



**Strategic Performance Board  
2016/17**

**Quarter 1 Performance Report**

**April to June 2016**

## Contents

<b>Introduction</b>	<b>3</b>
Strategic Performance Board.....	3
Key Highlights .....	5
Service provision progress.....	6
Service Planning .....	17
Information Management Report (April to June 2016) .....	18
<b>Quadrant Two: Corporate Health</b>	<b>19</b>
Corporate Health progress.....	19
<b>Quadrant Three: Priority Programmes</b>	<b>25</b>
Integrated Risk Management Plan (IRMP).....	25
Organisational Development (OD) .....	29
<b>Quadrant Four: Risk</b>	<b>36</b>
Procurement Compliance .....	36
Audit Recommendations.....	36
Appendix 1:.....	37
Appendix 2:.....	40
Appendix 3: Corporate Measure Definitions .....	43

## Introduction

This Strategic Performance Board quarterly report presents information that is aligned to the revised performance management framework and agreed corporate measures and targets for 2016-17.

The report contains performance against RBFRS targets for 'Service Provision', 'Corporate Health', 'Priority Programmes' and 'Risk'. Descriptions of each Service Provision and Corporate Health measure are available in Appendix 3.

This report has been reviewed by the Strategic Performance Board chaired by DCFO Trevor Ferguson to ensure issues and corrective actions are discussed and owned by Heads of Service.

This report has also been reviewed and discussed at Corporate Management Team (CMT) to ensure any strategic issues are addressed.

## Strategic Performance Board

Below are the actions from the previous Strategic Performance Board meetings with updates on progress and also a table of actions from the Q1 Strategic Performance Board, 27<sup>th</sup> July 2016.

No	Description of Action from 21.10.15	Owner
1.	IT resilience - review all open actions and provide evidence to the auditor in question to close appropriate actions. (Only one action left in progress – to be closed during Feb 16). <b>Update – No further action required. These actions were picked up and rolled into the next audit which is recorded in the current audit log</b>	Head of Business Information and Systems

No	Description of Action from 08.02.16	Owner
1.	AFA and Hoax call figures in Scorecard are not up to date. Look at feed and ensure working correctly. <b>Update – work is ongoing to resolve the issues with these figures – to ensure that changes to data sets arising from Vision are captured and recorded / reported accurately in Scorecard.</b>	Performance Information Officer

No	Description of Action from 27.04.16	Owner
1.	Heads of Service to work with managers to remove unnecessary controlled documents and work together to coordinate the number of equipment notes and risk assessments <b>UPDATE: 444 documents withdrawn (approx 15%)</b>	<b>Heads of Service</b>
2.	The software and equipment training (for HFSC's delivery on tablets) needs to be written into service plan and trainer identified. Timeline required for next SPB <b>UPDATE: Trial starts at Wokingham Road Fire station at the end of August. Following this the tablets will be rolled out station by</b>	<b>AM Gaskarth COMPLETE</b>

	station and will be complete by end December 2016. Training will be provided to crews by HFSC team.	
3.	PID to be submitted to IRMP programme board around recruitment and retention of RDS personnel.	<b>AM Myers COMPLETE</b>

No	Description of Action from 27.07.16	Owner
1.	Further analysis to be carried out on fire safety audits which have only been opened or closed during Q1 as Scorecard as scorecard only reports those which have been both opened and closed during this period.	Performance Information Officer
2.	Investigation into the delay in inputting of fire safety audit data onto IBIS and review.	AM Gaskarth
3.	Discuss at the CMT meeting to set corporate measures 2017/18 that measure 13 is not achievable and review in context of new response standard.	AM Jefferies
4.	Discuss at the CMT meeting to set corporate measures 2017/18 that measure 4 in relation to RAG status, target and definition as Berkshire 999 calls cannot yet be separated from total taken by TVFCS.	AM Jefferies
5.	Discuss changing what is reported in Appendix 2 (Capital Programme expenditure) at CMT.	Conor Byrne

## Data Quality and Accuracy

- Corporate Management Team have authorised the use of transition funding for a Data and Performance Analysis Manager to lead on the resolution of data issues and work toward a collaborative Thames Valley solution for data and performance reporting.
- Work is ongoing to improve the functionality and data flows from the Vision system to the Integrated Building Information System (IBIS) and its links to IRS and our other software interfaces.
- Work is also progressing to find a replacement for our current performance reporting software Actuate Scorecard™. In advance of this all of our corporate measures are being transferred to SQL reports.

## Key Highlights

- There have been zero fire fatalities and 6 casualties reported during Q1.
- The number of emergency incidents called to, which is a new measure for 2016/17, has increased if compared to data for 2015/16. This is due to mainly to Over the Border incidents and co-responding calls – particularly as the main increases are in Unitary Authority areas where station based co-responding trials are being held (Bracknell, Wokingham, West Berkshire).
- Targets for call handling are continuing to improve.
- Completion of Cat 1 HFSC (Home Fire Safety Checks) in 3 days is below target mainly due to issues that are out of the control of RBFRS.
- There was a reduction in the number of information requests and incident report requests in comparison to Q4 2015/16.
- Sickness levels in Q1 have continued to improve across all groups from 3.92% in Q4 to 3.86% in Q1. This is also an improvement in sickness compared to Q1 in 2015/16 which was 3.89%. TVFCS continues to have the highest sickness levels in the service at 9.16%
- Fitness levels of eligible operational personnel have also increased. In addition the required fitness standard has also increased in Q1 so this measure shows not only that performance has improved in percentage terms but also overall fitness levels are higher.
- Contracted spend has exceed the target by 3.5%, at 73.5%.

Quadrant One: Service Provision

Service provision progress

**Key:**  
 Red = Target missed by more than 10%  
 Amber = Target missed by 10% or less.  
 Green = Target met or exceeded by less than 10%  
 Blue = Target exceeded by 10% or more  
 Grey = Data accuracy issues make judgement not possible

ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
1.	Number of Fire Deaths in accidental Dwelling fires	0	0	0	0	<i>(Source: Scorecard Corporate Measures (P&amp;P) / IRS9.06a)</i> Zero fire deaths recorded Q1. Continuing to address the risk and providing the prevention initiatives reported in Q4 (2015/16) commentary. Strategy and new approaches will be put in place through the IRMP.
2.	Number of Fire Casualties in accidental Dwelling Fires	6	6	7	29	<i>(Source: Scorecard Corporate Measures (P&amp;P) / IRS9.06a)</i> Two victims recorded in each unitary - Slough, Windsor & Maidenhead and Wokingham Continuing to address the risk and providing the prevention initiatives reported in Q4 (2015/16) commentary. Strategy and new approaches will be put in place through the IRMP.
3.	Number of people killed or seriously injured on Berkshires Roads*	25	25	72	288	<i>(Source: TVP)</i> The combined figure of 25 deaths and serious injuries is from Scorecard and represents only those victims recorded from incidents attended by RBFRRS.  Figures from TVP for incidents in Q1 should be received in October 2016 which will reflect the total numbers for Berkshire.  During the whole 2015/16 there were 22 people killed and 319 seriously injured on Berkshires Roads, these are official figures from TVP. This is a significant increase in comparison to 2014/15 which saw 16 people killed and 269 seriously injured.

ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
						<p>IRMP prevention proposals include intention to increase road safety education and to target highest risk groups.</p> <p>The figures for <b>Killed</b> and <b>Seriously Injured</b> people on Berkshire's roads are supplied by Thames Valley Police as requested by the Fire Authority. These are provided approximately 4 months in arrears.</p>
4.	Number of 999 Calls answered	8,268	8,268	3,500	14,000	<p><i>(Source: Scorecard Corporate Measures, Response – IRS 2.0a)</i></p> <p>The actual data (Q1 and YTD) is for all 999 calls received into TVFCS as RBFRS only calls cannot yet be separated from this total. The targets are for RBFRS only calls.</p>
5.	Number of emergency incidents called to	2072	2072	1581 (baseline from 2015/16)	7168 (baseline from 2015/16)	<p><i>(Source: Scorecard – IRS Book, IRS 1.3, including false alarms).</i> Some work needs to be carried out around data accuracy to ensure TVFCS are reporting the same figures as RBFRS, as there is a minor discrepancy around this measure.</p> <p>Up from 1581 in same period last year – increases in Bracknell Forest, Wokingham and West Berkshire. Increase due to over the border incidents, increased PDA and co-responding calls. RAG status to be confirmed once target set.</p>
6.	Time to answer emergency calls in 5 seconds 0.5% improvement as a 6 monthly average	86.2%	86.2%	90.5%	91%	<p><i>(Source: Scorecard Corporate Measures IRS 2.0a (LP 01a) from Vision feed and for all TVFCS.)</i></p> <p>Performance up from 82.7% achieved in 2015/16 overall. This is one of the key areas of focus for the performance of TVFCS. Much work is taking place to improve the performance of watches and individuals through analysis and training.</p>

ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
7.	Time to answer emergency calls in 10 seconds 0.5% improvement as a 6 monthly average	97.4%	97.4%	95.5%	96%	<i>(Source: Scorecard Corporate Measures IRS 2.0b (LP 01b) from Vision feed and for all TVFCS.)</i> Performance up from 96.3% achieved in 2015/16 overall. Strong performance has been achieved in this area due to analysis of performance and training. If a call cannot be answered within the 10 second target it is usually due to the inability of control room staff because they are all busy dealing with other 999 calls, particularly during spate conditions and increased call volumes. Work is ongoing to monitor this and will be reviewed for effectiveness and quality of service
8.	Time to mobilise within 60 seconds – 10% improvement on existing standards	37.8%	37.8%	42%	42%	<i>(Source Scorecard Corporate Measures IRS 2.0f (LP 02) from Vision feed and for all TVFCS.)</i> Strong performance improvement from April to June. Training Support Officer post is now in position and working hard to improve call handling performance. Technology regarding systems has improved also and TVFCS staff are now more familiar and confident with the systems so an improvement is anticipated moving forward.
9.	Time to mobilise within 90 seconds – 10% improvement on existing standards	67.2%	67.2%	72%	72%	<i>(Source: Scorecard Corporate Measures IRS 2.0f (LP 02) from Vision feed and for all TVFCS.)</i> Strong performance improvement from April to June. Again due to personnel leaving and the high numbers of personnel in development it is anticipated that performance will improve moving forward with additional resources being available to train staff.
10.	Time to mobilise within 120 seconds – 10% improvements on existing standards	81.7%	81.7%	95%	95%	<i>(Source: Scorecard Corporate Measures IRS 2.0f (LP 02) from Vision feed and for all TVFCS.)</i> This is one of the key areas of focus for the performance of TVFCS. Much work is taking place to improve the performance of watches and individuals through analysis and training.



ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
						Up from 70.7% overall in 2015/16. Further improvements in performance are expected due to personnel being more confident in the use of the systems and ongoing training and development.
11.	How often a Front Line Appliance attends a dwelling Fire with the 1 <sup>st</sup> arriving in 8 and the 2 <sup>nd</sup> arriving in 10 minutes as a percentage of all dwelling fires			73%	73%	<i>(Source: This measure is not currently reportable in IRS as it only permits one set of standards to be recorded. So if we needed to report this standard additional work would be needed due to configure IBIS and Scorecard. In light of the response standard consultation CMT decided not to put resources into this work.)</i>
12.	How often a Front Line Appliance attends a dwelling Fire with the 1 <sup>st</sup> arriving in 10 and the 2 <sup>nd</sup> arriving in 12 minutes as a percentage of all dwelling fires	80.3% tbc	80.3% tbc	87%	87%	<i>(Source: calculated using Dwelling fire incidents (accidental and deliberate - Scorecard Corp. Measures / IRS 3.1a) and then deducting attendance target failures (IRS Book section 11 / IRS 11.03) to calculate performance.)</i> Approximately 50% of attendance failures were due to excessive distance off ground. This means it took longer than normal to attend these incidents due to their locations being remote from a conurbation or over the border.  This measure cannot be calculated automatically at present. However, it is known that Over the Border (OTB) mobilisations are increasing in frequency in some areas of the county, particularly due to the borderless mobilising within Thames Valley employed by TVFCS.
13.	How often a Front Line Fire Appliance attends an RTC with resources for extrication of casualties within 11 minutes as a percentage of total RTC calls	73.2%	73.2%	94%	94%	<i>(Source: Scorecard Corporate Measures (LP11) and is the measure of attendance performance for all RTC's.)</i> Data checked with SQL audit trail from IRS. Reading, Bracknell and Wokingham all have above average attendance performance in Q1.  This measure will shortly be replaced with the new agreed response standard.

ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
14.	For whole time Duty system % planned availability of appliances	100%	100%	100%	100%	<p><i>(Source: Scorecard Central Team (CT) Book – (CTT07a) based on shifts worked at planned appliance crewing for WT (56).</i></p> <p>Discussed and agreed with Neil Carter and Jon Ball 5<sup>th</sup> July 16.</p> <p>Reviewed methods of crewing have ensured that this target is 'green', including utilising RDS staff to plug occasional WT gaps. Additionally, Station Commanders have been instructed to robustly manage local crewing, challenging any identified discrepancies.</p>
15.	For Retained duty system % planned availability of appliance	45.9%	45.9%	50%	50%	<p><i>(Source: Scorecard CT Book) which states for Q1, that RDS resources not available for 8,270 hrs out of 15,288. Availability deteriorated during Q1.</i></p> <p>Whilst low staffing figures continue to be the case at certain RDS stations, Lambourn as an example, other locations have seen a marked improvement in crewing levels as a result of recent recruitment drives, in turn improving appliance availability. Wargrave is a good example of this.</p> <p>Retained recruitment and retention are recognised as areas requiring work and will feature in the RDS project, with efforts made to identify new and innovative ways to recruit new members of staff, according to local cover need, such as that adopted at Wargrave.</p> <p>In the main, the hours stated by individuals in regard to what they agree to provide on a weekly basis are being met. Where these appear to differ and a reduction seen, managers are challenging the reasons given and taking action accordingly.</p>

ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
16.	% of vulnerable people receiving a HFRA compared to total number of HFRA carried out.	83.4%	83.4%	100%	100%	<p><i>(Source: Manual input from P&amp;P)</i></p> <p>1427 of 1712 HFSC's as of 12/0/16</p> <p>Reasons include:</p> <p>We use SAfER data information but this is not detailed enough for us. We need to refine data set further to achieve the outcomes we need to achieve. This is extracted on an annual basis (in September) and throughout the year there may be changes in ownership of property and mortality issues. Prevention is looking at obtaining other data fields to enhance the system.</p> <p>The mosaic data family groups are being reviewed and reduced to target more vulnerable groups.</p> <p>Quality of information being provided on Home Fire Safety Check paperwork is not always clear on identifying vulnerable group. Information and advice being provided to crews to improve this. Introduction of the tablet for completion of HFSC data, rather than paper forms, will reduce some inaccuracies and missing data (i.e. mandatory fields). These will be trialled at Wokingham Road fire station from end August and rolled out across stations by December 2016.</p> <p>Conversations are taking place with the NHS as part of the Sustainability and Transformation Plan (STP) arrangements to gather improved intelligence to focus our work in support of the most vulnerable members of our communities.</p> <p>Our IRMP Prevention report identifies those most at risk and our IRMP consultation proposals for prevention identify our intentions to focus our work where it will achieve the most benefit.</p>

ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
17.	% of dwelling fires where no smoke alarm is installed	14.6%	14.6%	15%	15%	<p>(Source: Scorecard Corporate Measures – IRS 5.0c (P&amp;P).)</p> <p>Prevention campaigns are continuing to ensure that people have an awareness of the importance of smoke alarms in the home and this is having a positive effect.</p>
18.	% of category 1 HFSC referrals completed within 3 working days	48%	48%	100%	100%	<p>(Source: Manual input from P&amp;P)</p> <p>11 out of 23 arson threat referrals were completed within the timeframe.</p> <p>The risk assessment for all arson threat referrals dictates that the HFSC technician must be accompanied by a police officer and in some instances 2 HFSC technicians must attend.</p> <p>The HFSC service is always offered within the 3 working day time frame. Failure to complete within the 3 working days is usually down to the Thames Valley Police (TVP) referring officer not being contactable due to shifts, TVP unable to supply an officer to attend a joint visit, resident/victim moving away from property on a temporary basis or are unavailable for the visit.</p> <p>Contact has been made with the senior TVP Prevention lead and work is being done with TVP to improve our performance in this area.</p>
19.	Number of Fire Safety Inspections carried out	434	434	458	1832	<p>(Source: Scorecard Corporate Measures (P&amp;P) FSR005.)</p> <p>Working with IT to check data feed configuration. Also made a request to IT for a modification to IBIS to facilitate accuracy of extraction of full audit data. There is usually a 1-3 month lag in data entries for this measure in IBIS and so numbers could be revised (upwards) in next report.</p> <p>Number down from 548 in same Quarter last year. A</p>

ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
						<p>further 175 audits were started in Q1 – but not yet closed, therefore do not appear in the total. Only Reading inspections up from same Quarter last year. This target number /measure has been derived from an average number reached over the past 3-5 years.</p> <p>Protection is currently part of the IRMP service redesign process .The outcome of that process will mean that there will be a significant shift in how we target premises within our risk-based inspection programme during the 2016/17 performance year.</p> <p>A number of fully trained staff have left the organisation within the last year meaning. We currently have less competent personnel to carry out premises audits. These two factors will impact on the target number/measure for the number of audits completed in this performance year.</p> <p>One aspect of IRMP is a drive to support the “Better Business for All” agenda. This aspect of delivery will see staff trained up to QCF Level 3 certificate carrying out audits in low risk premises in unitary areas. The number of audits completed through this venture could be used to offset the numbers of premises audits lost after a change in focus in our existing risk based inspection programme.</p>
20.	Fire Protection number of audits and inspections where the results were satisfactory	80.2% (348)	80.2% (348)	76% (348)	76% (1392)	<p><i>(Source: Scorecard Corporate Measures (P&amp;P) FSR006.)</i> 80.2% (348) of inspections recorded had a satisfactory outcome out of the 434 inspections. <i>There is usually a 1-3 month lag in data entries for this measure in IBIS and so numbers could be revised (upwards) in next report.</i></p> <p>This target number/measure has been derived from past performance data over the last 3-5 years. As this target</p>

ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
						<p>number/measure is based on a percentage of the audit numbers achieved, a possible drop in the number of audits completed will not impact on the target.</p> <p>A change in the types of premises targeted under our proposed new risk-based inspection programme approach will mean that we will be working in areas where compliance with the Fire Safety Order is less likely. This will lead to a decrease in the percentage of premises audited that are satisfactory at the time of the audit. We will be making more of a difference using our available resources through spending time with those who need to improve their fire safety arrangements.</p> <p>Education, guidance, support and enforcement in the premises under these new focus areas over the coming years will ensure improved self compliance against the Fire Safety Order which will again improve the number of premises who are satisfactory following a full audit.</p>
21.	Fire Protection number of premises requiring informal activity	20.1% (87)	20.1% (87)	23% (105)	23% (422)	<p><i>(Source: Scorecard Corporate Measures (P&amp;P) FSR007.) There is usually a 1-3 month lag in data entries for this measure in IBIS and so numbers could be revised (upwards) in next report.</i></p> <p>20.1% (87) of inspections recorded 'requiring informal action' of the 434 inspections carried out during Q1. The target % measures have been derived from historical data spanning 3-5 years.</p> <p>The number of informal/formal notices issued is likely to increase as our focus on premises falling under our risk based inspection programme will change following a wider IRMP consultation process into the way in which RBFRS</p>

ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
						<p>delivers its services to the public.</p> <p>The current target number/measure confirms we have issued fewer notices than the same time last year. This could mean that our education, support and compliance strategies have been effective or it could confirm that we are simply continuing to audit premises we already know are likely to be compliant. As our now focus on risk premises begins to take effect the numbers of informal/formal notices is likely to increase.</p>
22.	Fire Protection number of premises requiring formal activity	0.2% (1)	0.2% (1)	1% (4)	1% (18)	<p><i>(Source: Scorecard Corporate Measures (P&amp;P) FSR008.)</i>  <i>There is usually a 1-3 month lag in data entries for this measure in IBIS and so numbers could be revised (upwards) in next report.</i></p> <p>0.2% (1) of inspection recorded 'requiring formal action' of the 434 inspections carried out during Q1. (Formal action for 'Enforcement Notice' – West Berkshire).</p> <p>Low levels of performance against this measure provide good evidence for our proposed change to re-focus our attentions towards those premises that do not have adequate fire safety arrangements. Through doing so, we can make best use of our resources and deliver the greatest gains in fire safety within commercial and public access buildings across Berkshire.</p> <p>See commentary in corporate measure 21</p>
23.	% success rate when cases go to court	100%	100%	95%	95%	<p><i>(Source: Scorecard Corporate Measures (P&amp;P).)</i></p> <p>Over the last 3 years, RBFRS has conducted 18 prosecutions and these have all been successful. In comparison our neighbouring services have carried out far fewer prosecutions. This shows that when serious deficiencies are found, RBFRS has robust prosecution</p>

ID	Measure	Q1 Actual	Y.T.D. Total	Y.T.D. Target	2016/17 Target	Commentary/Corrective action
						<p>arrangements in place. There is a succession planning issue for this work that is being addressed at this time to ensure we can continue to be effective in the future.</p> <p>No prosecutions were completed in Q1.</p>
24.	% of domestic respondents satisfied with the overall service	n/a	n/a	100%	100%	Data not yet available.
25.	% of commercial respondents satisfied with the overall service	n/a	n/a	95%	95%	The previous 3rd party survey contract has been cancelled at the end of 2015/16 as it was not procurement compliant. An in-house manual survey process is being developed and aims to be completed by the end of 2016/17 and results will be published when available.
26.	% of respondents satisfied with the services with regards to Fire Safety Audits	n/a	n/a	97%	97%	



## Service Planning

Service Plans have been created to outline the management of day-to-day business. They set out how each department contributes to the achievement of strategic objectives and targets by aligning tasks for individuals to objectives. This provides a line of sight between the activities of each member of staff and the wider strategic direction. The following reports on the currency of existing Service Plans:

<b>Service Plan</b>	Q1 update provided	Q2 update provided	Q3 update provided	Q4 update provided
HR and L&D	✓	-	-	-
Corporate Services	✓	-	-	-
Health & Safety, Facilities and Stores	✓	-	-	-
Response	✓	-	-	-
Prevention and Protection	✓	-	-	-
Finance & Procurement	✓	-	-	-
Business Information and Systems	✓	-	-	-
Risk & Performance	✓	-	-	-

## Information Management Report (April to June 2016)

### Information Requests (under Freedom of Information Act (FOIA), Environmental Information Regulations (EIR) and Data Protection Act (DPA).

	April 2016	May 2016	June 2016	TOTAL
<b>Information Requests...</b>				
New Information Requests Received	9	14	11	<b>34</b>
Total Information Requests Actioned	16	20	20	<b>56</b>
IMG - Hours Spent on Information Requests	17	59	39	<b>115 ½</b>
Others - Hours Spent on Information Requests	3¼	11¾	12½	<b>27 ½</b>
Timeframes not met (figures relate to request due date)	0	1	0	<b>1</b>
Internal Reviews (figures relate to request due date)	0	0	0	<b>0</b>
Complaints made to the Information Commissioner's Office (ICO)	0	0	0	<b>0</b>

The responses made to the information requests are logged in the Authority's disclosure log and can be viewed internally through the following link [disclosure log](#). Due to a new website these are not currently available externally.

### Incident Reports

	April 2016	May 2016	April 2016	TOTAL
<b>Incident Reports...</b>				
New IRS/FI requests received per month	7	17	17	<b>41</b>
IRS/FI requests confirmed (includes not charged for)	1	4	11	<b>16</b>
Total IRS/FI requests actioned (incl. still in progress)	9	18	20	<b>47</b>
Total ££ so far this year	£662.27 (IRS £662.27) (FI £00.00)	£946.10 (IRS £946.10) (FI £00.00)	£1513.76 (IRS £1513.76) (FI £00.00)	

Incident Recording System (IRS) Reports are charged at £94.61.

Fire Investigation (FI) Reports (where produced) are charged at £331.72+VAT.

Report costs are waived for TVP, local authorities, and other public sector agencies.

## Quadrant Two: Corporate Health

### Corporate Health progress

Key:

Red = Target missed by more than 10%

Amber = Target missed by 10% or less.

Green = Target met or exceeded by less than 10%

Blue = Target exceeded by 10% or more

Grey = Data accuracy issues make judgement not possible

ID	Measure	Q1 Actual	YTD Total	YTD Target	2016/17 Target	Commentary/ Corrective action																																																												
27.	Establishment Planned vs. Actual (the planned establishment for each RDS station against the actual number of RDS employees)	66 (34.13 FTE)	66 (34.13 FTE)	65	65	<p>(Source: manual input from HR) Although an establishment of 13 is allocated to each Station, we look at the cover given at each Station not just the number of people. We use this measure to target recruitment. FTE v "Actual" is a theoretical ratio. RDS cover is delivered through management of multiple individual RDS resources contracts.</p> <table border="1"> <thead> <tr> <th>STATION</th> <th>Staff in post</th> <th>Full Time equivalent</th> <th>Establishment</th> <th>Staff In Post v Establishment</th> <th>Full Time Equivalent V Est.</th> </tr> </thead> <tbody> <tr> <td>05 Hungerford</td> <td>11</td> <td>5.52</td> <td>13</td> <td>84.62%</td> <td>42.49%</td> </tr> <tr> <td>06 Lambourn</td> <td>4</td> <td>2.47</td> <td>13</td> <td>30.77%</td> <td>19%</td> </tr> <tr> <td>07 Pangbourne</td> <td>9</td> <td>5.03</td> <td>13</td> <td>69.23%</td> <td>38.69%</td> </tr> <tr> <td>09 Wargrave</td> <td>9</td> <td>4.48</td> <td>13</td> <td>69.23%</td> <td>34.43%</td> </tr> <tr> <td>11 Mortimer</td> <td>9</td> <td>4.81</td> <td>13</td> <td>69.23%</td> <td>36.98%</td> </tr> <tr> <td>15 Crowthorne</td> <td>10</td> <td>6.09</td> <td>13</td> <td>76.92%</td> <td>46.84%</td> </tr> <tr> <td>19 Retained</td> <td>14</td> <td>5.74</td> <td>13</td> <td>107.69%</td> <td>44.15%</td> </tr> <tr> <td>Brigade HQ</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> </tr> <tr> <td>Grand Total</td> <td>66</td> <td>34.13</td> <td>91</td> <td>72.53%</td> <td>37.51%</td> </tr> </tbody> </table>	STATION	Staff in post	Full Time equivalent	Establishment	Staff In Post v Establishment	Full Time Equivalent V Est.	05 Hungerford	11	5.52	13	84.62%	42.49%	06 Lambourn	4	2.47	13	30.77%	19%	07 Pangbourne	9	5.03	13	69.23%	38.69%	09 Wargrave	9	4.48	13	69.23%	34.43%	11 Mortimer	9	4.81	13	69.23%	36.98%	15 Crowthorne	10	6.09	13	76.92%	46.84%	19 Retained	14	5.74	13	107.69%	44.15%	Brigade HQ	-	-	-	-	-	Grand Total	66	34.13	91	72.53%	37.51%
STATION	Staff in post	Full Time equivalent	Establishment	Staff In Post v Establishment	Full Time Equivalent V Est.																																																													
05 Hungerford	11	5.52	13	84.62%	42.49%																																																													
06 Lambourn	4	2.47	13	30.77%	19%																																																													
07 Pangbourne	9	5.03	13	69.23%	38.69%																																																													
09 Wargrave	9	4.48	13	69.23%	34.43%																																																													
11 Mortimer	9	4.81	13	69.23%	36.98%																																																													
15 Crowthorne	10	6.09	13	76.92%	46.84%																																																													
19 Retained	14	5.74	13	107.69%	44.15%																																																													
Brigade HQ	-	-	-	-	-																																																													
Grand Total	66	34.13	91	72.53%	37.51%																																																													

ID	Measure	Q1 Actual	YTD Total	YTD Target	2016/17 Target	Commentary/ Corrective action
28.	% of working time lost to sickness across all staff groups	3.86	3.86	4%	4%	<p><i>(Source: manual input onto Scorecard from HR)</i></p> <p>RDS figures should be viewed with caution as this figure is calculated based on the average shift length and these vary considerably and many sickness episodes may be recorded as unavailable.</p> <p>Performance in quarter 1 has improved with the percentage of time lost to sickness across all groups reducing from 3.92% in quarter 4 to 3.86% in this quarter. Compared to the same quarter last year performance has also improved from 3.89 to 3.86.</p> <p>We see a continued downturn in sickness absence levels across all employee groups with the exception of RDS staff where there has been a very slight increase this quarter. However it should be noted that RDS sickness levels are the lowest of all groups. Control has the highest sickness level at 9.16%. However, much work has taken place to ensure TVFCS managers are well trained in managing absence and fully employ RBFPS policies. This should lead to significant improvements in attendance levels in future months.</p> <p>During this quarter short term sickness has reduced from the previous quarter (0.80 to 0.77 days per employee) and also improved on the same quarter last year (1.1) by 0.33 days per employee.</p> <p>A number of considerations and initiatives continue and this area remains a high priority for the organisation. Health promotion initiatives e.g. Health Fayre to highlight additional health supports available to staff and targeted fitness and health advice in relation to sickness trends is being prepared supported by regular articles in the Shout.</p> <p>Focused case support to ensure early intervention and provide support to managers.</p> <p>Ongoing policy review to ensure changes to support effective management of sickness absence including consideration of</p>

ID	Measure	Q1 Actual	YTD Total	YTD Target	2016/17 Target	Commentary/ Corrective action
						flexible annual leave. Occupational Health provision is being reviewed together with consideration for additional private health care options
29.	% of Eligible operational staff successfully completing fitness test	96.6%	96.6%	100%	100%	<p>(Source: Manual input required from HR.)</p> <p>Q1 – 99.3% of eligible staff tested performance = 97%pass rate of those tested 96.6% pass rate of all eligible staff</p> <p><b><u>Not tested</u></b> 2 whole time individuals outstanding tests will be done as part of their return to work 1 RDS outstanding. Non compliance has been escalated to Group Managers All 3 tests are due for July. 6 individuals that are not eligible for testing due to currently being on light duties or long term sick.</p> <p><b><u>Not achieving the standard</u></b> There are currently 12 individuals in development and these are being supported to achieve the required fitness standard. Retests scheduled every 4 weeks and appropriate and tailored programmes provided</p> <p>In comparison with the same quarter last year performance has improved from 94.2% and from 96.5% in the last testing quarter (Q3). It should also be noted that the fitness standard increased in April 2016 and therefore not only has performance improved in percentage terms, a higher level of fitness being demonstrated by staff. A programme of functional fitness has been rolled out across stations which focus fitness training against role requirements.</p> <p>Further attention is programmed for the next quarter in relation to assessment of those in development and introduction of</p>

ID	Measure	Q1 Actual	YTD Total	YTD Target	2016/17 Target	Commentary/ Corrective action
						associated national guidance.
30.	All injury accidents including RIDDOR	0 vs 13	0 vs 13	1 vs 21	6 vs 82	<p>(Source: Manual input from H&amp;S)</p> <p>No RIDDOR accidents were reported in quarter one. Of the accidents that occurred, five were medium severity, seven were minor. Three involved non employees (two contractors, one visitor). There were no apparent trends.</p>
31.	% of eligible staff with PDIs	85%	85%	100%	100%	<p>(Source: manual input onto Scorecard from HR)</p> <p>Based on 608 staff, 125 have not yet had their PDI. 30 were exempt for the following reasons:</p> <ul style="list-style-type: none"> <li>• 2 Fixed Term</li> <li>• 2 Leavers</li> <li>• 1 Maternity</li> <li>• 19 New employees who will be under probation review</li> <li>• 6 long term sick</li> </ul> <p>The performance reported in this period is 85% this is a decline on performance in the same period last year which was 93.28%</p> <p>The figures are obtained from firewatch as recorded by the Line Manager on the date they undertook the PDI's if these have not been recorded appropriately figures will not accurately reflect performance.</p> <p>Reminders have been included in Cascade and been issued by e-mail. All non completed PDI's currently recorded will be forwarded to Directors for their attention.</p> <p>At this stage in the year we have not cross checked paperwork received in HR as the deadline is so close to the period end and</p>

ID	Measure	Q1 Actual	YTD Total	YTD Target	2016/17 Target	Commentary/ Corrective action
						it is expected for paperwork to be fully completed this will take a month or so. This figure has dropped from last year.
32.	Number of capital projects whose forecasted outturn has a variance of more than 10% compared to the annual budget	0	0	0	0	<p><i>(Source: Manual input from Finance &amp; Procurement)</i></p> <p>Capital Programme Bids are still being developed at the Q1 stage. This means that the majority of new budgets, approved at Feb 2016 Fire Authority meeting, fall into this category. At Q1 there are no forecasted outturns with a variance of more than 10%</p>
33.	Number of revenue cost centres whose forecasted outturn has a variance of more than 10% compared to the annual budget	0	0	0	0	<p><i>(Source: Manual input from Finance &amp; Procurement)</i></p> <p>There are no revenue cost centres which a forecast variance of more than 10%</p>
34.	% of expenditure less than 10K	10.93 %	10.93 %	8%	8%	<p><i>(Source: Manual input from Finance &amp; Procurement )</i></p> <p>The roll out of procurement training throughout the organisation will start to address performance in relation to this metric. However, the Procurement Department will also be examining this area of spend to ensure that non-contractual spend is undertaken in the most efficient manner.</p>
35.	Contracted spend as a % of overall spend	73.5%	73.5%	70%	70%	<p><i>(Source: Manual input from Finance &amp; Procurement )</i></p> <p>This is the total contracted paid expenditure as a percentage of the total paid (non statutory) expenditure During the first quarter a higher % of spend is made to suppliers for annual licences and subscriptions and this may affect the % spend being shown at the same level in future quarters. The Procurement team are focusing on putting in place any missing contracts for the highest spend areas to ensure compliance and reduce any risk to the Authority</p>

ID	Measure	Q1 Actual	YTD Total	YTD Target	2016/17 Target	Commentary/ Corrective action
36.	Total expenditure per head of population	To be reported annually	To be reported once all entries have been made in Sage	35.74	35.74	(Source: Manual input from Finance & Procurement )
37.	% FOI requests referred to the Information Commissioner	0%	0%	0%	0%	Source: Manual input from Information Management 33 FOI requests were received in quarter 1 and none were referred to the Information Commissioner



## Quadrant Three: Priority Programmes

### Integrated Risk Management Plan (IRMP)

Programme Highlight Report								
<b>PROGRAMME TITLE :</b>	<b>IRMP</b>						<b>PROGRAMME SPONSOR</b>	<b>DCFO Ferguson</b>
Reporting Period	<b>Apr – Jun 2016</b>						<b>PROGRAMME MANAGER</b>	Simon Jefferies
Programme RAG Status (Red/Amber/Green)	Overall RAG	Time	Resource	Cost	Benefit	Stakeholders		
	<b>G</b>	<b>G</b>	<b>G</b>	<b>G</b>	<b>G</b>	<b>G</b>		
Programme Summary	To deliver an integrated risk management plan 2015 – 2019 for Berkshire in August 2016 detailing the best location and use of resources to mitigate and reduce community risk, whilst contributing to organisational savings of £1.4m aligned to current government budget reduction targets for 2019.							
General Achievements	<p>Response standards consultation underway with 158 questionnaires submitted as of the end of June. Due to close on 25<sup>th</sup> July.</p> <p>Service re-design Technical Report being prepared in readiness for the Management Committee in September</p> <p>Wargrave co-responding scheme has been launched</p> <p>Work on planning the Hungerford Refurbishment continues with good progress made with the station fully engaged in the decant project</p> <p>PID approved for the Information Governance project</p>							

Work Package Title	Project Manager/Lead	Achievements this period	RAG Status (Red/Amber/Green)		Task/Action planned for next period
			PREV	CURR	
Project 1 – Response standards, Station location and crewing arrangements	Simon Jefferies	Consultation underway on Response standards which is due to complete in July. Social media and various engagement activities underway to increase awareness. Submission of reports following the service re-design process has led to the Service redesign technical report being prepared ready for the Lead member to deliver proposals to the management committee in September. Work to risk model the proposals in the service redesign report is underway.	G	G	Response consultation to be completed in July with a report of the public consultation to go to the August management committee meeting and then the August FA meeting.  Proposals to be prepared for the Service re-design to go to the Management Committee
Project 2 – Use of technology	Paul Jones	Research and review completed and report submitted for review in preparation	G	G	Report to go into consultation following Fire Authority review in August
Project 3 – Prevention	Iain Harrison	Research and review completed and report submitted for review in preparation	G	G	Report to go into consultation following Fire Authority review in August
Project 4 – Protection	Chris Bunyan	Research and review completed and report submitted for review in preparation	G	G	Report to go into consultation following Fire Authority review in August
Emergency Medical Response	Neil Carter	Wargrave co-responding scheme launched on 13 <sup>th</sup> June. Wokingham and Officer co-responding schemes are continuing.	A	A	Development work to continue on the cardiac arrest response
IRMP Consultation	Jim Powell	Response standard strategy out for consultation with an ongoing stakeholder engagement and social media campaign continuing	G	G	Response standards consultation to close and reports prepared for Fire Authority

IBIS Development	Matt Pinto	Two items now implemented following successful testing (IBIS security model, new format AddressBase file). Further development work in test (short audit, scoring calc, re-inspection period development work)	G	G	Complete testing on short audit, scoring calc, re-inspection period development work
Capital Project – Theale new Build	Alex Brown	Suppliers appointed up to first Gateway. Procurement exercise underway to appoint new professional services team ongoing  Phase 2 site investigations are complete	G	G	Feasibility preparation to be completed for recommendation presentation to members in August. Additional consultants to be appointed to form the professional services team.
Capital Project – Hungerford Refurbishment	Alex Brown	Professional consultant team appointed and working well.  Decant options have been secured and the station is engaged in the decant project	G	G	Final build specification completed ready for the contractor tender process. Decant preparation to continue

### KEY ISSUES FACING THE PROGRAMME

Issue ID	Issue Description	Issue Treatment	Inherent Score	RAG	Issue Owner	Response Actions	Open/Close

**KEY RISK TO OVERALL DELIVERY**

Risk ID	Risk Description	Risk Treatment	Inherent Score	RAG	Risk Owner	Response Actions	Open/Close
25	If opposition from staff and FBU happens, which is quite likely given the reducing budget, then we can expect a failure or extended length of time to deliver our PPR strategy	Communicate and engage prior to formal consultation	16		Trevor Ferguson		Open
194	Failure to identify and facilitate shared property opportunities with potential partners, which is likely due to insufficient internal capacity and expertise, then we can expect to miss funding and cost rationalisation opportunities which are significant in respect to our financial security, operational and political reputation objectives	Ensure appropriate professional expertise services are engaged to protect client-side interest	21		Trevor Ferguson		Open

## Organisational Development (OD)

### Programme Highlight Report

<b>PROGRAMME TITLE</b> : Organisational Development							<b>PROGRAMME SPONSOR</b>	<b>CFO Andy Fry</b>
Reporting Period	May 2016					<b>PROGRAMME OWNER</b>	<b>Anne-Marie Scott</b>	
Programme RAG Status (Red/Amber/Green)	Overall RAG	Time	Resource	Cost	Benefit	Stakeholders	<b>PROGRAMME MANAGER</b>	<b>Jane Lubbock</b>
	G	G	G	G	G	G		
Programme Summary	<p>The Organisational Development Programme will deliver a range of inter-linked outcomes to support cultural change across the organisation. The programme will be delivered collaboratively with representation from across the workforce and representative bodies supplemented by external expertise and capacity as required</p>							
General Achievements	<ul style="list-style-type: none"> <li>• <b>Award ceremony took place on 20<sup>th</sup> May and was attended by approximately 250 people. With 17 categories of awards, including the Long Service and Good Conduct Medals, the Ceremony recognised over 90 teams for their achievements</b></li> <li>• <b>Uniform trials completed and final white shirt selected. Contract supplier has provided a quote for popper navy shirts and changes to branding. Work wear being selected for new Customer Service Officers</b></li> <li>• <b>Two OD Champion and CMT self assessment have taken place and now being rolled out in service areas to understand focus areas to be worked on in preparation for the Investors in People. Staff survey planned for June 2017 prior to full IIP assessment</b></li> <li>• <b>Programme of station and departmental visits agreed by SMT rolling out from July. Visits will take place twice a year</b></li> <li>• <b>New Room bookings process to go live at the end of June</b></li> <li>• <b>Contract for nine core skills courses awarded. Procurement Skills courses commence in July</b></li> </ul>							

Work Package Title	Project Manager	Achievements this period	RAG Status Red/Amber/Green		Task/Action planned for next period
			PREV	CURR	
<b>Employer Excellence</b>					
1. Reward and Recognition	Katie Mills	Award Ceremony took place on 20 May 2016. In total 17 categories of awards including the Long Service and Good Conduct Medals. The Awards Ceremony has seen over 90 teams and/or individuals being recognised as part of the process with nearly 250 people attending the Awards Ceremony.	G	G	<p>Rewards and Recognition Strategy to be developed to formalise our approach to recognising staff and to capture our offer as an employer.</p> <p>June edition of 'The Shout' will celebrate the staff recognised as part of the Awards Ceremony celebrations.</p>
2. Strategic narrative and employer branding	Anne-Marie Scott	<p>Vision 2019 underpins all activities in this programme from Phase 3 staff engagement through to the four themes of this programme.</p> <p>Plan is now being developed to ensure the strategic narrative becomes the single compelling business story that everyone can buy into and feel part of and know they are all working towards the same goals.</p>	G	G	<p>All projects and forms of communication checked to ensure that the touchstone is Vision 2019 and is visible in everything that is said and becomes part of daily language.</p> <p>Develop communication plan to further embed Vision 2019 in the organisation.</p> <p>New branding guidelines and toolkit to be launched in July 2016</p>

3. Branding - uniforms and work wear	Anne-Marie Scott	Uniform trials complete and final pricing being obtained. Corporate work wear for Customer Services Officers selected	A	A	Uniform order and timeline for delivery to be agreed once price and budget approved.  Corporate work wear should be in place by end of July
4. Investors in people standard.	Anne- Marie Scott	liP self assessment session completed with CMT and OD Champions with very useful feedback  Next phase of self assessment by OD Champions with their teams in progress	G	G	Self assessment work with stations and champions to be completed by mid-July to map current position against the liP Standard.  liP action plan to be developed and implemented supported by linked projects that evidence achievement  Staff survey planned for June 2017 and on site assessment to take place in Sept 2017
<b>Engagement</b>					
5. Evolve and embed continuous feedback, process and mindset ensuring this reflects best practice	Katie Mills	Launched new monthly editions of 'The Shout' with new template.  Communications and Engagement Strategy finalised following consultation.  Fortnightly communication meetings taking place to collate key messages	G	G	Start new programme of station visits from July 2016. Collate feedback from those visits centrally.  Carry out a feedback survey on Cascade to ensure it is being used effectively across the service.

		Programme of Station and departmental visits agreed by CMT to be rolled out from July. Visits from CMT and HOS will now take place twice a year.			
6. Re-define relationships with representative bodies	Anne-Marie Scott	Relevant policies underway review and being updated to reflect all the representative consultative bodies with planned completion in July	G	G	Complete review and issue communications on changes
<b>Leadership and Learning</b>					
7. Leadership Development Programme	Anne- Marie Scott	<p>Further sessions for CMT, SMT and the leadership team scheduled for the year and agendas to include all aspects of Leadership and Political awareness.</p> <p>Personality colour profiling of leadership team started.</p> <p>Overall aim of the Leadership programme is to embed a one team approach across all services.</p>	G	G	<p>.</p> <p>Next Leadership event planned for July 2016</p>
8. Learning Management System (LMS) and e-delivery	Becci Jefferies	Scope of project under discussion and PID to be developed for consideration at the next OD Programme Board	NS	NS	Scope and PID to be re-written ready for July OD Programme Board



9. Promotion and talent management	Anne-Marie Scott	PID for Talent Management under review for re-submission to the Programme Board	NS	NS	PID to be re-submitted to July OD Programme Board
10. Core skills framework	Jane Lubbock	<p>Core skills academy development in progress with four key trainers. Course dates being booked so that these can be selected as part of PDI process.</p> <p>Courses are aligned using the same models and reflect the one team culture and supports the achievement of Vision 2019</p> <p>New core skills intranet page live</p>	G	G	Procurement Core Skills training now live.
<b>New Ways of Working</b>					
11. Performance management & continuous improvement		Completed and now forms part of business as usual	C	C	
12. Business process improvement	Jane Lubbock	<p>Change to Room Bookings process to go live end of June. Comms being aligned to advise of change.</p> <p>Contract retention process and supplier remittance process reviewed and updated</p>	G	G	<p>P2P process and supplier set up process to be reviewed in July</p> <p>Review options for re design of Hard FM contracts to improve communications re repairs and ensure VFM obtained</p> <p>Savings of £1000 a year to be achieved from supplier remittances</p>

		<p>New contract rules drafted to go to Management Committee in July</p> <p>New Procurement templates drafted</p> <p>Training course programme prepared</p>			Contract rules to go to committee in July
13. Collaboration	Jane Lubbock	<p>Two projects in delivery –</p> <ul style="list-style-type: none"> <li>Operational policy alignment</li> <li>Standardisation of large appliances out to tender</li> </ul> <p>At scoping stage</p> <ul style="list-style-type: none"> <li>Operational training options</li> <li>Standard appliance equipment tenders being evaluated</li> <li>Operational response standardised TOG implementation</li> </ul>	G	G	<p>New contract in place for appliances and agree locations to be based where cross working most likely</p> <p>Review options for future equipment and issue tenders</p> <p>Training review to commence with analysis of current state for OFRS</p> <p>Approve PID and develop implementation plan of activities</p> <p>Develop shared intranet page and internal communications</p>

### KEY ISSUES FACING THE PROGRAMME

Issue ID	Issue Description	Issue Treatment	Score	RAG	Issue Owner	Response Actions	Open/Close
----------	-------------------	-----------------	-------	-----	-------------	------------------	------------

## KEY RISK TO OVERALL DELIVERY

Risk ID	Risk Description	Risk Treatment	Current Score	RAG	Risk Owner	Response Actions	Open/Close
250	Changing Political environment	Review of Home Office requirements and formation of strategic action plan. If necessary, review of organisational objectives, regular programme board updates on impacts, incorporate changes within communication plan to all staff	16	A	CMT	Ensure all relevant consultation papers that could impact on any projects within the OD programme are raised with the Programme Sponsor	Open
261	IT capacity to support elements of the OD programme as required	Identify the requirements for a new intranet and website plus other projects as part of the PID to enable options for IT support to be considered fully.	11	A	CMT	Bids for additional capital/ revenue or transition fund  Projects requiring IT support to be prioritised against other corporate priorities.	Open
New Risk	Volume and speed of change as a result of delivery of the OD programme	Project and programme resource plan to be finalised and all projects not started until being formally signed off and resources agreed	11	A	CMT	Development of plan in progress. To be finalised by the end of June  Capture all new projects being started without approval	Open
New Risk	Budget available to deliver the OD programme	Current projects funded from existing resources or Transition fund.  All PIDs to consider whole life costs and benefits	11	A	CMT	Ensure that all improvements and savings achieved from the programme are captured for the MTFP	Open
New Risk	Timeline for implementing the new uniforms	Once costs and timelines known from the PM discuss other options to agree way forward	14	A	CMT	Uniform project to sit within the overall branding project	Open

## **Quadrant Four: Risk**

### **Accident Investigations**

Q1 15/16 – 12 requiring investigation

Q1 16/17 – 15 requiring investigation

Total number of Q1 accident reports completed as 14/07/16\* - 8

Recommendations arising from accident investigations that have not been implemented within agreed timescales – 0

*\* Accident investigation policy allows Accident Investigation Officers two months in which to carry out their investigation, complete and submit their report.*

### **Procurement Compliance**

It was agreed that as part of the work to address non-compliance around procurement, a report would be completed each quarter to identify where non-compliance is occurring.

The issue of non-compliance around procurement has been addressed during 2015/16 by ensuring valid contracts are in place where appropriate. Procurement training will be rolled out during the first quarter of 2016/17 to ensure that anyone with procurement responsibilities has a full understanding of procurement rules and processes.

### **Corporate Risk Register**

See Appendix A (separate paper)

### **Audit Recommendations**

The audits shown in Appendix 1 have been undertaken and recommendations agreed. The information in Appendix 1 provides a progress on those recommendations. Recommendations are reported against the timeframes originally contracted and are only CLOSED once evidence has been provided to satisfy the recommendation.

Key to audit progress	
	For the reasons stated the action will not be completed within the agreed timeframe.
	For the reason stated it is possible that the action will not be completed within the agreed timeframe.
	Action will be or has been completed within the agreed timeframe.

## Appendix 1: Audit Recommendations log

Audit title	Audit Action	Date by	Revised Completion Date	Priority	Progress	Status	Open / Closed	Brief description of Evidence received from	Date of Audit	Date of Closing Meeting	Allocated to	PR comments
<b>Non uniformed Leave</b>	Consider the removal of the leave card and utilise only firewatch, subject to the self service upgrade, to manage the leave process	Jun-16	awaiting implementation of Fire Watch 7.6	Low	JM comment: (April 16)Until such a time that FireWatch annual leave recording for green book staff working part time hours on a flexible basis is fully functioning we will not be seeking to remove the leave cards currently issued. We will continue to review this on an annual basis and following the implementation of FireWatch 7.6	GREEN	open		Oct-15	18/11/2015	Head of HR	FW needs to be tested and secure prior to the removal of leave cards. Ideally this will happen ready for next years leave process
<b>Governance &amp; Risk Management</b>	Record due dates for actions arising out of CMT meetings. This could be in the form of an action log. This will be monitored at each meeting, with updates recorded within the minutes	30th June 2016		Low		GREEN	open		14/03/2016		Head of Risk and Performance	

<b>Governance &amp; Risk Management</b>	the Organisational Risk Management Policy guidance note will be reviewed and the following enhancements considered: providing further clarity, through use of examples, on identifying controls/ mitigations, reflecting that controls/mitigations need to be actual rather than aspirational; reflecting the need to map assurances to controls/ mitigations; explain that assurances can be 1st, 2nd or 3rd line, positive/ negative, internal/ external and could be dated to help demonstrate their relevance; a simple mechanism to reflect if the risk score is within the risk appetite (for example, of the introduction of target risk scores); and identifying and separately recording actions required to further mitigate risks towards the target risk score, and the implementation status of those actions.	30th June 2016	30th July 2016	Medium	Policy has been amended , guidance note being produced and changes to meet the audit recommendations will be made by 30 July 2016	<b>Green</b>	<b>Open</b>	Policy has been amended , guidance note being produced and changes to meet the audit recommendations will be made by 30 July 2016	14/03/2016	<b>Head of Risk and Performance</b>
---	--	----------------	----------------	--------	---	--------------	-------------	---	------------	-------------------------------------

<b>Governance &amp; Risk Management</b>	The Risk register template will also be reviewed to consider incorporating the agreed changes highlighted in Risk 80. This could be via the introduction of separate columns for identifying and recording: Existing controls/ mitigations; assurances on these controls/ mitigations; target risk scores; Actions required to further mitigate risks; and the implementation status of further actions identified.	30th June 2016	30th July 2016	Medium	Policy has been amended , guidance note being produced and changes to meet the audit recommendations will be made by 30 July 2016	<b>Green</b>	<b>Open</b>	Policy has been amended , guidance note being produced and changes to meet the audit recommendations will be made by 30 July 2016	14/03/2016		<b>Head of Risk and Performance</b>	
<b>IT General Controls</b>	No documented patch management procedures are in place. Management will develop, document and communicate a patch management and update procedure.	30th April 2016		Medium	This is incomplete. Patch management is in place but we do not yet have this documented.	<b>RED</b>	<b>Open</b>		14/03/2016		<b>Lee Arslett</b>	
<b>IT General Controls</b>	Firewall management procedures. Management will document guidance notes and include guidance on the following processes: Configuration management; Rule-base changes; Security reporting and monitoring; Performance Monitoring	30th June 2016		Low	Incomplete -Firewall management and configuration management is in place but it is not yet documented	<b>RED</b>	<b>Open</b>		14/03/2016		<b>Lee Arslett</b>	

## Appendix 2: Capital Programme Expenditure 2016/17

	Original Budget 2016/17 £'000	Slippage From 2015/16 £'000	Latest Budget 2016/17 £'000	Actual Spend to Q1 £'000	Expected Spend Q2 £'000	Expected Spend Q3 £'000	Expected Spend Q4 £'000	Variance Budget £'000	Notes
<b>CAPITAL SCHEMES</b>									
Ascot Fire Station upgrade	0	40	40	34	6			0	The works are nearing completion.
Appliance bay door replacement programme	250		250	38	100	56	56	0	The works are underway and are at different stages in the process. The budget is expected to be fully spent by 31 March, albeit the spend profile may not be as even as indicated here.
Replacement storage building at Caversham Rd Fire Station	0	150	150	0				150	Awaiting structural engineer's report before obtaining quotes.
General building enhancements - Refurbishments	950	0	950	7		90	670	183	Includes Hungerford Station works £780k - works to be completed by end of April 2017. Budget to be carried forward to support this completion date.
General building enhancements -Station Improvements	130	94	224		20	120	84	0	Includes the budget for long life kitchens on stations. The remainder will be spent on other improvements throughout the year.



Theale Fire Station		1,981	1,981	19	1,050		100	812	Site acquisition will be followed by 6 months design phase and then an estimated 12-15 months build phase. The completion is expected in Summer 2018, and the unspent budget needs to roll forward to support this timetable.
Microsoft Licensing		0	149	149	176			(27)	An IT equipment review identified a higher number of machines requiring licences, alternative sources of funding are being explored.
IBIS redevelopment or replacement		0	45	45	22	18	5	0	To complete the IBIS works a specialist programmer has been engaged. The project is expected to be completed by March 2017, additional resources are being sought to allow this to happen.
Firewatch phase 2 implementation		0	10	10	0	10		0	Project to complete in line with expectations. There will be an new bid for phase 3 works.
Virtualisation Project		0	68	68	50	18		0	The project is due for completion early Q2.
ICT Hardware		150		150	0			150	Bids to be developed
ICT Software		150		150	0			150	Bids to be developed
ICT Networks		50		50	0			50	Bids to be developed
ICT Security and Resilience		100		100	0			100	Bids to be developed
Light Vehicles		0	96	96	0	96		0	Vehicles to be delivered in quarter 2
Appliances x 4		1,000		1,000	0		800	200	Delivery of vehicles anticipated to be in March 2017.

Specials		250		250	0			250	0	Operational requirements being finalised.
Other Ancilliary Vehicles		75		75	0			75	0	Operational requirements being finalised. Vehicles likely to be delivered by Feb 2017.
<b>Total</b>		<b>5,086</b>	<b>652</b>	<b>5,738</b>	<b>346</b>	<b>1,318</b>	<b>271</b>	<b>2,035</b>	<b>1,768</b>	

### Appendix 3 Corporate Measure Definitions

ID	Measure	Description
1.	Number of Fire Deaths in accidental Dwelling fires	The total number of deaths which occur as a result of a dwelling fire.
2.	Number of Fire Casualties in accidental Dwelling Fires	The total number of casualties which occur as a result of a dwelling fire.
3.	Number of people killed or seriously injured on Berkshires Roads*	Data for this measure comes from Thames Valley Police and shows all fatality and casualty data for Berkshire, including incidents where RBFRS does NOT attend.
4.	Number of 999 Calls answered	This reflects the total number of 999 calls answered by TVFCS. Some of these will be duplicate calls to the same incident.
5.	Number of emergency incidents mobilised to	This is a new measure for 2016/17. The total number of emergency incidents which RBFRS emergency vehicles were mobilised to, including those where the outcome was a false alarm.
6.	Time to answer emergency calls in 5 seconds	This is time it takes for TVFCS to answer incoming 999calls.
7.	Time to answer emergency calls in 10 seconds	
8.	Time to mobilise within 60 seconds	This is the time taken for TVFCS to mobilise appliance(s) from the time the call incoming 999 was answered.
9.	Time to mobilise within 90 seconds	
10.	Time to mobilise within 120 seconds	
11.	How often a Front Line Appliance attends a dwelling Fire with the 1 <sup>st</sup> arriving in 8 and the 2 <sup>nd</sup> arriving in 10 minutes as a percentage of all dwelling fires	
12.	How often a Front Line Appliance attends a dwelling Fire with the 1 <sup>st</sup> arriving in 10 and the 2 <sup>nd</sup> arriving in 12 minutes as a percentage of all dwelling fires	The standard is measured from the time crews are alerted on station until the time a fire appliance gets to the fire.
13.	How often a Front Line Fire Appliance attends a RTC with resources for extrication of casualties within 11 minutes as a percentage of total RTC calls	The standard is measured from the time crews are alerted on station until the time a fire appliance gets to the RTC.
14.	% availability of whole time front line appliances	This is the % of shifts where at least minimum crewing levels are maintained on whole time appliances.

ID	Measure	Description
15.	For Retained duty system % availability of retained duty system front line fire appliance	This is the % of shifts where at least minimum crewing levels are maintained on retained appliances.
16.	% of vulnerable people receiving a HFSC compared to total number of HFSC's carried out	This is the percentage of the total Home Fire Safety Checks where the recipient was within current vulnerable groups
17.	% of dwelling fires where no smoke alarm is installed	This reflects the percentage of dwelling fires attended by RBFRS where there was no smoke alarm installed.
18.	% of category 1 HFSC referrals completed within 3 working days	This is a new measure for 2016/17. Category 1 referrals are where there has been a threat or incidence of arson.
19.	Number of Fire Safety Inspections carried out	This is the total number of closed fire safety audits carried out in commercial premises in Berkshire.
20.	Fire Protection number of audits and inspections where the results were satisfactory	This is the number of closed fire safety of audits carried out in commercial premises where the result was satisfactory and no further action is required.
21.	Fire Protection number of premises requiring informal activity	This is the number of closed fire safety audits carried out which resulted in informal activity. This includes a deficiency notice, with or without follow-up or informal education.
22.	Fire Protection number of premises requiring formal activity	This is the number of closed fire safety audits carried out which results in informal activity. This includes premises requiring an enforcement notice, prohibition notice, alterations notice, or prosecution notice.
23.	% success rate when cases go to court	This is the percentage of successful prosecutions following fire safety audits.
24.	% of domestic respondents satisfied with the overall service	Results are from a customer satisfaction survey which seeks feedback from those who have had an incident that RBFRS attended and asks about their experience and satisfaction with the Service they received.
25.	% of commercial respondents satisfied with the overall service	
26.	% of respondents satisfied with the services with regards to Fire Safety Audits	

ID	Measure	Description
27.	Establishment Planned vs. Actual (the planned establishment for each RDS station against the actual number of RDS employees)	This measure reflects the planned the Full Time Equivalent (FTE) Established posts against the number of FTE Actual people based on the actual hours of availability.
28.	% of working time lost to sickness across all staff groups	This measure looks at sickness across the whole organisation and the percentage of time lost based on the number of working hours available to the organisation.
29.	% of Eligible operational staff successfully completing fitness test	The measure reflects the percentage of operational personnel who have successfully completed their fitness test. Individuals who are not eligible include those on long term sick or light duties.
30.	All injury accidents including RIDDOR	This measure looks at the number of more serious accidents (RIDDOR) against the total number of accidents within RBFRS.
31.	% of eligible staff with PDIs	This measure reflects the percentage of eligible employees who have had a PDI (Personal Development Appraisal). Eligible staff are those who have completed their initial probation period before the end of the PDI 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 PDI.
32.	Number of capital projects whose forecasted outturn has a variance of more than 10% compared to the annual budget	This is the number of capital projects where the outturn has a variance of more than 10%. However, the status of expenditure projects could vary significantly, but still be on track for yearend/ project completion
33.	Number of revenue cost centres whose forecasted outturn has a variance of more than 10% compared to the annual budget	This is the number of revenue cost centres whose outturn has a variance of more than 10%. However during the year these could vary significantly, but still be on track for year end. Also, all departments should be operating within the annual budget.
34.	% of expenditure less than 10K	Expenditure of less than £10k currently sit outside the rigors of good procurement practice. This is third party expenditure
35.	Contracted spend as a % of overall spend	This is the total contracted paid expenditure as a percentage of the total (third party) paid expenditure.
36.	Total expenditure per head of population	This is the level of expenditure that the Authority deems necessary to deliver an effective service.
37.	% FOI requests referred to the Information Commissioner	The percentage of Freedom of Information requests which have to be referred to the Information Commissioner

This page is intentionally blank