sup> Mandatory Coaching and Mentoring training for supervisors and managers being rolled out, however, despite reminders and comms, courses have been cancelled due to low numbers. This has been given an amber status due to further embedding needed.

<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.

<sup>3</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.

[Return to Contents Page](#)



<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
On-call Working Group action plan: review action plan to prioritise work packages to support On-call staff development		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		G	G
On-call retention of staff		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
Leading the Service fire standard analysis to inform action plan <sup>1</sup> <sup>1</sup> Awaiting confirmation of the gap analysis		A	A
Leading and Developing People Fire Standard		G	G
Review the leadership provision within RBFRS to ensure effective and meets emerging organisation need		G	G
Staff survey action progression and review		G	G
Consider the leadership development requirements of SLT and develop and discharge a plan		NS	G
Assess and determine how visible leadership can be measured. Trusted leadership.		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
Operational competency fire standard action plan		G	G
Officer Training Programme (OTP) Review: Commission new review of OTP and introduce changes agreed through SDS to provide interim solutions and guidance		NS	G
Initiate a review of how operational training is delivered		NS	G
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
Workforce planning task and finish group and associated action plan		C	

[Return to Contents Page](#)



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



## Strategic Asset Investment Framework

The Strategic Asset Investment Framework (SAIF) 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		End 24/25	Q1	Q2
Langley	On Track	G	G	G
	On Budget	G	R	R
Estates Development	On Track	A	A	A
	On Budget	G	G	G
P1 Heat Decarbonisation	On Track	G	A	A
	On Budget	A	G	G
EDI Station Improvements	On Track	A	A	A
	On Budget	A	G	G
Training Centre	On Track	G	G	G
	On Budget	G	G	G
Service House Refurbishment	On Track	G	G	C
	On Budget	G	G	C
LED Priority 2	On Track	G	C	
	On Budget	G	C	
Contaminants Estate Development9	On Track	C		
	On Budget	C		
Slough	On Track	C		
	On Budget	C		

[Return to Contents Page](#)





Fleet and Equipment		End 24/25	Q1	Q2
Fleet: Special Appliances	On Track	A	NS	NS
	On Budget	G	NS	NS
Fleet: Other Ancillary Vehicles	On Track	G	G	G
	On Budget	G	G	G
Equipment	On Track	G	G	G
	On Budget	G	G	G

ICT		End 24/25	Q1	Q2
ESMCP	On Track	R	R	R
	On Budget	R	R	R
Networks	On Track	A	A	A
	On Budget	A	A	A
Hardware	On Track	G	G	G
	On Budget	G	G	G
Software	On Track	G	G	G
	On Budget	G	G	G
Services	On Track	G	G	G
	On Budget	G	G	G

[Return to Contents Page](#)



## Quadrant Four – Assurance

Our Assurance Quadrant brings together progress updates on our areas of work around Risk.

Updates to assess progress are included under this section for:

- >> [Corporate Risk Register](#)
- >> [Audit Plan](#)
- >> [HMICFRS Action Plan](#)
- >> [Fire Standard Implementation Tracking](#)

### 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

### Audit, HMICFRS and Fire Standard Implementation Tracking Status

R	Issues are having an impact on delivery
A	There are issues with the project but these are being managed
G	Project on Track
C	Project complete
NS	Project not yet started <b>or</b> not due to start

[Return to Contents Page](#)



## 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.

Each risk has 3 risk scores:

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

Strategic Risks 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.

### Updates

The risks presented in the following pages were updated mid-December 2025.

#### Strategic Risks

**Score Change:** None

**Closed Risks:** None

**New Risks:** None

#### Service Delivery Risks

**Score Change:** None

**Closed Risks:** 934 Alternative Energy Systems  
968 BOSS Mobile

**New Risks:** 981 Martyn's Case Law  
982 Command Support Alignment and Effectiveness  
983 Command Support Deployment

#### Project Risks

**Score Change:** None

**Closed Risks:** 897 Command Support Effectiveness

**New Risks:** None

For detailed tables and further information see the next pages.

[Return to Contents Page](#)



## >> Strategic Risks

Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
417	Firefighter Safety	If we do not maintain the safety, health and wellbeing of our operational staff through effective training; operational policy and guidance; safe systems of work and means to capture and respond to operational learning, we risk a significant firefighter injury or fatality, a failure to comply with our legal duty and an undermining of the operational effectiveness and competence of our staff. This could significantly impact the effectiveness of our operational response, have a long-term impact on staff welfare and damage our public reputation and trust levels.	25	20	19
506	Volatility of funding	If RBFRS fails to receive sufficient funding, which is becoming more likely given the level of national debt, the Government's fiscal policy, increasing volatility in local funding and increasing budget pressures, we can expect to face further reductions in service delivery and a loss of public trust, which will severely impact on our ability to deliver our statutory duties and strategic objectives.	24	18	16
629	Management of Cyber Security	If we fail to ensure compliance with Cyber Security best practices and guidelines, which is increasingly likely due to ongoing evolution in the sophistication of attack methodologies, we may be exposed to operational degradation, financial loss and/or reputational damage due to reduced availability, integrity or currency of our data and systems.	21	18	12

[Return to Contents Page](#)



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	21	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	15	10



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
879	Organisational Capacity	If RBFRS does not effectively align its organisational resource capacity to priority areas, which is becoming increasingly likely given internally and externally driven demand within an environment of greater spending restriction, then we can expect reduced delivery of core services, negatively impacting on the wellbeing and retention of staff, which will significantly impact our ability to deliver all our annual objectives.	23	23	13
891	FDO numbers, skills & knowledge	If we do not maintain the necessary numbers, skills and knowledge requirements of Flexi Duty Officers personnel, which requires constant attention with our lean operating model, we may see adverse impacts on the provision of incident command and specialist capability, which could significantly impact community safety, firefighter safety and our organisational reputation.	23	18	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

[Return to Contents Page](#)



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
906	IT Disaster recovery	If we suffer a system(s) or data loss, which may become increasingly likely due to ageing systems and increased risks from cyber incidents, then we may be exposed to a disruption in the continuity of key digitally delivered services for a prolonged period of time, which are significant in respect to our capability to deliver all services, reputation, statutory reporting timeframes, or staff wellbeing.	21	18	16
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	18	15

[Return to Contents Page](#)



**>> Service Delivery Risks**

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

[Return to Contents Page](#)



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
909	Fire Investigation	If we are unable to effectively investigate Tier 2 Accidental and Deliberate fires within RBFRS and support a multi-service approach to ISO 17020 accreditation, which is possible due to a lack of internal capability and reliance on a 1 month notice period contract with West Midlands FRS for all accidental Tier 2 fire investigations, then we can expect to encounter issues in supporting Criminal Prosecutions as well as Inquests, Safety boards and other Prevention activities which is significant in respect of public safety and the reputation of RBFRS	21	18	12
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	21	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
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	20	15
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	21	8

[Return to Contents Page](#)



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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
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
966	Protection Capacity	If the focus on remediating unsafe buildings continues, requiring a more formal approach and includes medium rise buildings, which is likely due to the communications from MHCLG, we will experience a significant increase in work for protection teams, which will impact our ability to maintain our inspection schedule for the Risk Based Inspection Programme and complete BSR work as required, which will affect our ability to meet our strategic commitment in supporting 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.	21	21	18

[Return to Contents Page](#)



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
967	Volatility of Protection Staff Numbers	If Protection staff turnover increases, which may be likely due to the increasing and higher paid opportunities available in the private sector, we will experience a greater number of new FSIs in development, which will affect our ability to meet our strategic commitment in supporting 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, due to the length of time it takes for a new FSI to become qualified.	17	17	13
971	Business and Democratic Support Resource	If our resources reduce further, which will become likely given planned absences (sickness and AL), then we can expect the following: reduced capacity and organisational knowledge and resilience, which is significant in respect to supporting SLT.	17	17	13
973	Re-tendering of Hard FM Services	Failure of the hard FM tender process due to inadequate time being available for the process, coupled with incomplete and inaccurate fixed asset data leading to a sub-optimal quality service with poor value for money.	22	20	12
977	Loss of payroll provider	The current payroll provider, IRIS, have confirmed their inability to provide a suitable payroll system and will therefore cease to provide payroll services within 3- 6 months (information as at 18 August 2025). If a suitable replacement is not secured promptly—then payroll operations will be significantly disrupted. This will result in delayed or incorrect payments, the potential for non-payment of salaries and non-compliance with statutory obligations, reputational damage and financial harm, and increased pressure on HR and Finance teams to implement interim solutions	24	24	13



Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
981	Martyn's Case Law	There is a risk that RBFRS may fail to comply with the requirements of Martyn's Law (Protect Duty), leading to insufficient preparedness for a terrorist attack. This includes the possibility that staff are not adequately trained, threat-mitigation measures are not implemented, security procedures are unclear or untested, and vulnerabilities within publicly accessible areas remain unaddressed. A failure to comply or to take proportionate protective-security measures could increase the likelihood and impact of a terrorist incident, result in injury or loss of life, and expose the organisation to legal, financial, and reputational consequences once Martyn's Law comes into force.	25	18	10
982	Command Support Alignment and Effectiveness	If we fail to assure that we have effective and aligned command support arrangements across the Thames Valley, which may become increasingly likely given a lack of coordination, then we can expect sub-optimal command support at incidents which could impact our operational response and effect the safety of our staff and members of the public.	18	18	12
983	Command support deployment	If we deploy both command support units at one operational location, which is certain, given current RBFRS disposition, then we can expect command support vehicles to be unavailable due to wholetime crew mobilisations and a lack of on call crew availability. This is significant in respect to the need to provide a safe system of work for operational incidents utilising the incident command system and a consequent potential impact on staff and public safety.	18	18	12

[Return to Contents Page](#)



## 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 2, or opened during the quarter, was updated Q2 2025. From Quarter 3, these actions will be collected in line with the Corporate Risk Register to reflect the audit status closer to the time of this report's publication.

Audits show below in order of RAG status – commencing with **Red** then **Amber**. Priority rated as Medium = M, Low = L.

Audit title	Action	Progress	Date due (revised if applicable)	Priority	Status
<b>Pensions</b>	<b>2025: FF Pension Administration: 3</b>  WYPF will ensure that the UPM is updated to enable the ABS and RSS calculation. The WYPF will make sure that all active members who are in scope for remedy have their annual allowance checked and taxes are paid.	The UPM and resource at WYPF have been able to provide the majority of active member benefit statements. There are however some remaining, mainly attributed to lack of regulatory clarity.	30/06/2025	M	R
<b>Sickness Absence</b>	<b>2024: Sickness Absence: 1</b>  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 changes or updates in the process.	Numbers on the workshop have been low despite promotion. The Q2 session was cancelled. The Q4 service plan includes development of refreshed content & consideration of a more innovative delivery method.	30/09/2024	L	A
<b>Payroll Provider</b>	<b>2025: Dataplan: 1</b>  Dataplan and RBFPS will review the current contract arrangements and ensure formal documentation exists for any continued service.	Dataplan and WYPF have engaged in discussions in May 2025. Expect contract imminently.	31/12/2025	M	A
<b>Risk and Governance</b>	<b>2025: Risk and Governance: 3</b>  We will complete a training needs analysis for the risk management training across the business for operational and non-operational staff.	Not yet started.	30/06/2025	M	A

[Return to Contents Page](#)



<b>Health &amp; Safety</b>	<b>2022: HS:2</b> 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.	Since January 2025, 34 managers attended a refresher. R&D manage the refresher cycle to ensure compliance. A new supplier has been identified & will tailor the content of the courses.	31/12/2023	M	G
<b>Facilities Management</b>	<b>2022: FM3a</b> We will ensure that the Pre-Planned Maintenance (PPM) is formally reviewed and monitored with progress notes and actions recorded against the PPM.	A new review of PPMs processes are 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.	30/04/2023	L	G
<b>Community Risk Management Plan</b>	<b>2023: CRMP: 1</b> 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.	This work paused to allow for the Intelligence, Risk and Performance (IRP) team restructure. Restructure complete, this work has been programmed into the Corporate Services Service Plan 2025-26.	30/06/2026	L	G
<b>Community Risk Management Plan</b>	<b>2023: CRMP: 2</b> 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.	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.	30/06/2026	M	G
<b>IT General Controls</b>	<b>2024: IT General Controls: 4</b> Management will ensure the New Starter Form is completed and attached to vFire helpdesk tickets for all new starters.	Documentation completed awaiting publication.	31/08/2024	L	G
<b>Risk and Governance</b>	<b>2025: Risk and Governance: 1</b> The Intelligence, Risk and Performance team will work with Risk Owners to review the treatments within the Corporate Risk Register for each risk.	Work to review risk treatments is underway. Workshops scheduled for SLT and treatment owners in Autumn 2025.	30/06/2025	L	G
<b>Risk and Governance</b>	<b>2025: Risk and Governance: 2</b> The Intelligence, Risk and Performance team will undertake a comprehensive review of the current Corporate Risk Register	Review of risk register has begun and SLT workshop scheduled for Autumn 2025. Further workshops for risk treatments planned for November 2025.	30/06/2025	M	G

[Return to Contents Page](#)





<b>Cyber Essentials</b>	<b>2025: Cyber Essentials: 1</b> Where investigation reports include recommendations or lessons learnt, we will record these on the HR tracker spreadsheet and follow through actions to completion.	Completed	30/09/2025	L	G
<b>Cyber Essentials</b>	<b>2025: Cyber Essentials: 1</b> The Patch Management Policy will be extended to include all software applications in use, particularly those that are internet-facing, widely deployed, or critical to business operations.	Awaiting Update	30/09/2025	M	G
<b>Cyber Essentials</b>	<b>2025: Cyber Essentials: 2</b> Management will establish a software inventory and review all software applications that are installed to ensure they are supported by suppliers which provide regular security updates.	Awaiting Update	30/09/2025	M	G
<b>Cyber Essentials</b>	<b>2025: Cyber Essentials: 3</b> Management will update the Information Security Policy to outline the steps to be taken in response to suspected account or password compromise.	Awaiting Update	30/09/2025	M	G
<b>Cyber Essentials</b>	<b>2025: Cyber Essentials: 4</b> Management will update the Information Security Policy to outline the steps to be taken in response to suspected account or password compromise.	Awaiting Update	30/09/2025	M	G
<b>Cyber Essentials</b>	<b>2025: Cyber Essentials: 5</b> Management will review the conditional access policies to ensure multi-factor authentication is enabled for all cloud services, that support multi-factor authentication, for all users.	Awaiting Update	31/08/2025	M	G

[Return to Contents Page](#)





<b>Cyber Essentials</b>	<b>2025: Cyber Essentials: 6</b>  Management will establish a formal documentation of standard builds used to deploy endpoints within the organisation, detailing the operating system used, hardening performed, and configuration such as joining Microsoft Entra ID.	Awaiting Update	30/07/2025	M	G
<b>Cyber Essentials</b>	<b>2025: Cyber Essentials: 7</b>  Management will ensure a formally documented process for processing of joiners, movers, and leavers is established and followed.	Awaiting Update	31/07/2025	M	G
<b>Risk Information</b>	<b>2025: Risk Information: 1</b>  The Service will consider how IBIS can be adapted to incorporate and automate the process issues identified. The Service will consider, how it could deliver an optimal 'operational risk information system'.	Not yet started.	27/02/2026	M	NS
<b>Risk Information</b>	<b>2025: Risk Information: 2</b>  The Service will ensure all documentation used in risk information updating processes are retained as applicable. In addition, the Service will consider enhancing quality control.	Not yet started.	27/02/2026	M	NS
<b>Risk Information</b>	<b>2025: Risk Information: 3</b>  The Service will ensure the Information Sharing Protocol process has been resumed with adequate reporting to the Service Delivery Management and monitor any identified gaps.	Not yet started.	27/02/2026	M	NS
<b>Risk Information</b>	<b>2025: Risk Information: 4</b>  The Service will ensure that all relevant service delivery staff complete their mandatory training and compliance rate monitored. Including outlining a training compliance escalation process.	Not yet started.	27/02/2026	M	NS



<b>Facilities Management</b>	<b>2022: FM6</b> We will ensure that defects are appropriately monitored, tracked and implemented in accordance with the prioritisation schedule where possible.	Defects are monitored by triage process, tracked and monitored throughout. A new process document is to be created for easy access to obtain information. Weekly reports are obtained and updated on Firewatch.	30/04/2023	M	C
<b>Discipline and Grievance</b>	<b>2025: Discipline and Grievance: 1</b> We will ensure that all officers have received appropriate training before involvement in a disciplinary hearing or an investigation.	Completed	30/06/2025	M	C
<b>Discipline and Grievance</b>	<b>2025: Discipline and Grievance: 2</b> We will ensure that complaints are correctly classified as formal or informal within the HR team tracker.	Completed	30/06/2025	L	C
<b>Discipline and Grievance</b>	<b>2025: Discipline and Grievance: 3</b> We will acknowledge all complaints within seven days of receipt.	Completed	30/06/2025	M	C
<b>Discipline and Grievance</b>	<b>2025: Discipline and Grievance: 4</b> We will ensure that investigation checklists are completed for all cases where an internal investigation is undertaken.	Completed	30/06/2025	L	C
<b>Discipline and Grievance</b>	<b>2025: Discipline and Grievance: 5</b> We will clearly communicate any delays to disciplinary investigations to the employee, and evidence of this communication will be retained on file.	Completed	30/06/2025	L	C
<b>Discipline and Grievance</b>	<b>2025: Discipline and Grievance: 6</b> Where investigation reports include recommendations or lessons learnt, we will record these on the HR tracker spreadsheet and follow through actions to completion.	Completed	30/06/2025	L	C



## HMICFRS Action Plan

Our latest [HMICFRS report](#) was published in April 2025. Across eleven areas, it found the service was 'good' in eight areas and 'adequate' in three areas. Improvements were identified within the report and the actions to address these are tracked via our internal governance structures.

All actions and progress up to end Q2 are below:

Section One: Effectiveness	End 24/25	Q1	Q2
The service should make sure it has an effective method to share fire survival guidance information with multiple callers and that it has a dedicated communication link in place	New	A	A

Section Two: Efficiency	End 24/25	Q1	Q2
The service needs to show clear rationale for the resources allocated between prevention, protection and response activities. This should reflect, and be consistent with, the risks and priorities set out in its community risk management plan.	A	A	A
The service should assure itself that its use of enforcement powers prioritises the highest risks and includes proportionate activity to reduce risk	New	A	G

Section Three: People	End 24/25	Q1	Q2
Process to identify, develop and support high-potential staff and aspiring leaders	G	G	G
Understanding and application of Personal development reviews (PDR)	G	G	G

[Return to Contents Page](#)



## Fire Standard Implementation Tracking

The Fire Standards Board oversees the identification, organisation, development and maintenance of the professional standards for fire and rescue services. As each standard is published, we undertake a gap analysis and create an action plan in support of any identified gaps. Standards in Progress are below, in order of Action Plan Tracking status:

Fire Standard	Owner	Manager	Fire Standard publication date	Gap analysis status	Action Plan progress
Operational Response - Preparedness	Tom Brandon	Andy Stockwell	Feb-21	C	A
Community Risk Management Planning	Annie Pratt	Graeme Hartley	May-21	C	A
Fire Investigation	Dave Crease	Tim Benham	Apr-22	C	A
Data management	Annie Pratt	Anna Smy	Aug-22	C	A
Leading the Service	Wayne Bowcock	Angela Smith	Dec-22	C	A
Operational Response - Competence	Becci Jefferies	Becci Jefferies	Feb-21	C	G
Code of Ethics	Becci Jefferies	Lucy Greenway	May-21	C	G
Protection	Dave Crease	Matt Hoult	Sep-21	C	G
Prevention	Dave Crease	Matt Hoult	Jul-21	C	G
Emergency Preparedness and Resilience	Tim Readings	Alison Hazelton	May-22	C	G
Leading and Developing People	Wayne Bowcock	Becci Jefferies	Dec-22	C	G
Fire Control	Tim Readings	Simon Harris	Mar-23	C	G
Communication & Engagement Consultation	Annie Pratt	Mark Antell	Mar-23	C	G
Internal Governance and Assurance	Annie Pratt	Angela Smith	Jun-24	C	G
Emergency Response Driving	Becci Jefferies	Tommy Cliff	Feb-21	C	C
Operational Response - Learning	Tim Readings		Feb-21	C	C
Safeguarding	Dave Crease	Darci Hellend	Jan-22	C	C
Procurement and Commercial	Conor Byrne	Shuvham Bhandari	Sep-24	C	NS
Digital and Cyber	Lukasz Wrona		Sep-24	G	NS

[Return to Contents Page](#)



# Appendices

- >> Appendix A - Home Office Incident Type Definitions**
- >> Appendix B - Performance Measures and Definitions**
- >> Appendix C - Equality, Diversity and Inclusion Data**
- >> Appendix D - Glossary**





## Appendix A - 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.

[Return to Contents Page](#)



**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.



## Appendix B - Performance Measures and Definitions

### >> Service Provision Definitions

Measure		2025/26 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	34 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	112 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	207 max	The total number of secondary fires that have been started deliberately. The target is a 5% reduction on the five-year average.
<b>Prevention Measures</b>			
5	Increase the number of Referrals for Safe and Well Visits received from our partners	5%	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	45%	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.
8	Percentage of High Risk Safe and Well Referrals completed within 14 days	64%	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.

[Return to Contents Page](#)



**Protection Measures**

9	Proportion of Fire Safety Audits conducted against premises identified as High or Very High-Risk in our Risk Based Inspection Programme completed in timescale	Monitor	A Fire Safety Audit is carried out to enforce the Regulatory Reform Order (RRO) 2005. Our Risk-Based Inspection Programme targets the riskiest premises in the county for inspection. Fire Safety Audits can also result from complaints or can be carried out after an incident or for training purposes. This measure allows us to monitor how our resources are being targeted at risk.
10	Number of Fire Safety Audits completed	Measure of Volume	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'.
11a	Percentage success when cases go to court	80%	RBFRS prosecute serious cases following Fire Safety Audits. A successful outcome at court is a finding or admission of guilt.
11b	Number of informal actions taken as a result of Protection intervention	Measure of Volume	To demonstrate the use of a range of legislative tools available to the Protection Team to support improvements in fire safety and the protection of the public and staff. We will separately monitor the formal actions across different premise types and occupancy
11c	Number of formal actions taken as a result of Protection intervention	Measure of Volume	To demonstrate the use of a range of legislative tools available to the Protection Team to support improvements in fire safety and the protection of the public and staff. We will separately monitor the formal actions across different premise types and occupancy
12	Percentage of statutory fire consultations completed within the required timeframes	95%	Statutory fire consultations have a legally defined timeframe in which they must be completed. Types of consultation include licensing and building regulations.

**Response 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	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 Measures**

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.

[Return to Contents Page](#)



19	Percentage of Automatic Fire Alarm calls where RBFRS did not attend	45% (min)	In some circumstances we are able to seek confirmation before attending an Automatic Fire Alarm Call, enabling us to be more efficient.
20	Percentage of respondents experiencing a fire, fire safety audit, or a safe and well visit, satisfied with the service received	95%	A customer feedback questionnaire is sent to those who have experienced a dwelling fire, to business owners/managers who have experienced a fire in their commercial premise, to business owners/managers who have had a full fire safety audit, to a sample of individuals who have received a Safe and Well Visit asking about their satisfaction and experience with the service they received from RBFRS.
21	Number of complaints received	Measure of Volume	The number of complaints made to RBFRS about any aspect of our service or staff.
22	Number of compliments received	Measure of Volume	The number of compliments received by RBFRS about any aspect of our service or staff.

**>> Corporate Health**

Measure		2025/26 Target	Definition/Rationale
<b>Human Resources and Learning &amp; Development</b>			
23	Percentage of working time lost to sickness across all staff groups	5% (max)	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.
24	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.
25	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>			
26	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>			
27	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.
28	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).

[Return to Contents Page](#)

**Freedom of Information**

29	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).
30	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.
31	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.
32	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.
33	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 adhere 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.

[Return to Contents Page](#)



## Appendix C - Equality, Diversity and Inclusion Data

Measure	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	2025/26 YTD	Previous year (24/25) to date	Number of authorised posts at end Q2 2025/26
---------	-----------	-----------	-----------	-----------	-------------	-------------------------------	--

### Staff In Post:

Wholetime	379	373			373	381	377 (363 if you remove x10 Resilience FF's)
On-call	60	57			57	61	65
Control	41	41			41	41	39
Green Book	201	203			203	186	202
<b>Total</b>	<b>681</b>	<b>674</b>			<b>674</b>	<b>669</b>	<b>683</b>

### Staff Turnover:

Wholetime	5	6			11	15
On-call	4	1			6	4
Control	0	0			0	0
Green Book	9	7			16	18
Total Number of Leavers (Heads)	18	14			33	37
Staff in Post (SIP)	681	674			678	662
<b>Percentage of Leavers vs. SIP</b>	<b>2.6%</b>	<b>2.1%</b>			<b>2.6%</b>	<b>3.2%</b>

### Female Staff Percentage:

Wholetime	8.4	8.6			8.6	7.1%
On-call	10.0	10.5			10.5	8.2%
Control	65.9	65.9			65.9	65.9%
Green Book	57.7	59.1			59.1	60.2%
<b>Of Total Staff</b>	<b>26.9%</b>	<b>27.5%</b>			<b>27.5%</b>	<b>25.6%</b>

### Ethnicity (Percentage of Staff Non-White British):

Wholetime	6.3	6.4			6.4	4.5%
On-call	11.7	12.3			12.3	11.5
Control	9.8	9.8			9.8	9.8%
Green Book	22.9	23.2			23.2	19.4
<b>Of Total Staff</b>	<b>11.9%</b>	<b>12.2%</b>			<b>12.2%</b>	<b>9.6%</b>

[Return to Contents Page](#)

**Staff Ethnicity Profile:**

Ethnicity	Wholetime	On-call	Control	Green Book	Total [All Staff]
White British	320	49	36	149	554
Other Ethnicity	24	7	4	47	82
Prefer not to say	29	1	1	7	38
<b>Total</b>	<b>373</b>	<b>57</b>	<b>41</b>	<b>203</b>	<b>674</b>

**Staff Age Profile:**

Age Group	Wholetime	On-call	Control	Green Book	Total [All Staff]
25 and Under	28	5	5	18	56
26 - 35	104	15	14	37	170
36 - 45	113	24	8	46	191
46 - 55	113	9	11	56	189
56 - 65	15	4	3	41	63
66 and Over	0	0	0	5	4
<b>Total</b>	<b>373</b>	<b>57</b>	<b>41</b>	<b>203</b>	<b>674</b>

**Staff Gender Profile:**

Gender	Wholetime	On-call	Control	Green Book	Total [All Staff]
Female	32	6	27	120	185
Male	317	50	14	79	460
Prefer not to say	24	1	0	4	29
<b>Total</b>	<b>373</b>	<b>57</b>	<b>41</b>	<b>203</b>	<b>674</b>

**Staff Disability Profile:**

Number of employees who have declared a disability	Q1	Q2	Q3	Q4	2025/26 YTD	n/a New	Previous year (24/25) to date
Wholetime	53	51			53		21
On-Call	3	3			3		0
Control	7	6			7		2
Green Book	45	44			45		12
<b>Total</b>	<b>108</b>	<b>104</b>			<b>108</b>		<b>35</b>

[Return to Contents Page](#)



This table shows the % breakdown against Berkshire benchmarking data:

Staff in Post	% Female	Berkshire %	% with a disability	Berkshire %	% Ethnic Minority	Berkshire %
Wholetime	8.4%	50.5%	14%	13%	2.4%	26.9%
On-Call	10%	50.5%	5%	13%	1.7%	26.9%
Control	65.9%	50.5%	17.1%	13%	4.88%	26.9%
Green Book	57.7%	50.5%	22.4%	13%	15.9%	26.9%
<b>Total</b>	<b>26.6%</b>	<b>50.5%</b>	<b>15.9%</b>	<b>13%</b>	<b>6.5%</b>	<b>26.9%</b>





## Appendix D - Glossary

Abbreviation	Meaning	Context
ACFO	Assistant Chief Fire Officer	
AFA	Automatic Fire Alarm	
AIO	Accident Investigation Officers	
AFI	Action from Inspection	
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	

[Return to Contents Page](#)



<b>DIM</b>	Detection Identification Monitoring	Mobilised from Oxfordshire Fire and Rescue Service
<b>DPA</b>	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>FSA</b>	Fire Safety Advisor	
<b>FSG</b>	Fire Survival Guidance	
<b>FSI</b>	Fire Safety Inspector	
<b>FSIOs</b>	Fire Safety Inspecting Officers	
<b>GDPR</b>	General Data Protection Regulation	
<b>GM</b>	Group Manager	

[Return to Contents Page](#)



<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

[Return to Contents Page](#)



<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 <a href="#">Civil Contingencies Act 2004</a>
<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>NoD</b>	Notice of Deficiency	
<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>PACE</b>	Police and Criminal Evidence	A PACE Interview is any interview conducted in line with the <a href="#">Police</a>

[Return to Contents Page](#)



		<a href="#">and Criminal Evidence Act 1984</a> (PACE). This piece of legislation sets out the powers and duties of the interviewer, the rights of suspects and the admissibility of evidence.
<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>RRG</b>	Response Resourcing Group	
<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	

[Return to Contents Page](#)






<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	

[Return to Contents Page](#)



<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	

## **ROYAL BERKSHIRE** **FIRE AND RESCUE SERVICE**

-  RoyalBerksFRS
-  @RBFRSOfficial
-  RoyalBerkshireFire
-  Royal Berkshire Fire & Rescue Service
-  [rbfrs.co.uk](http://rbfrs.co.uk)