



Quarterly Performance Report

Q3 2025 October – December





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

 Email us: 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.



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Introduction

This is the Quarter Three (Q3) 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



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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.

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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.

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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 or 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

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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](#).

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Service Provision Summary



73.3%

% Occasions we responded to emergency incidents within 10 minutes



1,937

Total number of emergency incidents in Berkshire



230

Total number of Fire Safety Audits completed



1,462

Safe and Well Visits completed in Berkshire



78.8%

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



248

Statutory fire consultations completed



16

Number of compliments received



4

Service delivery Hub exercises completed



53

Visits to Buildings in Interim Measures

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Incident Trends

In Quarter 3 2025/26 we responded to 1,937 emergency incidents in Berkshire – an increase of 170 compared to the same quarter last year.

The increase in emergency incidents attended saw a peak of 689 incidents in October which reduced in November and again in December to a count of 592 incidents.

Primary fires accounted for around 10%, Secondary fires for 8% and Special Services for 26% of all incidents attended in Q3 2025/26. The number of incidents for Primary, Secondary fires and Special services deviated little by month for October, November and December.

False Alarms were at their highest in October with 378 incidents attended (55% of all attended), which reduced in November to 363 (53%) and then in December to 283 (41%). In all, for the quarter, 53% of attended incidents were for False alarms.

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.

Q3 is slightly above 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.

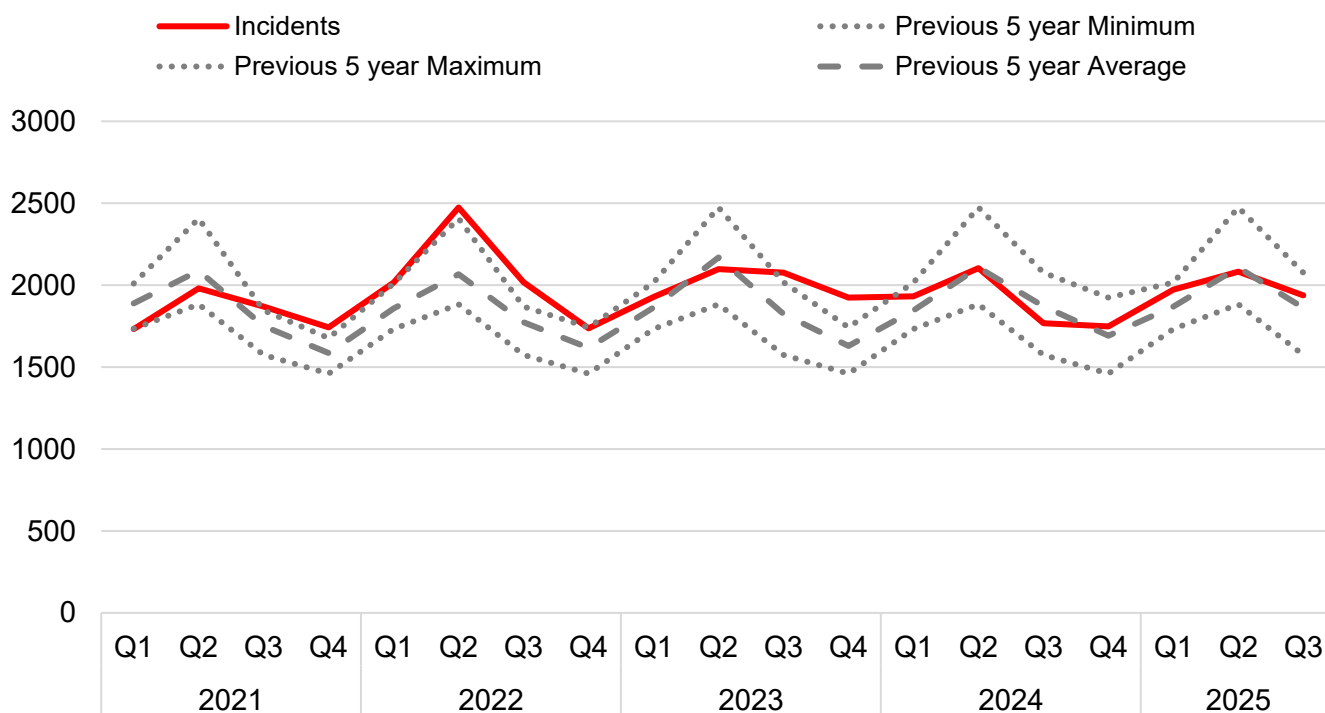


Figure 1: Total Number of Incidents

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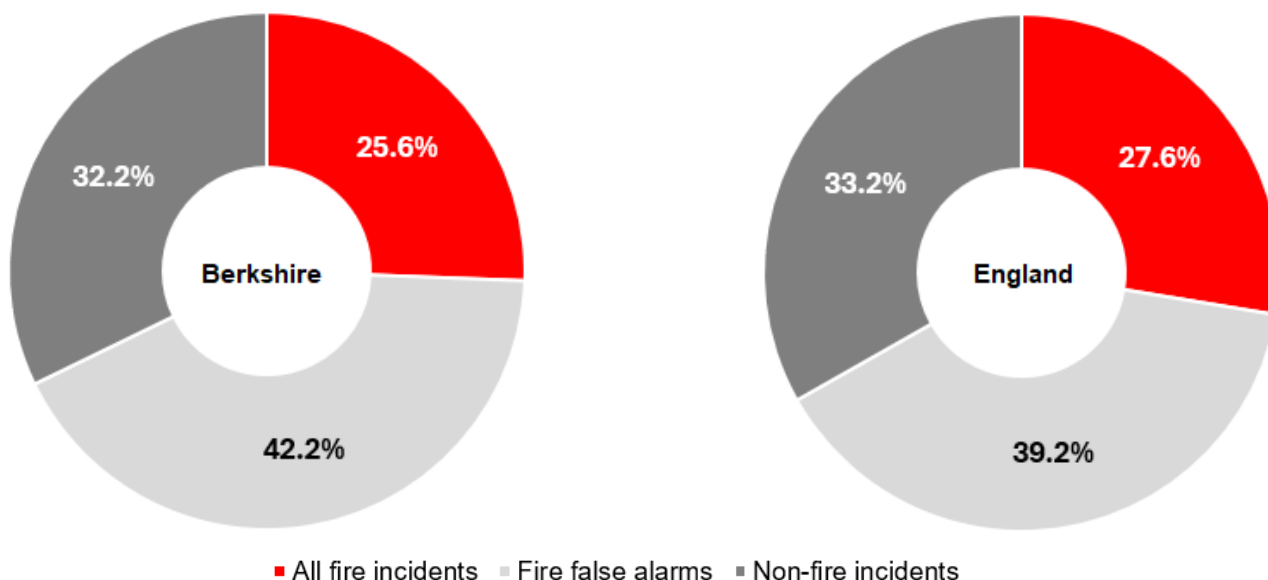


Benchmarking

Benchmarking data has been sourced from Ministry of Housing, Communities & Local Government (MHCLG) Fire statistics.

Fire statistics data has been taken from our incident data and standardised across fire services. Due to the re-categorising and grouping of data, figures may not appear to match exactly when compared to what we as RBFRS may report.

Figure 2 and Figure 3 shows rolling 12-month incident data up to 30 September 2025. In Figure 2, incidents are categorised into overall fire incidents, non-fire incidents and fire false alarms compares Berkshire against England. This demonstrates similar proportions between the service and nationally.



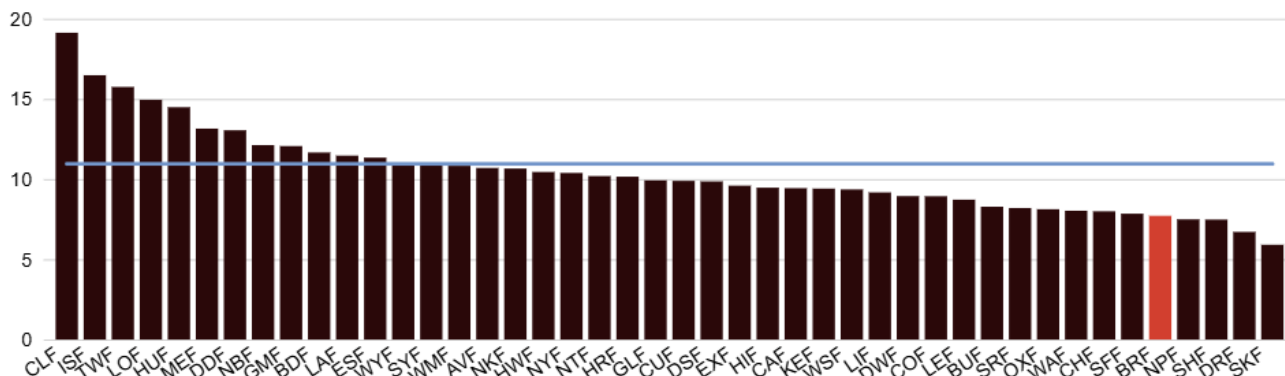
Source MHCLG [FIRE0102](#) [FIRE0901](#)

Figure 2: Incident Breakdown

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Figure 3 shows Berkshire in the in the 'lower than typical' range. The incidents per 1,000 population is 7.7 for Berkshire (BRF), which is below the England figure of 11.

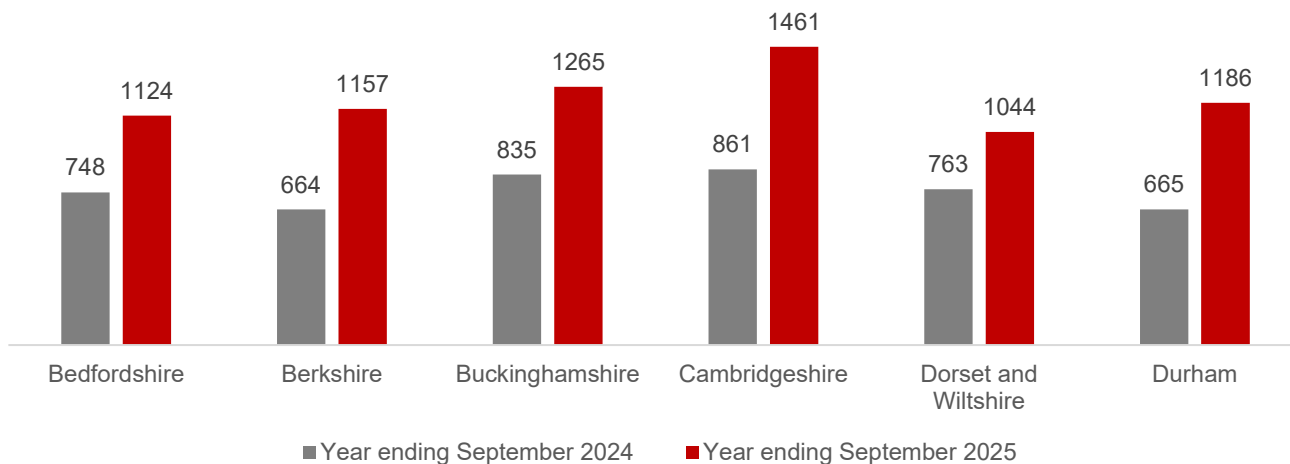


Source MHCLG [FIRE0102](#) [FIRE0901](#)

Figure 3: Rolling 12-month incidents per 1,000 population

Figure 4 below clusters Bedfordshire, Berkshire, Hertfordshire, Leicestershire, Northamptonshire and Surrey (a grouping previously been used for other benchmarking clusters), to show the number of secondary fires recorded for the past two 12-month rolling periods ending in September.

Berkshire attended similar numbers to Bedfordshire and Durham. All areas increased year-on-year.



Source MHCLG [FIRE0102](#)

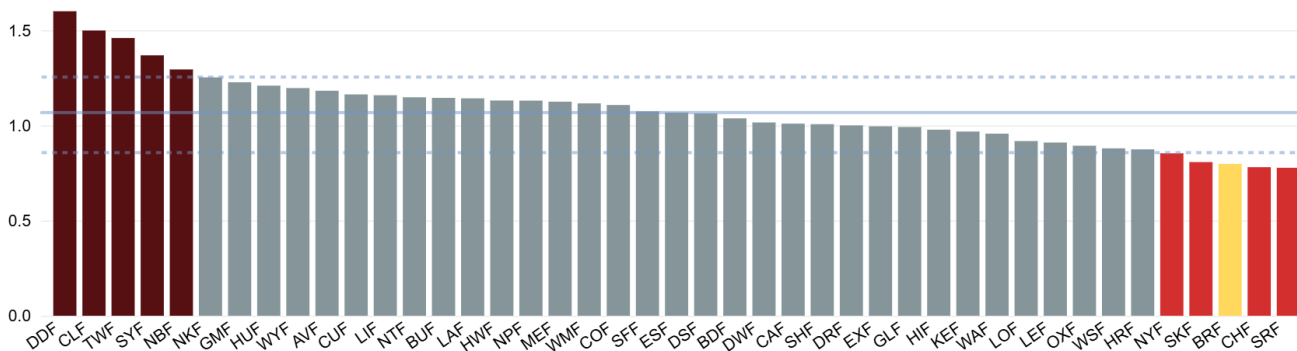
Figure 4: Secondary Fires attended

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Figure 5 shows Berkshire in 2024/25 in the 'lower than typical' range against other services in England with 0.8 primary fires against the England rate of 1.1. This compares as per 1,000 population. A higher than typical rate of primary fires would represent a high risk area.

Berkshire attended 203 Primary fires in Q3 2025/26, compared to 201 in Q3 2024/25 and 192 in Q3 2023/24 – a stable trend.

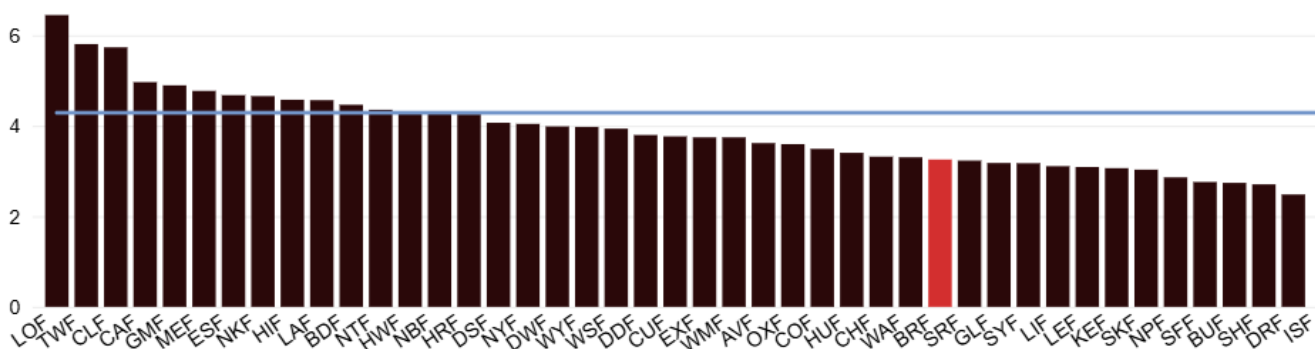


Source MHCLG [FIRE0102](#) [FIRE0901](#)

Figure 5: Incidents – Primary Fires per 1,000 population in Berkshire in 2024/25

According to the rolling 12-month total (up to 30 September 2025, the end of Q2), False alarms attended by RBFRS in Berkshire remained lower than the England average, as illustrated in Figure 6. Berkshire attended 3,231 in total which is 3.3 false alarms per 1,000 population, compared to the 4.3 in England.

In Q3 more false alarms were attended than in previous quarters. Reasons for this include call handling, where call challenge has or has not been utilised.



Source MHCLG [FIRE0102](#) [FIRE0901](#)

Figure 6: False Alarms Attended per 1,000 population by service

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Corporate Measures: Service Provision Data Summary

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

Corporate Measure 2: Number of non-fatal fire casualties				2025/26 Target: 34 max	
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	17	15	11	6	43
Target (max)	9	7	9	9	25
2025/26 Actual	7 ↑	7 ↑	2 ↑		16 ↑
Non-fatal fire casualties have declined compared to Q2 this year and significantly so, compared to Q3 of the previous year. This may be indicative of the effectiveness of our fire safety initiatives, community engagement, proactive prevention strategies and targeted campaigns.					

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Corporate Measure 3: Number of deliberate primary fires					2025/26 Target: 112 max
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	21	26	19	15	66
Target (max)	28	29	28	27	85
2025/26 Actual	27 ↓	23 ↑	21 ↓		71 ↓

Vehicle fires totalled 19 of the 21 incidents in this quarter. These were discussed with Thames Valley Police (TVP) and escalated for action through the Community Problem Solving Task Group. Evidence suggests that proactive measures to reduce opportunities for vehicle fires are more effective than reactive policing responses. Subsequently, Prevention teams continue to work closely with TVP and other community groups. Community Safety Partnerships (which bring together housing, highways, planning, public realm, antisocial behaviour officers, the fire service, and police) have coordinated an action plan to reduce the likelihood of vehicle fires. This includes a focus on improving street lighting, removing non-motorised and abandoned vehicles, as well as strengthening community engagement.

Corporate Measure 4: Number of deliberate secondary fires					2025/26 Target: 207 max
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	53	51	32	42	136
Target (max)	53	52	51	51	156
2025/26 Actual	70 ↓	63 ↓	17 ↑		150 ↓

This quarter recorded a significant reduction in deliberate secondary fires across Berkshire, with marked reduction throughout the county. Since Q2, extensive partnership activity undertaken such as targeting identified fire-setting hotspots is likely to have contributed to this outcome.

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Prevention Measures

Corporate Measure 5: Increase the number of Referrals for Safe and Well

2025/26 Target: 5%

Visits received from our partners

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	12.4%	16.0%	4.8%	36.9%	10.9%
Target	5%	5%	5%	5%	5%
2025/26 Actual Number	1,343	1,321	1,427		4,090
2025/26 % change	13.3% ↑	13.2% ↓	19.5% ↑		15.4% ↑

In Q2, the number of Agency/Partner referrals saw a decline in the number of requests received, albeit overall exceeding the target. The volume in number received have increased year-on-year which impacts the capacity of staff to complete visits, and there is a move to emphasise targeted risk rather than increasing referral volume.

In total 1,462 Safe and Well visits were completed during Q3. This number includes visits resulting from referrals from a range of referral sources - not only those designated as partners such as 'self-referrals' received.

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 Q3
Previous Year (2024/25)	76.9%	70.8%	84.6%	71.4%	77.6%
Target	100.0%	100.0%	100.0%	100.0%	100.0%
2025/26 Actual	90.9% ↑	82.8% ↑	78.8% ↓		84.2% ↑

This measure previously calculated the percentage of referrals achieved in the timeframe of 48 hours, omitting those visits which were deemed not achievable in timeframe as per Policy. With this calculation, the measure has tended to return 100% compliance each quarter. From Q3 2025/26, it was agreed internally that figures will be published counting the outcomes for all referrals. This will produce greater transparency that supports learnings by gaining insight of barriers or challenges faced.

The 2024/25 previous year and quarter also 2025/26 quarter figures detailed here have been recalculated and now align to this methodology. This revised reporting approach for Threat of Arson referrals presents a more realistic picture of performance albeit this indicates a fall below the 100% target.

In Q3, seven referrals out of 33 received fell outside the timeframe. Of these, four were due to the person to be visited requesting dates outside the 48 hours.

The other reasons were:

- » Person to be visited availability outside 48-hour window.
- » Technician availability affected by leave, existing commitments and low staffing.
- » Safety concerns about attending in marked vehicles over a weekend.

The Safeguarding Team always prioritise these referrals and attempt contact with victims within 48 hours of receiving a referral to arrange the earliest and safest visit possible.

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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 Q3
Previous Year (2024/25)	31.0%	28.6%	16.2%	28.2%	24.5%
Target	45%	45%	45%	45%	45%
2025/26 Actual	35.7% ↑	19.6% ↓	29.0% ↑		28.4% ↑

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 Q3
Previous Year (2024/25)	44.2%	43.3%	47.5%	47.4%	45.1%
Target	64.0%	64.0%	64.0%	64.0%	64.0%
2025/26 Actual	52.2% ↑	39.5% ↓	40.9% ↓		43.8% ↓

Very High and High Risk Referral measures continue to experience known issues which impact the feasibility of meeting target timeframes for visits. Prevention capacity and the complexity of high-risk cases continue to pose risks to meeting targets in timescale. Equally, RBFRS continues to receive a rise in volume of high-risk referrals.

For the majority of referrals completed outside of target timeframe, the reasons were factors beyond service control. Examples of these include client or family availability, the requirement for joint visits, or clients being admitted to hospital. Difficulties in contacting clients were a recurring challenge, with multiple telephone calls and doorstep visits often required to establish contact. A small number of cases did not meet the target due to clients declining the service. The complexity of arranging visits increases substantially as household risk levels rise. This is expected to result in further challenges in meeting target timescales.

Prevention staffing levels reduced unexpectedly during this quarter. Prevention Managers are reviewing workload allocations and identifying opportunities for operational crews to support delivery by undertaking additional High Risk visits.

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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 Q3
Previous Year (2024/25)	n/a	22.4%	10.4%	0.0%	11.4%
2025/26 Actual	0.0%	25.0% ↑	25.7% ↑		21.5% ↑

A marked increase in Fire Safety Audits completed; Q3 audit volumes exceeded any previous quarterly total. Fire Safety Inspecting Officers (FSIOs) also closed 141 against the RBIP in Q3. This evidences that workload management is taking effect.

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

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	205	204	151	113	560
Target	~	~	~	~	~
2025/26 Actual	167 ↓	186 ↓	230 ↑		583 ↑

Q3 is higher than any previous year quarter and already exceeded the total number of audits completed in the last year. As at Q3, staff were also managing 38 properties in interim measures and a steady increase of formal notices being issued.

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Corporate Measure 11a: Percentage success when cases go to court					2025/26 Target: 80%
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	100%	0	0	0	100%
Target	80%	80%	80%	80%	80%
2025/26 Actual	No cases ↓	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 Q3
Previous Year (2024/25)	42	44	39	90	125
Target	~	~	~	~	~
2025/26 Actual	39 ↓	29 ↓	41 ↑		109 ↓

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 Q3
Previous Year (2024/25)	10	2	1	6	13
Target	-	-	-	-	-
2025/26 Actual	12 ↑	9 ↑	10 ↑		31 ↑

An increase in informal actions in Q3 is linked to Corporate Measure 10: Number of Fire Safety Audits completed, which returned an increase of 44 compared to Q2.

Formal actions this year are following a more rigorous approach to managing buildings, which accounts for the steady levels seen year to date, which has increased compared to the previous year total.

Corporate Measure 12: Percentage of statutory fire consultations completed within the required timeframes					2025/26 Target: 95%
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	99.2%	99.6%	96.1%	92.8%	98.4%
Target	95%	95%	95%	95%	95%
2025/26 Actual	94.4% ↓	92.9% ↓	97.6% ↑		94.9% ↓

In total 248 consultations were completed – of those 242 were in timeframe, 6 out of timeframe. Three of those out of timeframe were delayed due to the consultations being complex, which include external dependencies and factors.

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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 Q3
Previous Year (2024/25)	74.7%	68.5%	73.2%	72.2%	72.0%
Target	75.0%	75.0%	75.0%	75.0%	75.0%
2025/26 Actual	71.0% ↓	67.3% ↓	73.3% ↑		70.4% ↓

Emergency response times improved in Q3 compared with Q2 but remain below the 75% target overall. Response performance remains sensitive to infrastructure disruption, staffing availability, and on-call resilience.

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

	Q1	Q2	Q3	Q4	Year to Q3
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% ↑	96.2% ↓		96.4% ↔

Wholetime appliance availability remains strong overall but dipped in December due to seasonal and staffing factors; improvement is expected in Q4 following policy and staffing changes.

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	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	34.1%	35.5%	24.7%	36.6%	31.4%
Target	50.0%	50.0%	50.0%	50.0%	50.0%
2025/26 Actual	34.3% ↑	32.8% ↓	28.4% ↑		31.8% ↑

On-call appliance availability remains below target but is forecast to improve in Q4 due to new recruits, returning staff, and additional dual-contract personnel.

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

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	91.2%	70.1%	82.6%	96.7%	81.3%
Target	100.0%	100.0%	100.0%	100.0%	100.0%
2025/26 Actual	90.1% ↓	84.8% ↑	79.9% ↓		84.9% ↑

A seasonal reduction was anticipated in December, however unforeseen circumstances associated with the festive period further impacted Q3. Recent changes to the leave policy, combined with the return of staff from light duties, increased On-Call availability. The continued benefits of our Community Risk Management Plan Priority 6 are expected to contribute positively to performance in Q4.

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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 Q3
Previous Year (2024/25)	71.0%	54.7%	58.4%	18.3%	60.2%
Target	100.0%	100.0%	100.0%	100.0%	100.0%
2025/26 Actual	72.5% ↑	51.0% ↓	46.7% ↓		55.0% ↓

During Q3 a digitalised pilot process was put into place to support crews at four stations to identify visits required, to improve visibility. The number of overdue visits is falling each month. This is a positive outcome of refreshed communication about the importance of completing operational risk visits.

Corporate Measure 18: Number of Service Delivery Hub exercises completed **2025/26 Target: 12**

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	3	3	3	2	9
Target	3	3	3	3	3
2025/26 Actual	2 ↓	3 ↔	4 ↑		9 ↔

The nature of planning exercises is dynamic due to the purpose, intent and arrangements surrounding all those involved. Q1 reflected this. Q3 met target and this measure is back on track to meet the overall target of 12 exercises per annum.

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 Q3
Previous Year (2024/25)	24.9%	32.7%	51.5%	52.6%	37.0%
Target	45.0%	45.0%	45.0%	45.0%	45.0%
2025/26 Actual	55.9% ↑	55.6% ↑	52.8% ↑		54.6% ↑

The percentage of non-attended Automatic Fire Alarms (AFAs) has levelled out, steadying at around 54%. This was an anticipated outcome of the revision to the Thames Valley FRS policy. This change was enacted following public consultation and is in line with the expectations of HMICFRS.

There have been no reported injuries or fatalities following non-attendance at an automatic fire alarm.

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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 Q3
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	99.0% ↓	99.0% ↑	100% ↑		99.1% ↑

Customer satisfaction remains very high at 100% in Q3 and 98.9% year-to-date, exceeding the 95% target. While satisfaction rates are high, the response rates for any category other than Safe & Well visits is very low.

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

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	1	6	9	6	16
Target	~	~	~	~	~
2025/26 Actual	9 ↓	4 ↑	9 ↔		22 ↓

Complaints increased – some attributed to new staff or those in training. All were investigated and where relevant, remedial action in place.

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

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	7	12	10	8	29
Target	~	~	~	~	~
2025/26 Actual	12 ↑	13 ↑	16 ↑		41 ↑

Compliments increased in response to attendance at both incidents and through community engagement.

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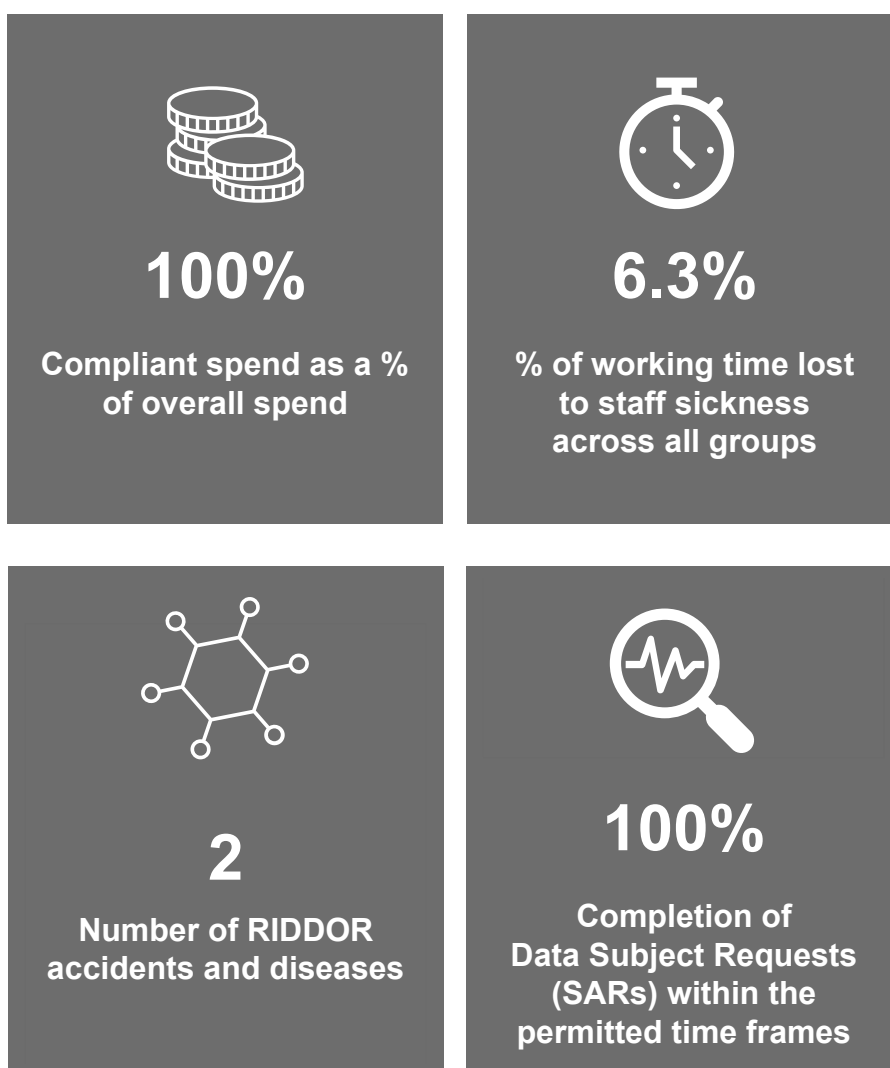


Quadrant Two – Corporate Health

Corporate Health performance is monitored in relation to human resources (HR) and learning and development, health and safety (H&S) 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



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HR Support for Staff

During this quarter the number of case reviews and meetings increased. These supported return to work and addressed well-being and neurodiversity. Hub meetings continue to take place with progress made in some long term sick cases returning to work on light duties. Rehabilitation plans are being put in place to support a return to full operational duties.

The light duties pool remains in place and is ongoing, as referenced in the last quarter. Individuals in the pool are being assigned work to support functions across the service. This pool allows the individual to do meaningful work whilst on light duties to ensure full rehabilitation which will have a positive effect on their mental health.

Welfare support and signposting to sources of support remains ongoing with regular check ins on individuals who may have been struggling. Support continues to be provided, where funding has been authorised to access additional services such as therapy sessions through Psych Health.

Sickness Absence across other Fire and Rescue Services

Top 3 reasons by Contract Type

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

Percentage of working time lost Q2 25/26

Contract	Average across All FRS	RBFRS	Ranking
Wholetime	5.7	5.8	16/40
Control	7.9	5.1	5/34
Green Book	3.28	2.2	33/41

In comparison to other FRS the majority of reasons for RBFRS sickness absence are similar.

- Mental Health, Respiratory and MSK (musculoskeletal) consistently appear across all contract types.
- RBFRS remained consistent during Q1 and Q2.

The average percentages of all FRS sickness working time lost increased for Wholetime but reduced for both Green Book and Control. Green Book has made a considerable improvement from 14/39 in Q1 to 33/41 in Q2.

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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 Q3
Previous Year (2024/25)	5.4%	6.6%	7.7%	6.6%	6.5%
Target	5.0%	5.0%	5.0%	5.0%	5.0%
2025/26 Actual	5.3% ↓	4.9% ↓	6.3% ↓		5.5% ↓

The levels of days lost to sickness and percentage of working time lost to sickness increased this quarter.

For the past five years, the period from Q2 to Q3 has consistently seen an increase in sickness.

This increase is due to:

- » The total number of days lost to sickness this quarter increasing (1,717 in Q3 v 1,370 in Q2).
- » Trends show an increase in respiratory absence over the last 5 years an increase from Q2 to Q3.
- » Long-term sickness cases increased by 17% (899 in Q2 to 1088 in Q3).
- » Short-term increased by 25% (471 in Q2 v 629 in Q3).
- » Sickness increased across all contract types this quarter.
- » MSK increased by 6%.
- » Mental Health, Respiratory and MSK increased this quarter. Gastro and Other absences saw a decrease. Further analysis on these absence types is available within this report.

The top three reasons for sickness absence this quarter were Mental Health, MSK and Respiratory.

These reasons will fluctuate quarter on quarter and will also be impacted by seasonal factors.

	Q3 25/26		Q2 25/26		Q3 24/25	
	Days Lost	Occurrences	Days Lost	Occurrences	Days Lost	Occurrences
Gastro	157	34	187	43	99	30
Mental Health	772	37	468	19	1031	34
Musculo Skeletal	407	45	383	39	307	36
Respiratory	205	68	70	24	272	77
Other	179	49	262	47	394	65
Total Days Lost	1717	232	1370	172	2103	242

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Sickness by Contract Type

Sickness for all contract types increased: Control 24%, On-Call 74%, Green Book 16%, Wholetime 18%.

Wholetime

- » Absence increased from 985 days last quarter to 1,196 days this quarter due to MSK, Mental Health and Respiratory increasing.
- » Total days lost to sickness for this staffing group is 20% lower than the same period last year (1487 days).
- » Mental Health saw a 39% increase this quarter. Whilst the number of episodes increased, this is 28% lower than the same time last year.
- » MSK increased by 12% this quarter and the number of episodes also increased from 31 to 38. This is 46% higher than the same time last year. The number of episodes is higher than last year. Of the 38 wholetime MSK cases, seven were off last quarter 31 are new cases in Q3. Of these new cases seven were long and 24 were short term cases.
- » There were 27 episodes of gastro sickness. Following review of the accident report for Q3, one period of absence (three days) was noted as related to gastro following local water rescue training. HR and Health & Safety teams will continue to monitor this on an ongoing basis.
- » End Q3 saw 23 individuals remaining absent, equating to 592 days.

On-Call

- » Absence increased this quarter and is higher than the same period last year (51 days).
- » Four headlining categories contributed to days lost: Mental Health, Headaches, Gynaecological and Colds.
- » Mental Health days lost increased when compared to Q2 and Q3 last year.

Green Book

- » MSK, Respiratory and Headaches all increased.
- » Mental health days lost remains high, with the number of days lost the same as Q2. An increase in episodes from three in Q2 to nine in Q3 suggests increasing prevalence within this staff group.
- » Gastro reduced this quarter.
- » Four active employees remain off sick due related to MSK, Gastro and Respiratory at the quarter end.

Control sickness

- » Sickness increased this quarter but proved lower compared to Q3 last year.
- » MSK, Headaches and ENT all reduced compared to Q2.
- » Respiratory, Skin Condition, Mental Health and Gastro all increased, as these four categories did during the same period last year.

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Mental Health

Mental Health sickness days lost increased for all contract types this quarter.

- >> 45% of all sickness days lost this quarter were Mental Health related.
- >> Core categories of mental health absence were work-related stress, stress non- work-related and 'other'.

Musculoskeletal (MSK) Sickness

- >> Sickness days has increased this quarter.
- >> Top three reasons for MSK absence were lower limb, back and neck.
- >> MSK Sickness levels reduced for On-Call and Control, increased for Wholetime and Green Book.
- >> MSK absence is higher compared to Q3 last year.
- >> Long term MSK sickness cases totalled thirteen, of which eight 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

- >> Consistent with the same period last year and as predicted last quarter, Respiratory has shown a 66% increase.
- >> If trends continue, we expect to see Respiratory absence reduce from Q3 to Q4.

Corporate Measure 24: Percentage of eligible staff with Personal Development Reviews **2025/26 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	32%	76% ↓	81%	81%	81%
Target (max)	100%	100%	100%	100%	100%
2025/26 Actual	0%	66% ↓	81% ↔		81% ↔

Source: Data calculated and supplied by HR

652 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.

43 employees were exempt for the following reasons:

- >> new employees
- >> absences from the workplace

493 active staff are recorded as having had their PDR at the end of the quarter which equates to 81%, the same as Q3 last year. Of the meetings that have taken place, 399 completed PDR forms have been returned to HR.

Managers have access to reports to monitor performance locally. HR contact Managers on a regular basis to ensure meetings have been recorded accurately and that paperwork has been returned.

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Corporate Measure 25: Number of formal grievances				2025/26 Target: Monitor	
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	5	11	4	2	20
Target (max)	-	-	-	-	-
2025/26 Actual	4 ↑	3 ↑	5 ↓		12 ↑

Source: Data supplied by HR

This quarter received five complaints. Of the five complaints received, three were received from colleagues with under 2 years' Service.

Four complaints were received through SaySo this quarter. No specific trends could be identified. Complaints received through SaySo are investigated as fully as possible within the confines of the anonymous nature of some of the complaints.

Health and Safety					
Corporate Measure 26: Number of RIDDOR accidents and diseases				2025/26 Target: 4 max	
	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	1	0	1	1	2
Target (max)	1	1	1	1	3
2025/26 Actual	2 ↓	2 ↓	2 ↓		6 ↓

Source: Data supplied by Health & Safety

Three Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) reports in Q3, two injuries resulting in over 7-day absence / light duties. Both injuries are under investigation; initial indications suggest no commonalities in causes of the events.

A dangerous occurrence RIDDOR report was made in Q3, relating to a suspected asbestos exposure. Samples were taken for analysis and based on the result, a RIDDOR report would not have been necessary. However, as strict reporting deadlines apply the report had already been made. The incident has been investigated and recommendations are being implemented.

Both injury accidents (Q2 = 12, Q3 = 16) and near misses (Q2 = 7, Q3 = 17) increased in Q3. Nine of the injury accidents resulted in strains/sprains. There has been a notable increase in near misses during operational activities. This demonstrates that staff are willing to report safety events and provides opportunity for learning.

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Finance and Procurement					
Corporate Measure 27: Percentage of spend subject to competition					2025/26 Target: 85%
	Q1	Q2	Q3	Q4	Year to Q3
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% ↓	93.9% ↑		90% ↓
<p>Source: Data calculated and supplied by Finance</p> <p>Exceeded Q3 target with a few waivers:</p> <ul style="list-style-type: none"> » Oakmere Contract Services Ltd – Urgent environmental cleaning of changing rooms at Langley due to Asbestos. » Dynamic Micro Systems Ltd – Air filtration system that can be provided by only one supplier. » Stephanie Wheeler Associates Ltd – Independent HR consultancy to support fair and impartial workplace investigation. Specialist work can be carried out by one supplier to maintain continuity of the investigation. » ADT Fire and Security Plc – Close protocol fire alarm system in HQ. Only ADT Fire and Security Plc can maintain the system. » Heightch Group – working at height training and equipment – equipment in current use for working at height training provided by the supplier. Single supplier solution. » Cadcorp – Authority owns licence to the software which provides analytical functions. Due to being a proprietary system Cadcorp is the only supplier that 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 Q3
Previous Year (2024/25)	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%
2025/26 Actual	99.3% ↓	100% ↔	100% ↔		99.8% ↓
<p>Source: Data calculated and supplied by Finance</p>					

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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 Q3
Previous Year (2024/25)	0	0	0	0	0
Target	0	0	0	0	0
2025/26 Actual	0 ↔	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 Q3
Previous Year (2024/25)	60%	71%	68%	56%	65.5%
Target	95%	95%	95%	95%	95%
2025/26 Actual	54% ↓	77% ↑	82% ↑		71.0% ↑

During Q3 internal communications were sent our reminding people of their responsibilities in relation to protecting information and cyber security. This course will be available on our new learning and development platform allowing course reminders and improved analysis.

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 Q3
Previous Year (2024/25)	0	0	0	0	0
Target	0	0	0	0	0
2025/26 Actual	0 ↔	0 ↔	0 ↔		0 ↔

Corporate Measure 32: Completing the Data Subject Requests (SARs) within the permitted time frames **2025/26 Target: Monitor**

	Q1	Q2	Q3	Q4	Year to Q3
Previous Year (2024/25)	100%	100%	100%	100%	100%
Target	100%	100%	100%	100%	100%
2025/26 Actual	100% ↔	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 Q3
Previous Year (2024/25)	57%	63%	60%	43%	60%
Target	100%	100%	100%	100%	100%
2025/26 Actual	63% ↑	69% ↑	82% ↑		71.3% ↑

Although reporting below target (82% with a target of 100%), we saw an improvement in performance relating to our published retention schedules. By having clear schedules and the ability to effectively apply them, we reduce risks around data management and data protection legislation.

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Revenue Budget & Position

The 2025/26 Revenue Budget agreed by Fire Authority in February 2025 was set at £47.965m.

The forecast revenue outturn for 2025/26 on the next pages show the overall 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 – however reserves were set aside to meet these costs and have been added to the budget for 2025/26. The Stations budget was set to include a buffer of an additional ten firefighters, however the actual numbers of staff on wholetime stations were below the budgeted number in quarter 1. The 12 new recruits that joined in February 2025 have been on stations from the end of June 2025. The proportion of firefighters at development level is higher than in the budget. There is a forecast salary cost saving of around £190,000 on wholetime stations for the year.
- Due to the under establishment in quarter 1 and pressure on the overtime budget to cover sickness, firefighters on light duties and additional overtime for training, the overtime forecast is showing at £481,000 over budget for the year.
- On-call stations are currently showing a net negative variance across the county, with a net variance of £121,000, with Lambourn and Mortimer both being £42,000 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 variance of £349,000.

» Repairs and Maintenance

An Asset Management Survey has been commissioned at a cost of £48,000.

» Clothing and PPE

The costs on the PPE contract are anticipated to be higher than budget by £26,000 for the year.

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» Communications

The Home Offices charges for the Airwave system are forecast to be £287,000 less than budget. The delay in the introduction in the new WAN has resulted in spend of £47,000 less than budgeted.

» Other Contracts

The unbudgeted costs of transitioning to a new payroll contract are £64,000. Cross Border costs are forecast to be £14,000 higher than expected.

» Income other

Includes £60,000 received on an un-budgeted legal settlement and £16,000 additional income on cross border recharging

» Appropriations to Reserves

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, with the result that use of reserves is £264,000 less than expected.



Forecast revenue outturn - Revenue Position Quarter 3 2025/26

	Annual Budget £'000	Q3 Outturn £'000	Forecast to YE £'000	Fcast - Budget Variance £'000
EMPLOYEES				
STATIONS	21,950	16,596	22,120	170
NON-STATIONS	15,850	11,553	15,501	(349)
TRAINING	700	417	704	4
OTHER	350	257	362	12
	38,850	28,823	38,687	(163)
PREMISES				
REPAIRS & MAINTENANCE	859	597	911	52
RATES	986	869	988	2
CLEANING	299	230	313	14
UTILITIES	571	391	571	0
	2,715	2,087	2,783	68
SUPPLIES				
INSURANCE	438	440	443	5
EQUIPMENT	583	399	590	7
IS EQUIPMENT & LICENCES	1,341	1,156	1,346	5
CLOTHING/PPE	423	379	449	26
COMMUNICATIONS	925	362	589	(336)
OCCUPATIONAL HEALTH	348	254	348	0
PRINT/STATIONERY/PUBLICATIONS/SUBSCRIPTI ONS	148	135	166	18
COMMUNITY FIRE SAFETY SUPPLIES	100	76	109	9
SUPPLIES OTHER	261	202	277	16
	4,567	3,403	4,317	(250)
CONTRACTS				
CONTRIBUTION TO TVFCS	1,128	841	1,137	9
LEGAL	50	56	65	15
OTHER CONTRACTS (incl. Professional Services)	1,646	1,311	1,748	102
	2,824	2,208	2,950	126
TRANSPORT				
VEHICLE RUNNING COSTS	847	673	863	16
TRAVEL	243	211	262	19
	1,090	884	1,125	35

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	Annual Budget £'000	Q3 Outturn £'000	Forecast to YE £'000	Fcast - Budget Variance £'000
PENSIONS				
PENSIONS	510	428	510	0
	510	428	510	0
INCOME				
GRANTS	(1,851)	(1,579)	(1,834)	17
RENTAL INCOME	(264)	(165)	(264)	0
TVFCS RECHARGE INCOME	(456)	(342)	(456)	0
INCOME OTHER	(1,018)	(747)	(1,105)	(87)
	(3,589)	(2,833)	(3,659)	(70)
NET COST OF SERVICES	46,967	35,000	46,713	(254)
DEBT CHARGES INTEREST	329	158	329	0
INVESTMENT INTEREST	(604)	(401)	(600)	4
REVENUE FUNDING OF CAPITAL	1,434	0	1,434	0
APPROPRIATION TO/(FROM) RESERVES	(704)	0	(440)	264
FINANCING COSTS	543	0	543	0
NET EXPENDITURE	47,965	34,757	47,979	14
GOV GRANTS/PRECEPTS	(47,965)	(42,115)	(47,979)	(14)
(SURPLUS)/DEFICIT BEFORE USE OF RESERVES	0	(7,358)	0	0

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Equality, Diversity and Inclusion Objectives

Objective: Increasing the diversity of staff at all levels	End 24/25	Q1	Q2	Q3
<p>We recognise the value that a diverse workforce brings and will take action to increase the diversity of job applicants, seeking individuals with the right behaviours and skills to help us reflect and engage with our local communities.</p>	G	G	G	G
<p>During Q3, the recruitment process for wholetime firefighters concluded, resulting in 12 individuals being offered positions. Of these successful applicants:</p> <ul style="list-style-type: none"> >> 25% are female >> 8.3% identify as an ethnicity other than White British >> 16.6% declared a disability. <p>This represents a slight increase in female representation compared to previous wholetime intakes.</p> <p>Positive action activity was paused throughout Q3 following the completion of the internship periods and the opening of the wholetime recruitment campaign. Application data from this process is being analysed with intent to inform a targeted and strategic positive action approach for future recruitment cycles.</p> <p>Recruitment processes have been updated to incorporate the new behavioural framework. This is now embedded across all stages of candidate assessment.</p> <p>The external website has been updated with EDI sections to provide potential candidates information on the offer of an interview scheme and adjustments at recruitment to improve transparency.</p>				

Objective: Leadership and corporate commitment	End 24/25	Q1	Q2	Q3
<p>We will support our organisational leaders to understand their role in tackling inequalities and demonstrating inclusive behaviours, in line with our Behavioural Competency Framework. This commitment means we will be strong and visible in our leadership and ensure that all staff and members of our local communities have confidence in our commitment to equality, diversity and inclusion.</p>	G	G	G	G
<p>During Q3, draft Equality Objectives were presented to both Senior Leadership Team (SLT) and the Fire Authority, gaining approval for the proposed objectives and the consultation approach.</p> <p>The Service continued to progress the actions outlined in the Sexual Harassment Risk Assessment, with work focused on strengthening organisational culture, improving facilities, and developing face to face training.</p> <p>Work continues against both the EDI Action Plan and the Culture Plan, ensuring that leadership responsibilities, inclusive behaviours and organisational expectations remain embedded across all levels of the Service.</p>				

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Objective: Improving our service delivery by creating strong links with our community	End 24/25	Q1	Q2	Q3
<p>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.</p>	A	A	A	A
<p>There remains a need to establish a robust mechanism for capturing and reporting community engagement activity across the organisation. This will help ensure that all stations and watches are consistently contributing to proactive engagement, particularly with communities that are at greater risk and those currently under represented.</p> <p>Notable community engagement activity during Q3 included:</p> <ul style="list-style-type: none"> » Attendance at food banks to reach ethnic minority communities » Attendance at Thatcham Diwali » Halloween themed station open day » Visits to asylum hotels » Refugee engagement events <p>The EDI Steering Group continued work to develop a more strategic approach to community engagement activity, with a review of the events booking process and the associated policy to plan, coordinate and align with organisational priorities.</p> <p>Pages on Siren have now been updated with clearer information and definitions relating to community engagement and positive action. Fact sheets on religious and faith groups have also been added to better equip staff when attending community events.</p>				

Objective: Building on our inclusive culture	End 24/25	Q1	Q2	Q3
<p>We will continue taking action to ensure we have a culture where everyone feels valued and is treated with dignity and respect and support all staff to contribute to the creation of an inclusive working environment.</p>	G	G	G	G
<p>Throughout Q3, delivery of the EDI and Cultural Awareness Training continued for all staff. This training supports the development of a consistent, organisation-wide understanding of inclusive behaviours and expectations.</p> <p>Staff networks continued to meet regularly, providing spaces for connection, support and feedback.</p> <p>Following the review of the Dignified Workspace Standards, further changes and updates have been made to staff facilities to be inclusive, accessible and supportive of staff wellbeing and align to the service's minimum standard.</p> <p>The new Adjustments Policy has been drafted and shared for consultation, aiming to finalise and launch in Q4.</p>				

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

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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](#)

RBFA is required to publish a Community Risk Management Plan (CRMP). This section details progress against the six priorities:

- [Priority 1](#)
- [Priority 2](#)
- [Priority 3](#)
- [Priority 4](#)
- [Priority 5](#)
- [Priority 6](#)

» [Culture Plan](#)

This section outlines four of the Culture Plan areas:

- [Places](#)
- [Processes and systems](#)
- [Communications and engagement](#)
- [People](#)

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 or not due to start

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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 are currently on track or complete.

Progress against our CRMP commitments is detailed below:

Priority 1: We will develop our Integrated Service Delivery Strategy to meet the changing profile of risk in Berkshire due to climate change, societal and technological shifts.	End 24/25	Q1	Q2	Q3
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	G	A	A
We will build on our horizon scan and evidence base developed for our CRMP to improve our understanding of climate change, societal and technological risks.	G	G	G	G
We will develop our wildfire capability to respond to the impact of climate change.	G	G	G	G
We will develop our water rescue capability to respond to the impact of climate change.	G	G	C	C

Priority 2: We will develop a Risk Based Prevention Programme to target those most vulnerable and at risk from emergency incidents	End 24/25	Q1	Q2	Q3
We will use our evidence base to identify who is most at risk in our communities, to ensure our resourcing is targeted in the most effective and efficient way.	NS	NS	G	G
We will continue to work with our partner agencies to ensure high quality referrals for the most vulnerable.	C	C	C	C
Data and local knowledge in prevention	C	C	C	C

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Priority 3: We will develop our response model to ensure that we are providing the most effective response to incidents within Berkshire, ensuring that it is aligned to the risks identified, sustainable and provides value for money	End 24/25	Q1	Q2	Q3
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	G
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	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	G
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	C
The Appliance Availability workstream has prepared and brought in the new leave policy on top of previous measures to improve extractions. It is anticipated that this will shift to an evaluation phase in Q4 and monitor throughout 2026.				

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	End 24/25	Q1	Q2	Q3
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	C

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Priority 5: We will develop our Service to reduce the impact of fire safety issues in commercial buildings.	End 24/25	Q1	Q2	Q3
New Ways of working	NS	NS	NS	G
We will evaluate our new Risk-Based Inspection Programme to ensure we are targeting the premises with the greatest risk	G	G	G	G
We will evaluate the changes we have made to our call challenge policy and review our response	G	G	C	C
Sprinklers	C	C	C	C
Building Safety Regulator	C	C	C	C
In conjunction with the increase in Flexible Duty Officers (FDOs), proposals are in place for team restructuring to enable new ways of working.				

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	End 24/25	Q1	Q2	Q3
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	C
Priority 6 has now transitioned to Business as Usual and is monitored by the Operational Support and Improvement Team.				

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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** and **People**.

» 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, along with optimising contaminants control and meeting our sustainability aspirations.
- » 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.
- » Management of this work is through the Places programme governance and reported under the Strategic Asset Framework (SAIF).

Strategic Asset Investment Framework

SAIF sets out how we will sustain, change and renew the vital capital assets necessary to support our services. Progress is detailed below.

Fleet and Equipment		End 24/25	Q1	Q2	Q3
Fleet: Special Appliances	On Track	A	NS	NS	G
	On Budget	G	NS	NS	G
Fleet: Fire Appliances	On Track	NS	A	A	A
	On Budget	NS	G	G	G
Fleet: Other Ancillary Vehicles	On Track	G	G	G	A
	On Budget	G	G	G	G
Equipment	On Track	G	G	G	G
	On Budget	G	G	G	G
Services	On Track	G	G	G	G
	On Budget	G	G	G	G

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ICT		End 24/25	Q1	Q2	Q3
ESMCP (Emergency Services Mobile Communications Programme)	On Track	R	R	R	R
	On Budget	R	R	R	R
Networks	On Track	A	A	A	A
	On Budget	A	A	A	A
Hardware	On Track	G	G	G	G
	On Budget	G	G	G	G
Software	On Track	G	G	G	A
	On Budget	G	G	G	G

Buildings		End 24/25	Q1	Q2	Q3
Langley	On Track	G	G	G	G
	On Budget	G	R	R	A
Estates Development	On Track	A	A	A	A
	On Budget	G	G	G	G
P1 Heat Decarbonisation	On Track	G	A	A	A
	On Budget	A	G	G	G
EDI Station Improvements	On Track	A	A	A	G
	On Budget	A	G	G	A
Training Centre	On Track	G	G	G	G
	On Budget	G	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 Development	On Track	C			
	On Budget	C			
Slough	On Track	C			
	On Budget	C			

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» 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-Q3 is detailed below, ordered by RAG status:

Project	Aim	Q1	Q2	Q3
Staff Development System	The overarching aim of this project is to implement a transparent, integrated and intuitive system to facilitate organisational growth, development and performance.	R	R	A
PRF Digitalisation	The project will; deliver a digital solution for Personal Record Files (PRFs) removing the need for paper filing	R	On Hold	On Hold
Finance System Replacement	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	G
Microsoft 365	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	A
Risk Management Solution	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	G
Power Bi Pilot	The project will complete a proof of concept using the 7(2)(d) Risk Visits and use the results of these to determine how to build capability and capacity more broadly across the organisation	C		
Asset Management	This project aims to increase capacity by delivering an efficient and quicker equipment audit process with improved tracking.	C		

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» 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.

Objective 1: Create and deliver engaging and inclusive internal and external communications, through a multi-channel approach.	Q1	Q2	Q3
Review existing social media channels to ensure they continue to positively drive engagement with communities.	G	G	G
Develop our stakeholder mapping tool to align our activity with the differing levels of stakeholder interaction, communication and engagement needs.	NS	G	G
Ensure that we improve the accessibility of our comms, duly considering groups protected by the Equality Act (2010).	NS	G	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	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	G
Objective 2: Build an informed and engaged workforce.	Q1	Q2	Q3
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	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	G
Establish an ongoing engagement programme plan across the Service to drive professional discussion and conversation.	NS	NS	NS
Objective 3: Utilise and embrace new technology to drive effective communications and engagement.	Q1	Q2	Q3
Increase engagement and improve communication with on-call colleagues.	G	G	G
Develop the website and intranet to utilise new tools available and streamline processes for end users.	G	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	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	NS

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Objective 4: Effectively measure the success of communications and engagement activity.
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	Q3
G	G	G
C		

Objective 5: Ensure appropriate training and development is in place to support our workforce to deliver the Communications and Engagement Strategy.
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	Q3
G	G	G
NS	NS	NS

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» 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.

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	Q1	Q2	Q3
Effective grievance and discipline action plan implementation (including Misconduct recommendations)	G	G	G
Review of performance management processes. Action plan detailing priorities linked to misconduct review	C		
Behavioral competency framework review and implementation. Includes design, engagement, socialisation of new framework	C		

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.	Q1	Q2	Q3
Neuro inclusion action plan looking at actions to support neurodivergent staff in all aspects of work	G	G	G
Conduct a review of the current Employee Value Proposition (EVP), gathering data on employee perceptions, benchmarking against sector standards, and developing recommendations to strengthen the EVP	G	1	A
Direct Entry Scheme provides an alternative route of entry into the role of Station Manager	2		
Review of developments and needs to improve recruitment and retention. Review data and information to help inform decisions	C		

¹ Work paused at Q1 whilst focus is in delivering a new payroll system

² Work paused as at Q2 on the Direct Entry Scheme in line with the NFCC position

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Objective 3: We will increase the diversity of our operational workforce by 100% in the next three years to better reflect the communities we serve. We recognise that diversity is not just related to gender and ethnicity, we want to improve diversity of thought and experience ensuring we are an inclusive employer for all. This will help improve equality of access to services for all our communities.	Q1	Q2	Q3
Development of a culture dashboard to support RBFRS understand and measure impacts on culture	G	G	G
Review the EDI objectives to comply with the Public Sector Equality Duty. Conducting consultation with the public and FA approval	G	G	G
Sexual harassment awareness within the service of the duty and acceptable behaviours	G	G	G
Production of EDI data to support organisational monitoring and decision making	C		

Objective 4: We will empower our staff to develop, grow and understand their role in the organisation. We will recognise good performance and effectively manage poor performance. We will create pathways for career progression for all staff groups and develop tools to manage talent.	Q1	Q2	Q3
Introduce the Coaching and Mentoring Strategy and associated training ¹	A	A	A
Create clear pathways for development for key areas such as L&D and green book departments ²	A	A	A
Introduce succession planning to ensure better workforce management and development of staff aiding business continuity.	A	A	A
Developing Potential Strategy to implement an effective talent management process ³	G	G	G
Redesign PDR process to take account of Behavioural Competency Framework (BCF) changes and embedded and effective.	G	G	G
Review Development and Assessment Pathways (DAPS) to ensure the structure and output of development and assessment pathway is meeting need	NS	NS	NS
Reward (recognising performance)	NS	NS	NS

¹ 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.

² 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.

³ 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.

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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	Q1	Q2	Q3
On-call Working Group action plan: review action plan to prioritise work packages to support On-call staff development	G	G	G
Speed up the process of On-call becoming part of the crew. Review if there is appetite for skills-based mobilising and develop plan	G	G	G
On-call retention of staff	G	G	G

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.	Q1	Q2	Q3
Leading the Service fire standard analysis to inform action plan	A	A	G
Leading and Developing People Fire Standard	G	G	G
Review the leadership provision within RBFRS to ensure it is effective and meets emerging organisation need	G	G	G
Staff survey action progression and review	G	G	G
Consider the leadership development requirements of SLT and develop and discharge a plan	NS	G	G
Assess and determine how visible leadership can be measured; trusted leadership.	NS	NS	NS

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.	Q1	Q2	Q3
Operational competency fire standard action plan	G	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	G
Initiate a review of how operational training is delivered	NS	NS	NS
Conduct a review of the training programme for On-call to ensure that staff can access the training they need in the quickest time possible	NS	NS	NS
Workforce planning task and finish group and associated action plan	C		

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Objective 8: Health, Safety and Wellbeing remain a priority for us. We will work with staff, representative bodies and experts, to implement our new Safety, Health and Wellbeing Strategy to deliver safe and healthy people, places and processes.	Q1	Q2	Q3
Health, Safety and Wellbeing Action Plan	G	G	G
To roll out mental health trauma related training to improve awareness and early interventions	G	G	G
Evaluate data from the Strength Test pilot to determine future practice/requirements	G	G	G
Sickness Working Group action plan	G	G	G
Review the Trauma Support provision to ensure approach used is still fit for purpose/effective	NS	NS	NS

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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 or not due to start

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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

Strategic Risks

Score Change: 663 Capital Projects – current score reduced from 21 to 17; Target score - increased from 10 to 15
 879 Organisational Capacity - increased from 13 to 18
 931 Industrial Action - increased from 18 to 21
 932 Fleet - reduced from 17 to 16

Closed Risks: None

New Risks: None

Service Delivery Risks

Score Change: 933 Fires in Tall Buildings - target scored increased from 10 to 11
 966 Protection Capacity - current score reduced from 21 to 18

Closed Risks: 909 Fire Investigation – current score reduced to 15 means this is removed
 981 Martyn’s Case Law - current score reduced to 16 means this is removed
 982 Command Support Alignment and Effectiveness – current score reduced to 16 means this is removed
 977 Payroll Provider – closed

New Risks: 985 Iris Payroll Provider
 988 Retention Schedule

Project Risks

Score Change: None

Closed Risks: None

New Risks: 989 TVFCS Legal Agreement

The risks presented in the detailed tables on the next pages were updated early February 2026.

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» 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

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Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
663	Capital Projects - Effective Estate Management	If we fail to effectively manage our property assets to ensure they are fit for purpose and in the right locations, which may become increasingly likely given the funding challenges and the increasing age of our fire stations, then we can expect our revenue expenditure to increase, our services to be less effective and our stations to further decline which would be significant in respect to our strategic objectives; to ensure value for money and ensure fire stations are suitable and accessible for our own staff and the communities they serve.	23	17	15
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

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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	18
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

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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

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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	21	16
932	Fleet strategy, documentation and control	There is a lot of inconsistency in the documentation, policies and controls we have across Service that relate to Fleet. There are also a large number of owners of documents that have a bearing on the delivery or use of fleet, potentially leading to gaps that could lead to non-compliance. If we fail to manage our fleet operations appropriately, we risk affecting frontline operational capability and policy compliance.	17	16	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

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**>> 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

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Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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	11
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
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	18

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Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
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	18	18

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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
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 wholtime 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

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Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
985	Iris Payroll Performance	If payroll processing errors continue to occur and no performance improvements are made, which is becoming increasingly evident as we exit from the provider due to inconsistent and worsening monthly performance and inexperienced staff working on the payroll, then we can expect the following consequences: an increase in employee complaints, reputational damage, incorrect statutory payments, and heightened pressure on HR staff responsible for checks and sign-off. These consequences are significant in respect to our objectives of maintaining operational efficiency, ensuring compliance, safeguarding employee trust, and protecting the organisation's reputation.	22	18	15
988	Retention Schedule	If the Service does not implement Retention Labels within Microsoft 365—an increasingly likely outcome due to limited understanding and training—then requests such as Subject Access Requests, Freedom of Information Requests, and other GDPR related rights queries will take significantly longer to complete, and storage usage within Microsoft 365 will continue to grow unnecessarily, which would lead to increased operational costs, reduced efficiency, and non-compliance with legislative and corporate strategic commitments.	19	19	11

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>> Project Risks

Risk ID	Risk Short Name	Risk Description	Inherent Score	Current Score	Treated Score
989	TVFCS Legal Agreement	If we fail to renew the Legal Agreement Relating to the Steady State Operation of the Thames Valley Fire Control Service, which may become likely given the complexity of reaching a legally compliant collaborative agreement, then we can expect delays in the TVFCS Technology Replacement Programme which is significant in respect to the delivery of statutory duties arising from the Fire and Rescue Services Act 2004 and the Civil Contingencies Act 2004.	23	21	15

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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 open actions has been collated early February 2026 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**. Priority rated as Medium = M, Low = L.

Audit title	Action	Progress	Date due (revised if applicable)	Priority	Status
Pensions	<p>2025: FF Pension Administration: 3</p> <p>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.</p>	<p>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.</p>	30/06/2025	M	R
Payroll Provider	<p>2025: Dataplan: 1</p> <p>Dataplan and RBFPS will review the current contract arrangements and ensure formal documentation exists for any continued service.</p>	<p>Dataplan and WYPF have engaged in discussions in May 2025. Expect contract imminently.</p>	31/12/2025	M	A
Sickness Absence	<p>2024: Sickness Absence: 1</p> <p>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.</p>	<p>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.</p>	30/09/2024	L	A

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Audit title	Action	Progress	Date due (revised if applicable)	Priority	Status
Facilities Management	<p>2022: FM3a</p> <p>We will ensure that the Pre-Planned Maintenance (PPM) is formally reviewed and monitored with progress notes and actions recorded against the PPM.</p>	<p>A new review of PPMs processes is under 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.</p>	30/04/2023	L	G
Facilities Management	<p>2022: FM6</p> <p>We will ensure that defects are appropriately monitored, tracked and implemented in accordance with the prioritisation schedule where possible.</p>	<p>Defects are monitored by triage process, tracked and monitored throughout. A new process document is to be created for easy access to obtain information. This can now be closed, Weekly reports are obtained and updated on Firewatch.,</p>	20/04/2023	M	G
Community Risk Management Plan	<p>2023: CRMP: 1</p> <p>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.</p>	<p>Following an initial draft this work was paused to allow for IRP team restructure. Restructure completed and this work has been programmed into the Corp. Services Service Plan 2025-26.</p>	30/06/2026	L	G
IT General Controls	<p>2024: IT General Controls: 4</p> <p>Management will ensure the New Starter Form is completed and attached to vFire helpdesk tickets for all new starters.</p>	<p>Documentation completed awaiting publication.</p>	31/08/2024	L	G
Risk and Governance	<p>2025: Risk and Governance: 1</p> <p>The Intelligence, Risk and Performance team will work with Risk Owners to review the treatments within the Corporate Risk Register for each risk.</p>	<p>Work to review risk treatments is underway. Workshops scheduled for SLT and treatment owners in Autumn 2025.</p>	30/06/2025	L	G
Risk and Governance	<p>2025: Risk and Governance: 2</p> <p>The Intelligence, Risk and Performance team will undertake a comprehensive review of the current Corporate Risk Register</p>	<p>Review of risk register has begun and SLT workshop scheduled for Autumn 2025. Further workshops for risk treatments planned for November 2025.</p>	30/06/2025	M	G

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Audit title	Action	Progress	Date due (revised if applicable)	Priority	Status
Cyber Essentials	2025: Cyber Essentials: 1 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
Cyber Essentials	2025: Cyber Essentials: 2 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
Cyber Essentials	2025: Cyber Essentials: 3 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
Cyber Essentials	2025: Cyber Essentials: 4 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
Cyber Essentials	2025: Cyber Essentials: 5 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
Cyber Essentials	2025: Cyber Essentials: 6 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

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Audit title	Action	Progress	Date due (revised if applicable)	Priority	Status
Cyber Essentials	2025: Cyber Essentials: 7 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
Payroll Provider	2025: Payroll Provider: 6 The Service will only make deductions once the formal agreement has been put in place where applicable.	Awaiting Update	18/11/2025	L	G
Follow Up	2025: Health and Safety: 2 We will continue to provide regular health and safety refresher training to all managers that have been with the Service for more than three years.	R&D have implemented a refresher cycle & record training on Firewatch records. The SDS will flag to individuals & managers when a qualification is nearing expiry	31/03/2026	L	G
Follow Up	2025: Sickness Absence: 1 Management will update the Information Security Policy to outline the steps to be taken in response to suspected account or password compromise.	Developing updates is scheduled as a Q4 activity & we will be looking at more innovative ways to communicate with staff	31/03/2027	M	G

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Audit title	Action	Progress	Date due (revised if applicable)	Priority	Status
Risk Information	2025: Risk Information: 1 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'.	Awaiting update	27/02/2026	M	NS
Risk Information	2025: Risk Information: 2 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.	Awaiting update	27/02/2026	M	NS
Risk Information	2025: Risk Information: 3 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.	Awaiting update	27/02/2026	M	NS
Risk Information	2025: Risk Information: 4 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.	Awaiting update	27/02/2026	M	NS
Payroll Provider	2025: Payroll Provider: 3 IRIS will ensure that overpayments are recorded centrally, supported by a structured system for tracking repayment plans	Awaiting Update	31/12/2025	M	NS
Payroll Provider	2025: Payroll Provider: 7 All exceptions identified within Pay Check Reports will be investigated by IRIS and escalated to RBFRS where applicable, and evidence of this investigation will be retained	Awaiting Update	18/11/2025	M	NS

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Audit title	Action	Progress	Date due (revised if applicable)	Priority	Status
Risk and Service Plans	2025: Risk and Governance: 1 Management will review and update the Organisational Risk Policy to include reminders for Risk Owners to describe the cause and effect of risks in the risk description. We will ensure that the strategic commitments field is correctly applied to all risks and that this reflects current organisational priorities.	Awaiting Update	31/03/2026	M	NS
Risk and Service Plans	2025: Risk and Governance: 2 Management will review and update the Risk Management Policy to ensure clear and consistent definitions of key risk scoring terms, including Current, Residual Risk, and Target Risk scores.	Awaiting Update	31/03/2026	L	NS
Risk and Service Plans	2025: Risk and Governance: 3 We will define the review period for horizon scanning, with the intention that it takes place twice per year, supplemented by input from the Senior Leadership Team and the Fire Authority	Awaiting Update	30/06/2026	L	NS
Risk and Service Plans	2025: Risk and Governance: 4 As part of the ongoing training needs analysis agreed during the 2024/25 Risk Management audit, we will incorporate training in relation to setting adequate risk treatments. We will also reiterate the scoring criteria and application of it to risk owners as part of the training.	Awaiting Update	31/03/2026	L	NS
Risk and Service Plans	2025: Risk and Governance: 5 Oversight and escalation mechanisms will be introduced for all overdue risks and treatments, including those with risk scores below 17. This will include periodic monitoring, clear ownership of overdue items and defined escalation points where repeated non-action occurs.	Awaiting Update	30/06/2026	M	NS

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Audit title	Action	Progress	Date due (revised if applicable)	Priority	Status
Risk and Service Plans	2026: Risk and Governance: 6 Management will ensure that all Terms of Reference are periodically reviewed, in-line with agreed timeframes.	Awaiting Update	30/06/2026	L	NS
Risk and Service Plans	2025: Risk and Governance: 7 Work packages and projects within service plans will be linked to strategic commitments, and as appropriate, they will also link to the specific risks they are intended to mitigate. Where existing works are not effectively addressing those risks, they will be amended, supplemented, or replaced with new works to ensure adequate mitigation, in line with the organisation's risk appetite.	Awaiting Update	31/03/2026	M	NS
Risk and Service Plans	2025: Risk and Governance: 8 The Service will ensure that all service plans clearly and consistently link works to the strategic commitments and include required prioritisation.	Awaiting Update	31/01/2026	L	NS
Risk and Service Plans	2025: Risk and Governance: 9 The Service will ensure oversight of service plans occurs on a regular basis. This oversight will be documented cover planned versus actual delivery. Where shortfalls in delivery are identified, these will be addressed through agreed corrective actions, with progress monitored until completion	Awaiting Update	31/03/2026	M	NS
Risk and Service Plans	2025: Risk and Governance: 10 The Service will ensure that required work packages have appropriate mechanisms of oversight during work delivery, with this documented on the Service Plan. Where this is not required, this will be agreed prior to works commencing and will be documented on the Service Plan.	Awaiting Update	31/03/2026	M	NS

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Audit title	Action	Progress	Date due (revised if applicable)	Priority	Status
Community Risk Management Plan	2023: CRMP: 2 We will utilise a risk scoring matrix that quantifies the likelihood and consequence and ensure the project tracker is complete with risks for the CRMP.	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	C
Risk and Governance	2025: Risk and Governance: 3 We will complete a training needs analysis for the risk management training across the business for operational and non-operational staff.	Training needs analysis completed	30/06/2025	M	C
Follow Up	2025: Health and Safety: 1 We will ensure that new starters who have not fully completed and returned their induction pack are chased within four weeks of their start date.	On our internal department tracker we have introduced a follow up at two weeks. This has resulted in on-time completion of all induction packs in Q3. We are looking into automating this process using SharePoint.	31/03/2026	L	C
Follow Up	2025: Sickness Absence: 2 We will include a discussion about the right to privacy risk (through the mandatory manager sickness absence workshops) and reiterate that this may be infringed when providing detailed commentary on Fire Watch	This has been included in the workshop presentation	31/03/2026	L	C

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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 Q3 are below:

Section One: Effectiveness	End 24/25	Q1	Q2	Q3
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	G

Section Two: Efficiency	End 24/25	Q1	Q2	Q3
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	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	G

Section Three: People	End 24/25	Q1	Q2	Q3
Process to identify, develop and support high-potential staff and aspiring leaders	G	G	G	G
Understanding and application of Personal development reviews (PDR)	G	G	G	G

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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
Digital and Cyber	Lukasz Wrona		Sep-24	G	NS
Procurement and Commercial	Conor Byrne	Shuvhum Bhandari	Sep-24	C	NS
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

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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.

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

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

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

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

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

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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.
Prevention Measures			
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.

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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.

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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.

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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.

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» Corporate Health

Measure	2025/26 Target	Definition/Rationale	
Human Resources and Learning & Development			
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.
Health and Safety			
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.
Finance and Procurement			
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).

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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.

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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 Q3 2025/26
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Staff In Post:

Wholetime	379	373	374		373	381	377 (363 when omitting x10 Resilience FF's)
On-call	60	57	60		60	62	65
Control	41	41	40		40	41	39
Green Book	201	203	199		199	190	199
Total	681	674	673		673	669	670

Staff Turnover:

Wholetime	5	6	1		12	23
On-call	4	1	1		7	6
Control	0	0	1		1	0
Green Book	9	7	7		23	22
Total Number of Leavers (Heads)	18	14	10		43	50
Staff in Post (SIP)	681	674	673		676	662
Percentage of Leavers vs. SIP	2.6%	2.1%	1.5%		6.4%	7.6%

Female Staff Percentage:

Wholetime	8.4	8.6	8.8		8.8	7.2%
On-call	10.0	10.5	11.7		11.7	8.1%
Control	65.9	65.9	67.5		67.5	65.9%
Green Book	57.7	59.1	58.8		58.8	60%
Of Total Staff	26.9%	27.5%	27.34%		27.3%	25.9%

Ethnicity (Percentage of Staff Non-White British):

Wholetime	6.3	6.4	6.4		6.4	4.5%
On-call	11.7	12.3	11.7		11.7	11.3%
Control	9.8	9.8	10.0		10.0	9.8%
Green Book	22.9	23.2	22.1		22.1	20%
Of Total Staff	11.9%	12.2%	11.7%		11.7%	9.9%

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Staff Ethnicity Profile:

Ethnicity	Wholetime	On-call	Control	Green Book	Total [All Staff]
White British	320	52	35	148	555
Other Ethnicity	24	7	4	44	79
Prefer not to say	30	1	1	7	39
Total	374	60	40	199	673

Staff Age Profile:

Age Group	Wholetime	On-call	Control	Green Book	Total [All Staff]
25 and Under	25	5	5	16	51
26 - 35	102	16	13	32	163
36 - 45	117	23	8	47	195
46 - 55	115	11	11	56	193
56 - 65	15	5	3	43	66
66 and Over	0	0	0	5	5
Total	374	60	40	199	673

Staff Gender Profile:

Gender	Wholetime	On-call	Control	Green Book	Total [All Staff]
Female	33	7	27	117	184
Male	316	52	13	79	460
Prefer not to say	25	1	0	3	29
Total	374	60	40	199	673

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	49		49		22
On-Call	3	3	5		5		1
Control	7	6	5		5		2
Green Book	45	44	42		42		14
Total	108	104	101		101		39

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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%
Total	26.6%	50.5%	15.9%	13%	6.5%	26.9%

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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	

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

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HERU	Hazardous Environmental Response Unit	
HFRS	Hampshire Fire and Rescue Service	
HGV	Heavy Goods Vehicle	
HMEPA	Hazardous Materials Environmental Protection Advisor	Was known as a Hazmat Officer. Specialist Officer with the skills to deal with chemical incidents.
HMICFRS	His Majesty's Inspectorate of Constabulary & Fire and Rescue Services	As of 2019, with context to the HMICFRS Action Plan this read: "Her Majesty's Inspectorate of Constabulary & Fire and Rescue Services"
HMO	House of Multiple Occupancy	
HoS	Head of Service	
HR and L&D	Human Resources and Learning and Development	
HRRBs	High Risk Residential Buildings	
HRU	Heavy Rescue Unit	Attends road traffic collisions of 3 or more cars HGVs
HSE	Health and Safety Executive	
IBIS	Incident & Building Information System	The ICT system where all incident and building information is held.
ICO	Information Commissioner's Office	
ICT	Information Communication Technology	
ICU	Incident Control Unit	Large bus mobilised on 7 pump or more incidents
IEC	Immediate Emergency Care	
IG	Information Governance	
IRMP	Integrated Risk Management Plan	
IRS	Incident Recording System	
ITHC	Information Technology Health Checks	
JESIP	Joint Emergency Services Interoperability Principles	
JO	Junior Officer	
JY	Juliet Yankee	RBFRS call sign in Control for all appliances
L&D	Learning and Development	
L1	Level 1 Officer	Incident Command Level - Crew and Watch Manager
L2	Level 2 Officer	Incident Command Level - Station Manager/Group Manager A

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L3	Level 3 Officer	Incident Command Level - Group Manager A & B
L4	Level 4 Officer	Incident Command Level - Area Manager and Principal Officer
LGPS	Local Government Pension Scheme	
LFB	London Fire Brigade	
LGV	Light Goods Vehicle	
LMS	Learning Management System	
LPP	Light Portable Pump	
LRF	Local Resilience Forum	Multi-agency partners collaborate to fulfil their duties under the Civil Contingencies Act 2004
LSP	Local Safety Plan	
MAC	Media Advisory Cell	
MAPS	Multi-Agency Problem Solving	
MDT	Mobile Data Terminal	
MHCLG	Ministry of Housing Communities and Local Government	
MORRG	Management of Road Risk Group	
MRV	Multi Roll Vehicle	
MSK	Musculoskeletal-(sickness)	
NAG	Neighbourhood Action Group	
NFCC	National Fire Chiefs Council	
NILO	National Interagency Liaison Officer	
NoD	Notice of Deficiency	
NOG	National Operational Guidance	
NVQ	National Vocational Qualification	
OCG	Organisational criminal group	
OFRS	Oxfordshire Fire and Rescue Service	
OiC	Officer in Charge	
OJEU	Official Journal of the European Union	
ONR	Office for Nuclear Regulations	
OPAS	Operational Policy and Support	
OQP	Operational Qualifications Planner	
OSEP	Operational Support and Emergency Planning	
OSR	Operational Support Room	
OSU	Operational Support Unit	
OTB	Over the Border	
OTP	Officer Training Programme	
P2P	Purchase to Pay	
PACE	Police and Criminal Evidence	A PACE Interview is any interview conducted in line with the Police

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		and Criminal Evidence Act 1984 (PACE). This piece of legislation sets out the powers and duties of the interviewer, the rights of suspects and the admissibility of evidence.
PAOT	Pre-Arranged Overtime	
PDA	Pre-determined Attendance	
PDI	Personal Development Interview	
PDR	Personal Development Review	
PFI	Post Fire Inspection	
PID	Project Initiation Document	The formal document used to define project objectives, deliverables, costs and timescales for approval
PPAB	Prevention and Protection Assurance Board	
PPE	Personal Protective Equipment	
PPM	Pre-Planned Maintenance	
PPV	Positive Pressure Ventilation	
PP&R	Prevention, Protection & Resilience	
PQA	Personal Qualities and Attributes	
PRF	Personal Record File	
PSAA	Public Sector Audit Appointments	
PSO	Programme Support Office	
PSTG	Problem Solving Tasking Group	
QCF	Qualifications Credit Framework	
RA	Risk Assessment	
RBFA	Royal Berkshire Fire Authority	
RBIP	Risk Based Inspection Programme	
RBWM	Royal Borough of Windsor and Maidenhead	
RDS	Retained Duty System	
RIDDOR	Reporting of Injuries Diseases and Dangerous Occurrences Regulations	
RIEPO	Risk Information and Emergency Planning Officer	
RMS	Remotely Managed Stations	
RRG	Response Resourcing Group	
RRT	Risk Reduction Team	
RTC	Road Traffic Collision	
RTW	Return To Work	
S&W	Safe and Well visit	
SAG	Safety Advisory Group	

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SAIF	Strategic Asset Investment Framework	
SARs	Subject Access Requests	Data subject requests
SCAS	South Central Ambulance Service	
SCC	Strategic Command Centre	
SCG	Strategic Coordinating Group	
SDMT	Service Delivery Management Team	
SECTU	South East Counter Terrorism Unit	
SIRO	Senior Information Responsible Officer	
SJCC	Staff Joint Consultative Committee	
SLT	Senior Leadership Team	
SM	Station Manager	
SPB	Strategic Performance Board	
SPS	Structured Professional Support	
Stn 1	Station 1 – Caversham Road	Wholetime
Stn 2	Station 2 – Wokingham Road	Wholetime
Stn 3	Station 3 – Dee Road	Station closed in 2021
Stn 4	Station 4 - Newbury	Wholetime
Stn 5	Station 5 - Hungerford	Retained (On Call)
Stn 6	Station 6 - Lambourn	Retained (On Call)
Stn 7	Station 7 – Pangbourne	Station closed in 2021
Stn 9	Station 9 – Wargrave	Station closed in 2020
Stn 10	Station 10 – Wokingham	Wholetime
Stn 11	Station 11 – Mortimer	Retained (On Call)
Stn 14	Station 14 – Ascot	Satellite Station (24 hours per day, 7 days per week)
Stn 15	Station 15 – Crowthorne	Retained (On Call)
Stn 16	Station 16 – Bracknell	Wholetime
Stn 17	Station 17 – Slough	Wholetime
Stn 18	Station 18 – Langley	Wholetime
Stn 19	Station 19 – Maidenhead	Wholetime
Stn 20	Station 20 – Whitley Wood	Wholetime
Stn 21	Station 21 – Windsor	Satellite Station (24 hours per day, 7 days per week)
Stn 22	Station 22 – Theale	Wholetime
TCG	Tactical Coordinating Group	
TCR	Training Course Request	
TIC	Thermal Image Camera	
TOA	Threat of Arson	
TRI	Training Records Indicator	
TVFCS	Thames Valley Fire Control Service	
TVP	Thames Valley Police	
UA	Unitary Authority	
USAR	Urban Search and Rescue	

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WAH	Working at Height	
WBDC	West Berkshire District Council	
WDS	Wholetime Duty System	
WBSM	Watch Based Station Manager	
WM	Watch Manager	
WRT	Water Rescue Team	
WT	Wholetime	
WYPF	West Yorkshire Pension Fund	

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